

**DOCTOR OF PHYSICAL THERAPY PROGRAM
GANNON UNIVERSITY – ERIE CAMPUS**

**CLINICAL EDUCATION HANDBOOK
2023 - 2024**

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GANNON UNIVERSITY
Doctor of Physical Therapy Program
Clinical Education Handbook
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PART I: PHILOSOPHY AND GOALS OF PHYSICAL THERAPIST EDUCATION

A. PHILOSOPHY OF PHYSICAL THERAPIST EDUCATION

Physical therapists are integral members of the health care team who are recognized and respected for their education, experience, and expertise in movement, function and health. The Doctor of Physical Therapy Program at Gannon University is guided by the following tenets:

- The essence of physical therapy practice is patient/client-centered management for body functions, activity and participation related to movement, function and health.
- Professional physical therapist education should prepare individuals to be autonomous practitioners capable of providing direct access.
- Active, integrative and experiential learning methods promote student self-reliance, increase self-assessment skills and develop a pattern of independent learning that will promote lifelong learning and continuing professional development.
- Evidence-based practice (EBP) is the framework for physical therapy practitioners' clinical decision making. EBP skills are cultivated through development of self-directed learning, utilizing a variety of resources that are enhanced by technology.
- The health care environment is continually evolving. Physical therapist practice encompasses roles in primary, secondary, and tertiary care, as well as prevention, health promotion and wellness.
- Practitioners are educators who use their knowledge, creativity, communication and interpersonal skills to promote the health of individuals and communities.
- Global citizenship is expressed within the practitioner's life by advocating for equitable allocation of healthcare resources, providing of culturally sensitive care; maximizing multicultural learning; cultivating awareness and perspective of the global society; and understanding the existence of, the cause of, and our role in addressing health disparity.
- Competency based education ensures that practitioners demonstrate proficiency in knowledge, psychomotor, and affective domains.
- Professionalism is an integral part of physical therapy education and practice.

B. PROGRAM VISION

Gannon University's Doctor of Physical Therapy Program at the Erie Campus will be a leader in educating autonomous physical therapists who participate in integrative and collaborative practice to facilitate high quality health and educational outcomes. We will be practitioners of choice in the community, recognized as experts in movement, function and health. As leaders we will embrace our social responsibility, promote humanistic care, and contribute to the profession's body of knowledge.

C. PROGRAM MISSION

The mission of the Doctor of Physical Therapy Program at Gannon University Erie Campus facilitates holistic patient/client-centered management related to movement, function and health. We prepare our graduates to be knowledgeable, service-oriented, reflective practitioners. Our graduates render evidence based, professional judgments concerning patient client needs by virtue of critical thinking, interprofessional collaboration, lifelong learning and adhering to ethical principles. They possess the intellect, psychomotor proficiency, leadership capabilities, and core values to meet the current and future needs of the profession, the health care system, and society.

D. PROGRAM GOALS

Consistent with the University's and Program's Mission Statement, the goals of the Doctor of Physical Therapy Program at Gannon University Erie Campus are to:

1. The DPT Program and DPT faculty will deliver evolving contemporary, evidence-based professional Doctor of Physical Therapist education.

2. The DPT Program will develop students to become knowledgeable, service-oriented, collaborative practitioners.
3. The DPT Program and DPT faculty will support the growth of physical therapy by developing students/graduates who engage in ongoing professional development.
4. The DPT Program, DPT faculty, and students/graduates will promote the health, wellness, and quality of life in the community and society.
5. The DPT faculty will contribute to the advancement of knowledge in physical therapy and health science through scholarly activity.
6. The DPT faculty and students/graduates will model professionalism through involvement in the University, the profession and associated organizations.

E. PRACTICE EXPECTATIONS AND EDUCATIONAL OUTCOMES

The Erie Campus Doctor of Physical Therapy Program's overall curriculum goals and educational outcomes are defined by the physical therapy profession's practice expectations which encompass behaviors, skills, and knowledge that describe the expected performance of the physical therapist. Practice expectation goals occur in four different areas: 1) professional ethics, values and responsibilities; 2) patient/client management; 3) participation in the healthcare environment; and 4) practice management. In aggregate, they delineate the educational outcomes and performance of the graduate upon entry into the practice of physical therapy. The overall outcomes expected of each student while in the program and at graduation have been identified and are assessed based on progression through the curriculum.

Outcomes of Students While in the DPT Program

Develop competence in patient/client centered care management for body functions, activity and participation related to movement, function and health.

Demonstrate professionalism and ethical behavior in all aspects of the education, community and clinical setting.

Develop skills to incorporate evidence-based practice in clinical decision-making.

Develop skills in educating, collaborating and communicating with patients/clients, caregivers, colleagues, payers and policy makers.

Outcomes of Students by Graduation

Competent in patient/client centered care management for body functions, activity and participation related to movement, function and health.

Demonstrate professionalism and ethical behavior in all aspects of the educational, community and clinical setting.

Incorporate evidence-based practice in clinical decision-making.

Skilled in educating, collaborating and communicating with patients/clients, caregivers, colleagues, payers and policy makers.

PART II: PHYSICAL THERAPY CLINICAL EDUCATION

A. PHILOSOPHY OF CLINICAL EDUCATION

As an experiential learning process, clinical education represents an integral part of the total physical therapy curriculum. Attainment of competencies as a physical therapist depends upon integration of

didactic and clinical learning experiences. While didactic education provides a basis for the development of appropriate problem-solving abilities and a knowledge base, clinical education provides an opportunity for refinement of those knowledge, skills, and behaviors which characterize a competent, entry-level practitioner. Clinical education requires mutual endeavors by the academic faculty, the clinical faculty, and the student to achieve the common goal of clinical competence. The academic faculty holds primary responsibility for preparing the student didactically and coordinating placement of the student in appropriate clinical facilities. The clinical faculty provides appropriate learning experiences and evaluates the student's performance. Responsibilities of the student includes recognition and communication of the student's own abilities and limitations according to academic level, previous clinical experiences, and personal attributes. All involved individuals must efficiently and effectively communicate to attain the overall goal of clinical competence.

B. LEARNING EXPERIENCES

In a competency-based education system the outcomes or objectives can be used for planning a student's program and evaluating the clinical performance. The objectives can be further defined by the clinical instructors, based on the needs, requirements and resources of the facility and the student. The outcomes can be used to determine a student's starting level and to identify areas of deficiency which become the foci for subsequent learning. In summary, outcomes provide a system for planning learning experiences and for assessing performance based on a student's needs, expectations, and abilities in specific areas.

To provide an optimal clinical experience, much thought and planning should precede the arrival of a student and continue throughout the student's stay. Criteria for an optimal clinical learning experience include, but are not limited to, the following:

1. The clinical environment should provide an atmosphere which:
 - a) Encourages people to be active (rather than passive) learners.
 - b) Promotes self-discovery of the personal meaning of ideas.
 - c) Emphasizes the subjective nature of learning (recognizes individual contributions).
 - d) Allows people the right to make mistakes.
 - e) Recognizes difference as good and desirable.
 - f) Tolerates ambiguity and permits confrontation.
 - g) Emphasizes cooperative or self-evaluation.
 - h) Encourages openness of self (rather than concealment).
 - i) Encourages people to trust in themselves as well as external sources.
 - j) Makes people feel accepted and respected.¹
2. The clinical experience should be practical in terms of space, equipment, time and personnel available.
3. The learning experience should be appropriate to the student's level of attainment and predispositions.²
4. The well-planned learning experience should help fulfill more than one objective.²
5. The clinical experience should use a problem solving approach -- think, analyze and solve -- develop concepts (i.e., do not continually "spoon-feed" information to the student).
6. The clinical experience should be built around pre-established objectives.
7. The clinical experience should provide for increased complexity in student-patient involvement throughout the curriculum.
8. The clinical experience should include exposure to real life situations to allow practice in communication, documentation, problem solving, inter-departmental relations, and medical-legal aspects of patient care in a variety of settings. The clinical experience should also allow practice with patients who have various types of movement related problems across the lifespan.
9. The students should have experience in dealing with different levels of health care workers (physicians to aides) within physical therapy and the facility.

C. CRITERIA FOR CLINICAL EDUCATION FACILITIES

The practical application of the didactics of the classroom in the clinical setting represents an integral part of the physical therapy educational program. The development of competent performance as an entry-level physical therapist depends heavily upon practice in a real-life setting.

The primary consideration in the selection of a facility for clinical education lies in the desire of the facility to actively participate in the education of future physical therapists. This desire should be fully supported by the administrative as well as the professional staff.

Specific criteria³:

1. The philosophy of the clinical education site and provider of physical therapy for patient/client care and clinical education is compatible with that of the academic program.
2. Clinical education experiences for students are planned to meet specific objectives of the academic program, the provider of physical therapy, and the individual student.
3. Physical Therapy personnel provide services in an ethical and legal manner.
4. The clinical education site is committed to the principle of equal opportunity and affirmative action as required by federal legislation.
5. The clinical education site demonstrates administrative support of physical therapy clinical education.
6. The clinical education site has a variety of learning experiences available to students.
7. The clinical education site provides an active, stimulating environment appropriate to the learning needs of students.
8. Selected support services are available to students.
9. Roles and responsibilities of physical therapy personnel are clearly defined.
10. The physical therapy personnel are adequate in number to provide an educational program for students.
11. A Site Coordinator of Clinical Education (SCCE) is selected based on specific criteria:
 - a) Has specific qualifications and is responsible for coordinating the assignments and activities of students at the clinical education site.
 - b) Demonstrates effective communication and interpersonal skills.
 - c) Demonstrates effective instructional skills.
 - d) Demonstrates effective supervisory skills.
 - e) Demonstrates effective performance evaluation skills.
 - f) Demonstrates effective administrative and managerial skills.
12. Physical Therapy Clinical Instructors (CIs) are selected based on specific criteria:
 - a) Demonstrates clinical competence and legal and ethical behavior that meets or exceeds the expectations of members of the profession of physical therapy.
 - b) Demonstrates effective communication skills.
 - c) Demonstrates effective behavior, conduct, and skill in interpersonal relationships.
 - d) Demonstrates effective instructional skills.
 - e) Demonstrates effective supervisory skills.
 - f) Demonstrates effective performance evaluation skills.
13. Special expertise of the clinical education site personnel is available to students.
14. The clinical education site encourages clinical educator (CI and SCCE) training and development.
15. The clinical education site supports active career development for personnel.
16. Physical therapy personnel are active in professional activities.
17. The provider of physical therapy has an active and viable process of internal evaluation of its affairs and is receptive to procedures of review and audit approved by appropriate external agencies and consumers.
18. The clinical site must be willing to sign a contract agreement with Gannon University.

Clinical facilities are strongly encouraged to use the APTA Guidelines and Self-Assessments for Clinical Education in the development, evaluation, and education of clinical instructors and a clinical education program.

Gannon University, in conjunction with the Three Rivers Academic Consortium, routinely provides the APTA Clinical Instructor Credentialing program to interested Clinical Instructors and Site Coordinators of Clinical Education.

¹ Rammel, Martha L., Influence of the Organizational Environment on Clinical Education, 1980, unpublished.

² APTA, Handbook for Physical Therapy Teachers, 1967, New York, pp. 197-199.

³ APTA Guidelines and Self-Assessments for Clinical Education, 1999; available at www.apta.org

PART III: THE CLINICAL EDUCATION EXPERIENCE AT GANNON UNIVERSITY

A. CURRICULUM PLAN

Building on the study of normal structure and function, the curriculum plan uses a theoretical base to build courses and learning experiences which prepare the student for the contemporary practice of physical therapy. Beginning with basic sciences, followed by clinical and physical therapy sciences, systems-based sequencing of the movement systems of musculoskeletal, neuromuscular, cardiovascular, pulmonary and integumentary are presented. Elements of the patient/client management model including examination, evaluation, physical therapy differential diagnosis, prognosis, intervention, and outcomes are integrated into each of the clinical science courses. Both clinical science and research content are framed within an evidence-based practice format, utilizing current scientific research in conjunction with clinical experience for a specific patient/client problem within the physical therapists' scope of practice. Concepts between and within each course are cumulative and competency based, and continued enrollment depends upon mastery and use of previous concepts. Practical clinical experiences are integrated into the academic program to allow immediate application of didactic material. The Directors of Clinical Education assign students to clinical sites, based on student and learning goals. In addition to sites in the Erie and western Pennsylvania areas, the program offers *many* clinical experiences at sites throughout the country. This enables the student to have the opportunity to practice with a culturally diverse client population and learn various physical therapy approaches from experienced clinicians.

B. CURRICULAR DESIGN OF CLINICAL EXPERIENCES

The Erie Campus Doctor of Physical Therapy Program's curricular design represents a hybrid, competency-based curriculum organized around body systems. The curriculum includes full-time clinical experiences integrated into the curricular plan at times appropriate for the student to practice and refine the assessment process and skills learned. The clinical education component serves to augment and enhance the didactic portion of the curriculum.

We adopted the integrated approach to clinical experiences throughout the students' professional education for the following reasons:

1. To allow students the opportunity to practice and refine their assessment process, skills and techniques shortly after they cover that material.
2. To provide a mechanism to assess student performance at a variety of points in the curriculum.
3. To continue the problem-oriented building process in the clinical education component as well as the didactic component.

The recommended emphasis of each clinical experience is detailed below and is created as a guideline for student's consideration in the selection of their experiences. Availability of sites at certain times of the year requires flexibility on the part of the student.

- The first full-time clinical experience (10 weeks) takes place in the first year immediately following completion of the students' study of the musculoskeletal system. This experience provides

students with an opportunity to apply knowledge and skills for individuals with musculoskeletal movement system dysfunction.

- The second full-time clinical experience (10 weeks) takes place following the second year of didactic material. Students are assigned to facilities where they work with individuals with neuromuscular, cardiovascular and pulmonary, integumentary, and other movement system dysfunctions.
- The third full-time clinical experience (8 weeks) occurs in the fall of the third year, after all didactic coursework is completed. This clinical experience is designed to provide students with additional exposure to individuals with neuromuscular, cardiovascular and pulmonary, integumentary, and other movement system dysfunctions.
- The final twelve-week clinical experience (12 weeks) in the third year, allows the student to pursue areas of specialty practice such as working with individuals with movement dysfunctions associated with pediatric, geriatrics, and sports-related conditions as well gaining exposure to clinical research, education, administration and so forth.

Gannon University's Erie DPT curriculum is designed to prepare a generalist practitioner, who is successful in fulfilling competency on the National Physical Therapist Examination (NPTE) and in general practice. Clinical experiences are planned to ensure each student works with patients/clients throughout the lifespan, in a variety of settings within the continuum of care, and with diagnoses related to musculoskeletal, neuromuscular, cardiovascular and pulmonary, integumentary, and other movement system dysfunctions. Each student is expected to plan well-rounded clinical exposure to prepare to be a generalist. Pursuit of specialty interests and practice is available through electives, projects, and clinical experiences.

C. CURRICULUM SCHEDULE

1st Semester - Fall		Credits
GDPT 802	Foundations in Pathology and Medical Management for the PT 1	3
GDPT 810	Health Care System & Policy 1	2
GDPT 811	Applied Anatomy	2
GDPT 818	Foundations in Human Movement	6
GDPT 815	Essentials of Physical Therapy Practice	2
GDPT 816	Community Health Initiative 1	<u>1</u>
	Total	16
2nd Semester - Spring		
GDPT 812	Foundations in Pathology and Medical Management for the PT 2	2
GDPT 814	Evidence-Based Practice 1	2
GDPT 822	Examination, Evaluation & Interventions for Musculoskeletal Movement Dysfunction of the Extremities (with lab)	9
GDPT 825	Examination, Evaluation and Interventions for Musculoskeletal Movement Dysfunction of the Spine (with lab)	4
GDPT 826	Community Health Initiative 2	<u>1</u>
	Total	18
3rd Semester - Summer		
GDPT 830	Health Care System & Policy 2	2
GDPT 831	Foundations in Geriatrics	2
GDPT 832	Clinical Experience 1 (10 weeks)	<u>5</u>
	Total	9
4th Semester - Fall		
GDPT 821	Examination, Evaluation & Interventions for Cardiovascular & Pulmonary Dysfunction 1	2
GDPT 841	Foundations in Pediatrics	4

GDPT 843	Examination, Evaluation, & Interventions for Neuromuscular Movement Dysfunction 1	4
GDPT 848	Neuroscience (with lab)	5
GDPT 847	Clinical Synthesis 1	1
GDPT 844	Evidence-Based Practice 2	<u>1</u>
	Total	17

5th Semester - Spring

GDPT 823	Examination, Evaluation & Interventions for Cardiovascular & Pulmonary Dysfunction 2	3
GDPT 850	Health Care System & Policy 3	2
GDPT 853	Examination, Evaluation, & Interventions for Neuromuscular Movement Dysfunction 2 (with lab)	9
GDPT 854	Evidence-Based Practice 3 & Guidance	2
GDPT 856	Community Health Initiative 3	<u>1</u>
	Total	17

6th Semester - Summer

GDPT 862	Clinical Experience 2 (10 weeks)	5
GDPT 867	Clinical Synthesis 2	1
GDPT 860	Health Care System & Policy 4	1
GDPT 866	Community Health Initiative 4	<u>1</u>
	Total	8

7th Semester - Fall

GDPT 873	Examination, Evaluation, & Interventions for Integumentary & Multi-System Movement Dysfunction	4
GDPT 870	Health Care System & Policy 5	2
GDPT 872	Clinical Experience 3 (8 weeks)	4
Elective		<u>2-3</u>
	Total	12-13

8th Semester - Spring

GDPT 882	Clinical Experience 4 (12 weeks)	6
GDPT 887	Clinical Synthesis 3	2
GDPT 886	Community Health Initiative 5	1
Elective		<u>2-3</u>
	Total	11-12

Total Credits 109-110

D. CLINICAL EDUCATION OUTCOMES

COURSE OBJECTIVES: At the completion of this course the student will be able to:

Course OBJECTIVES	CAPTE Standards and Elements	Assessment Method	DPT Student Outcome
1. Practice in a safe manner that minimizes the risk to patient, self, and others.	7D24, 7D33	G	1
2. Demonstrate professional behavior in all situations.	7D5	G	2
3. Practice in a manner consistent with established legal and professional standards and ethical guidelines.	7D1, 7D4, 7D5, 7D6	G	2

4. Communicate in ways that are congruent with situational needs.	7D7	G	4
5. Adapt delivery of physical therapy services with consideration for patient's differences, values, preferences, and needs.	7D8	G	2
6. Participate in self-assessment to improve clinical and professional performance.	7D5, 7D15	G	2
7. Apply current knowledge, theory, clinical judgment, and the patient's values and perspectives in patient management.	7D10	G	1, 3
8. Determine with each patient encounter the patient's need for further examination or consultation by a physical therapist or referral to another health care professional.	7D16	G	1
9. Perform a physical therapy patient examination using evidenced-based tests and measures.	7D19	G	1
10. Evaluate data from the patient examination (history, systems review, and tests and measures) to make clinical judgments.	7D20	G	1
11. Determine a diagnosis and prognosis that guides future patient management.	7D22, 7D23, 7D26	G	1
12. Establish and monitor a physical therapy plan of care that is safe, effective, patient-centered, and evidence-based.	7D23, 7D24, 7D30	G	1, 3
13. Perform physical therapy interventions in a competent manner.	7D27	G	1
14. Educate others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods.	7D12, 7D15	G	1, 4
15. Produce quality documentation in a timely manner to support the delivery of physical therapy services.	7D32	G	1
16. Collect and analyze data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes.	7D31	G	1, 3
17. Participate in the financial management (budgeting, billing and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal, and facility guidelines.	7D40, 7D42, 7D43	G	1
18. Direct and supervise personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines.	7D25, 7D28, 7D29	G	1

E. CLINICAL EXPERIENCE COURSE REQUIREMENTS

1. Assignments

POLICY: All students are required to complete assignments during clinical education experiences.

PROCEDURES/PRACTICES: Assignments are required throughout each clinical experience. Assignment details and schedules will be outlined for each clinical experience course on Blackboard. Assignments will include:

- Periodic activity log/journal submissions
- Periodic discussion board forums

- Self-Evaluation: midterm and final using the Clinical Performance Instrument (CPI).
- Student Assessment of Clinical Experience

2. In-service Education Presentation or Special Project

POLICY: Students are expected to complete an in-service or a special project during each clinical experience. Guidelines are described below. Upon completion, the student must complete and submit the inservice/special project form as outlined in each clinical experience course on Blackboard.

PROCEDURES/PRACTICES:

GUIDELINES FOR INSERVICE EDUCATION PROGRAMS

The content of the in-service education program must either focus on the physical therapy profession in general or a specific topic of interest to the student and the audience. The student may not provide an in-service that they have previously provided at another clinical experience or that is an independent study or research topic, unless granted permission by the DCE. Student must seek permission to utilize course materials provided by faculty.

GUIDELINES FOR SPECIAL PROJECTS

A special project is an identifiable contribution the student makes to the facility which remains after the student finishes the clinical experience. This may take the place of an in-service **ONLY** if approved by the clinical site. The project can take any form mutually agreed upon by the CI and the student. Some past projects by students have included patient information booklets developed for clinic sites, marketing presentations, quality improvement projects and health fair presentations.

3. Late Documentation

POLICY: Adherence to due dates for all clinical education course related items is expected.

PROCEDURES/PRACTICES: Due dates for assignments will be outlined on Blackboard. Instances of late submission will be tracked and further action will be taken in accordance with the guidelines below.

First warning: A first letter of warning will be issued with two late submissions within the same clinical rotation.

Second warning: A second letter of warning will be issued with two additional late (for a total of 4) submissions within the same clinical rotation. The letter will be placed in the student's program file.

Third warning: A third letter of warning will be issued with two additional late submissions (for a total of six) within the same clinical rotation. This level of warning will result in review of student performance by the Student Performance Committee and Professional Probation.

PART IV: POLICIES AND PROCEDURES FOR CLINICAL EDUCATION

A. ESTABLISHING A CLINICAL SITE

POLICY: All clinical education sites determined by the DCE to meet the requirements of providing a quality learning experience will establish a legal contract with Gannon University and will have access to “amenities” at Gannon University to maintain effective clinical teaching.

PROCEDURES/PRACTICE:

When a potential clinical site is identified, the DCE will converse with the SCCE regarding the site’s ability to provide a quality learning experience. Assuming the site is willing to develop a clinical relationship, the following forms must be completed:

1. Contract agreement with appropriate signatures
2. Professional liability insurance form
3. Any additional materials about the site that will aid the student

While it is beyond the scope of Gannon University to provide monetary rewards in exchange for providing a clinical education site, certain "amenities" are available. These include:

1. The ability to purchase books through the Gannon University bookstore at discount.
2. Notification of any workshops held in the Western Pennsylvania area on clinical education. This includes all courses offered through the Three Rivers Academic Consortium.
3. A notification of continuing education courses conducted by Gannon University faculty members throughout the year.
4. Use of Nash Library services.

As the Physical Therapy Program maintains an adequate list of clinical experiences, a student may assist with obtaining information for the development of new clinic sites. Students may provide the name of the facility and location for the DCE. The DCE will then contact the site. If a student contacts a facility without permission from the DCE, the student will not be granted placement at that site.

NOTE: Additional communication with the clinical site in advance of students entering the clinical environment in the setting of the COVID pandemic have been established by the university. Please refer to Appendix A to review the form for this communication.

B. STUDENT SELECTION OF CLINICAL SITE

POLICY: Students are required to submit site selection information regarding clinical experience placement in a timely manner.

PROCEDURES/PRACTICES:

- As determined by the DCE and within a reasonable timeframe prior to each full-time clinical experience, a listing of available clinical sites will be provided to the student. Additional information for each site is available within clinical education materials. The student is advised to review the list, review the information about the sites (including location, patient population, staffing, housing, etc), and choose a minimum of five selections that the student would be willing to consider for placement.
- **It is the student’s responsibility to meet with the DCE to discuss any concerns/issues regarding a site and/or the site selection process.**

- When those selection lists have been submitted by the established date, the DCE will make the site assignments. Every attempt will be made to consider the academic, financial, and personal needs of each student. The program cannot guarantee, however, that all needs will be met at all times. The academic needs of the student represent the first priority in the final decision for clinical placement.
- A student may not be placed at a clinical site where they have had volunteer or work experience.
- A student will not be placed at a site where he/she has a post-graduation contract/scholarship agreement.
- The DCE makes the final decision for student placement.
- Once a student is placed, any request for change must be submitted in writing followed by a meeting with the DCE. There is no guarantee that the request for change will be accommodated.

C. INFORMATION PROVIDED TO THE CLINICAL SITE

POLICY: All secured clinical sites will receive all necessary information related to the clinical expectations for the experience, student information, and access to the Clinical Performance Instrument (CPI).

PROCEDURES/PRACTICES: Prior to a student's arrival, the following information will be provided to the facility:

- APTA Clinical Performance Training and Login Information
- Student Personal Data Form
- Student Self - Assessment of Competency Form
- Clinical Education Course Syllabus
- Curriculum Plan
- Certificate of Liability Insurance
- Rights and privileges for the clinical instructor
- Previous Course Syllabi and Clinical Education Handbook available upon request

Note: Due to the current COVID pandemic, students will complete university-mandated COVID training. Clinic sites will receive a certificate verifying the successful completion of this training by the students prior to their arrival at clinic. The COVID training modules are outlined in each cohort's Blackboard Clinical Education organization.

D. STUDENT PREPARATION FOR CLINICAL EXPERIENCE PARTICIPATION

POLICY: Each student is responsible for his/her preparation for attending the clinical experience. Any student who fails to complete all necessary responsibilities at designated times risks forfeiting his/her clinical placement.

PROCEDURES/PRACTICES:

- Prior to the start of the clinical experience, the student will contact the designated site at a time determined by the DCE. During this communication, students will review all information about the site, including health requirements, dress code, hours of operation, directions, etc. Confirmation of this review will be turned into the DCE at a designated time.
- Students are responsible for arranging housing and transportation well in advance of clinical experience.
- Students will prepare a copy of health forms, current CPR certification, current health insurance coverage, and clearances for the designated site upon the start of their clinical experience.
- Students are responsible for the accessibility to appropriate academic resources such as notes, laptops, and other necessary items during their clinical experience.

Note: Upon successful completion of COVID training as outlined in Appendix B, the student will be required to sign the "Student Acknowledgement for Return to Clinical Experiences/Practicum Experiences" within timeframes designated by the university.

E. STUDENT SERVICES

POLICY: The program informs all incoming and enrolled students of the campus services and/or resources available for students, most of which are free of charge. *Student Success Center* is available to assist students with improving their academic and research writing style. *Office of Global Support and Student Engagement* offers support, advice and local and community resources for all international students and all different backgrounds. Gannon University's *Nash Library* is available for all Gannon students, providing full access to computer rooms and interlibrary loans of thousands of journals. *Student Counseling Services* offers workshops, individual and couples counseling for students in need. At the *Student Health Services*, a nurse practitioner is available to do health checks and treat minor illnesses and injuries during the fall and spring semesters. The *Recreation and Wellness Center* is available for all Gannon students with an ID and provides a wide range of programs to suit all.

F. PROCEDURE FOR CONTINUING A CLINICAL EDUCATION AGREEMENT

POLICY: Decisions to continue using a clinical site will be determined by the DCE with information from the site visit, student feedback and the final student evaluation of the site.

PROCEDURE/PRACTICES:

- The ongoing use of a clinical education site is generally a mutual decision between the University and the site.
- Each time a student attends a site for a full time clinical education experience, the student completes a final evaluation of the experience at that site.
- When a faculty member or DCE completes the site visit, a review of the site is completed.
- In the event that a concern arises about a specific site, that concern is investigated and addressed as necessary, keeping in mind the individuals involved, the circumstances, and the changes that occur in health care. The use of a site may change, after feedback is received.
- The mutual decision to continue use of a clinical site occurs with the renewal of the contract.
- Each year during the month of March, Gannon University Erie DPT physical therapy program will send the Clinical Education Placement Form to each facility as indicated.
- This form, which aids in planning clinical sites for the upcoming year, should be completed and returned to the University in April.
- Even if a site should not be considered for the next year, but wishes to remain on the list, this form should be completed and returned.
- If changes occur in staffing levels/availability, the SCCE should contact the DCE with the information.

G. CONFIDENTIALITY STATEMENT FOR CLINICAL EDUCATION

POLICY: Students, clinical instructors, and patients have the right to privacy.

PROCEDURES/PRACTICES:

Students are advised to share pertinent information (problems, concerns, learning needs) with clinical instructor(s) and/or the SCCE/CI so that they may be aware and provide the best learning experience possible. Faculty members may suggest to the student that specific issues be shared with the Clinical site, however, there may also be instances when the DCE/faculty member will ask the student for permission to discuss specific issues with the clinic site.

Patients have the right to refuse treatment as well as refuse care by the student and students must abide by this decision.

H. CLINICAL EDUCATION MEETINGS

Clinical education meetings are scheduled for the purpose of selecting affiliation sites, reviewing clinical course objectives, reviewing program and site health care and personnel safety requirements, discussing current clinical education issues, evaluation processes, and exchanging information.

POLICY: Attendance by all students at clinical meetings is mandatory.

PROCEDURES/PRACTICES: Attendance is monitored at each meeting. Students who fail to attend without permission from the DCE, will forfeit their right to participate in the selection process and will be assigned to their clinical experiences by the DCE.

I. COMMUNICATION WITH THE DCE

POLICY: Consistent with the philosophy of physical therapy education at Gannon University, it is expected that students actively participate in the teaching-learning process.

PROCEDURES/PRACTICES:

- The student must take the initiative for their clinical education experiences demonstrated by a thorough investigation of available clinical experiences and active engagement in the clinical education process.
- Discussion can be held with the DCE concerning the site about any special needs or circumstances that must be considered.
- Communication with the clinic site and the involved parties is encouraged if there is the perception of a problem.
- The DCE is available as outlined on the course syllabus while the student is enrolled in the PT program.
- Questions or concerns related to clinical education should always be discussed with the DCE first.
- Concerns regarding the student's clinical experience will be discussed only with parties involved and other faculty if needed.
- As concerns arise at times while the student is on a clinical experience, it is the student's responsibility to make themselves available (by telephone at a minimum) to the DCE as necessary.
- Students are expected to monitor their Gannon email accounts on a regular basis for correspondence from the DCE.
- Students are required to complete all assignments for each clinical experience.

J. PROBLEM RESOLUTION IN CLINICAL EDUCATION

POLICY: All clinical education problems that are brought to the DCE by students, clinical instructors, or SCCEs will be taken seriously and handled directly with all parties involved, and, if necessary, involve the addition of any necessary personnel. We ask all participants in the clinical education process to support the right of individuals to open and confidential communication to maximize the learning potential of all involved.

PROCEDURES/PRACTICES:

- As soon as a problem is identified, it will be discussed only between the people involved.
- If either person believes other intervention is needed or they are not able to deal directly with one another, either person or both should speak with the Site Coordinator of Clinical Education (SCCE).
- If the problem cannot be resolved at this level, the SCCE will contact the Director of Clinical Education (DCE).
- If a student brings a problem directly to the DCE, the student will be advised to follow the steps outlined above.
- We understand that some smaller departments and private practices may not have both a Clinical Instructor and a SCCE, but the steps should remain essentially the same.
- In addition, we acknowledge the need for directors and unit supervisors to be notified of any major problems.
- The DCE will make available to each student the procedure for making contact, in the event that the DCE is not in the office.
- In the event of an emergency, the student should contact the Physical Therapy Program Office by calling (814) 871-5639.

K. SEXUAL HARASSMENT COMPLAINT PROCEDURES

Sexual harassment includes any behavior of a sexual nature that is, or may be perceived as being unwelcome or offensive. Sexual harassment, by its very nature, violates the basic right of each individual to be treated as a person worthy of respect, and is in direct contradiction to the Gannon University mission. It is also a violation of state and federal laws.

Such conduct includes sexual advances, requests for sexual favors and other verbal or physical conduct or communication of a sexual nature directed toward a member of the Gannon community or applicant, particularly when one or more of the following circumstances are present:

- submission to such conduct is an explicit or implicit term or condition of academic/clinical evaluation;
- submission to or rejection of such conduct is used as a basis for an academic/clinical evaluation affecting the individual;
- the conduct has the purpose or effect of unreasonably interfering with an individual's work or academic performance, or creating an intimidating, hostile or offensive working or learning environment.

POLICY: If a member of the Gannon community believes that he/she has been or is being subjected to sexual harassment or has observed sexual harassment, the initial course of action should be to advise or otherwise inform the alleged harasser that the behavior is unwelcome and must stop. If this is not possible, the student should follow the policy of the clinic as well as the Gannon University's Sexual Misconduct Policy. <http://www.gannon.edu/uploadedFiles/Content/SexualMisconductPolicy.pdf>

L. HEALTH POLICIES

POLICY: Students are required to complete and submit health information in accordance with Gannon University requirements and/or clinical site requirements. Because of contractual agreements with community agencies, and to insure both patient and student safety, students must follow certain health practices. Students who do not meet the health requirements of the program and the clinical facility will not be permitted to participate in the clinical experiences. The Chair of the program, DCE, CCCE, or CI has the right to ask the student to leave the site if an infraction of a health policy is discovered.

PROCEDURES/PRACTICES:

1. **Health and Personnel Safety Requirements:** All students are required to complete the following health and personnel safety requirements prior to the start of the program in the month of August:

- a. Health Requirements

- i. Physical Examination

- ii. Titers – MMR, Varicella, Hepatitis B

If titers, are negative or equivocal, repeat vaccinations and titers are required.

- iii. Immunizations – Tetanus, Diptheria, and Pertussis (TdAP)

- iv. Tuberculosis (TB) Screening – T Spot or Quantiferon Blood Test

If blood test is positive, medical examination and chest xray required.

NOTE: COVID vaccination is highly recommended. Flu shot is required during flu season.

- b. Personnel Safety Requirements

- i. Pennsylvania Background Check

- ii. Pennsylvania Child Abuse Clearance

- iii. Pennsylvania Fingerprinting

Past criminal behavior may limit a student's participation in program activities and clinical site availability. The DCE meets with each student who has infractions listed in Castlebranch. These students are counseled about the potential for limitations for clinic sites and licensing.

- iv. CPR

Course approved: American Heart Association Basic Life Support (BLS) with Hands on Portion. Certification must remain current throughout the program. This course is required by clinical sites.

- v. First Aid

Course approved: American Red Cross (online course). Certification must remain current throughout the program.

2. **Renewal:** Each August, students will be required to renew health and personnel safety requirements as directed by the DCE and program.

3. **Adherence:**

- a. **If a student chooses to not adhere to health and personal safety requirements, the student may not be eligible to complete all required clinical experiences and this may limit progression in the program.**

- b. Each semester, each student's health and safety requirements will be reviewed by the DCE. **Failure to adhere to the established due dates will result in the student's placement process being on hold by the DCE.** It may also result in review by the Student Performance Committee and may result in professional behavior probation and impact progression in the program.

4. **Castlebranch:** Students will utilize Castlebranch to report completed health and personnel safety requirements. The student is responsible for all associated costs.
5. **Additional Requirements:** Clinical sites may have additional requirements. **It is the student's responsibility to familiarize themselves with and adhere to the health requirements of each clinical site facility that is attended for clinical education. Lack of adherence will result in an inability to participate in the clinical education experience.** If a site uses an onboarding platform, the student is responsible for all associated fees for use.
6. **Universal Precautions:** Based upon the occurrence of the hepatitis B virus (HBV) and the human immunodeficiency virus (HIV), OSHA has put into effect standards for employers to follow for the protection of their employees with occupational exposure.

To protect against exposure to any communicable diseases, it is mandated that all students utilize universal precautions, treating all body fluids as if infectious, while on clinical assignment. Standard precautions will be taught to the students and they will have the opportunity to practice prior to the first clinical experience. This federal law, instituted by OSHA, requires employers to comply which also includes students.

Note: Due to circumstances surrounding COVID-19, specialized training has been put into effect by the university for infection control procedures specific to the clinical environment. The details of this training are outlined in each cohort's Blackboard Clinical Education organization. This process will be managed and tracked through this platform. Students will be instructed to complete this training at the direction of clinical education faculty. Procedures have also been established relative to the campus, classroom, and laboratory environment. Please refer to the Student Handbook for these guidelines.

7. **Health Insurance:** Students must show proof of current medical insurance coverage while in the physical therapy program. It is the responsibility of the student to be aware of any changes in his/her health insurance coverage. Students may be responsible to cover emergency care costs while at clinic.
8. **Readmission to Clinical Area after Illness:** If the nature of the illness is felt to endanger either student or client safety, the student should not attend clinic. The student returning to clinical after illness must consider the nature of his/her illness as to whether he/she is safe to practice. The clinical instructor and/or DCE may require that the student submit written documentation from his/her physician verifying that the student is able to return to the clinical area. After reviewing the medical release, the student will be readmitted to the clinical area at the discretion of the clinical instructor and/or clinic site and/or DCE.
9. **Change in Health Status:** Students must report a change in health status to the program that has the potential to impact classroom, lab, or clinical participation in writing to program chair. If there is a change, the student is required to obtain a physician's note stating there are no restrictions or documentation of restriction. The clinic site will be contacted to see if the clinic can accommodate restrictions.
10. **Substance Abuse:** Illicit use of drugs and/or alcohol is unacceptable behavior to the physical therapy program and the clinical site. Violation of this policy will result in the student facing disciplinary action and being reviewed by the Student Performance Committee. **Certain clinical sites require drug testing prior to their clinical experience and/or perform random drug testing during the experience. The student is responsible for following through on this drug test if required. See Policy below.**

M. DRUG SCREENING

POLICY: Students may be subjected to drug screening prior to the start or during a clinical experience, as required by the clinical sites to maintain a safe and healthy workplace.

PROCEDURES/PRACTICES:

- The student who is required to submit a drug screen prior to or during a clinical experience will be notified by the academic department/ program sending that student to the experience. Students will be responsible for all costs incurred relating to obtaining the drug screen.
- The student will be required to have the testing completed at a licensed clinical laboratory specifically approved to offer drug testing. This testing must be completed in the timeframe requested by the assigned clinical site.
- Failure to comply with the drug testing during the required timeframe will prevent the student's participation in the designated clinical site and may result in delay of completion of the program of study.
- If the result of the drug screen is negative, the student is cleared for the clinical experience and will take a copy of the results to the assigned clinical site.
- If the result of the drug screen is positive, the Chair/Director of the program will be notified. A positive drug test will result in the postponement of the clinical experience. University disciplinary sanctions may be determined appropriate as per University Regulations.
- The student with a positive drug test will be required to sign an agreement to continue in the program of study, with the following conditions:
 - a) The student will be referred for mandatory evaluation and counseling by the Counseling Services and results will be released in general terms to the department Chair /Program Director.
 - b) Based on the recommendation from Counseling Services the student may be required to satisfactorily participate in a drug abuse assistance or rehabilitation program, at the student's expense.
 - c) Upon successful completion of the drug counseling/rehabilitation program the student will undergo drug screening (at the student's expense) prior to re-entry into further academic or clinical experiences. The results of any subsequent tests will be maintained in the program's confidential files. Positive results will be released as required by law and to accrediting, certifying, licensing and credentialing bodies upon request.
 - d) The student may be subjected to random, periodic drug screening (at the student's expense) as a requirement for continuing in the program of study and/or by clinical sites.
 - e) Failure to comply with the policy and/or evidence of continued drug use will result in an automatic dismissal from the academic program of study.
- The student may request a retest (at the student's expense) in the case that the student believe the test is falsely positive. Due to time constraints the clinical rotation may be delayed while waiting for the results of the retest. The program reserves the right to mandate a more sensitive/specific method of testing i.e. hair sample.
- A copy of this written policy shall be made available to any and all students required

N. HIPAA (Health Insurance Portability and Accountability Act)

In 1996, federal legislation (HIPAA) was introduced and passed, requiring significant changes to the management of health information by health care providers.

POLICY: Students will follow HIPAA guidelines during all clinical experiences.

PROCEDURES/PRACTICES: Students are provided training on the HIPAA regulations at the University, although each healthcare provider (clinical site) may review the specifics of implementation with the student, at their clinical site. Proof of each student's competency on this information is available with Blackboard course files.

O. ABSENCE FROM CLINICAL EXPERIENCES

POLICY: Attendance is required for all clinical education experiences according to the University's clinical education schedule.

PROCEDURES/PRACTICES:

- Students are to follow the daily work schedule established by the clinical facility, not the academic calendar of the University.
- Absences may be warranted in cases of personal illness (see section L) and personal or family (parents, spouse, siblings and children) emergencies, and death of a family member (including extended family).
- The student must notify the CI by phone call prior to the start of the work day and then notify the DCE and Department Secretary immediately.
- ***Students are not permitted to make requests for other absences to the CI or SCCE.***
- The clinical learning experience is the student's priority; therefore all outside work and other obligations are secondary. Every attempt should be made to minimize ANY time missed due to personal circumstances.
- There will be no rearrangements of the student's clinical schedule to accommodate work.
- All absences from the clinic must be made up as directed by the DCE.
- Students must request time off for religious observances from the DCE in advance and must make up the time.
- Students are not permitted to be in the clinic if not directly supervised by a PT on site. If a supervising PT is not available, students will need to leave the clinic until a PT returns. Any time missed due to this circumstance is not considered an absence.

P. DRESS CODE

POLICY: Students will demonstrate a professional appearance and behavior during all clinical activities.

PROCEDURES/PRACTICES:

- Students are expected to be neat and appropriately dressed according to the dress code guidelines of the clinical site.
- School or clinical facility nametag must be worn at all times.

Q. CELL PHONE USE

POLICY: Students are not permitted to use or carry cell phones or other means of electronic communication during clinic hours other than for work-related activities as directed by CI/SCCE.

PROCEDURES/PRACTICES: Students are expected to fully engage in all aspects of the clinical experience throughout the course of the workday. This includes any preparatory activities (i.e. rounds, meetings etc.), direct patient care times, and professional development opportunities (i.e. lunchtime in-services, workforce development activities). The use of cell phones or other smart devices for purposes other than work-related activities during clinic hours is strictly prohibited. Judicious use of smart devices to enhance the clinical experience is only permitted at the discretion of the clinical instructor(s) and site coordinator(s). Students are expected to follow facility policies regarding cell phone and smart device use

which may include storing such devices or keeping them in Do Not Disturb mode during clinic hours. Violations to this policy should be addressed and the clinical instructor or site coordinator is encouraged to contact the school's DCE/ACCE at his/her discretion.

R. SOCIAL MEDIA

The Gannon University Erie Doctor of Physical Therapy Program has expectations for responsible and ethical behavior with Social Media. Examples include but are not limited to:

- Social networking sites such as Facebook or MySpace
- Video and photo sharing websites such as YouTube, Snapfish, Flickr, Instagram
- Microblogging sites such as Twitter or Tumblr
- Weblogs and Online forums or discussion boards
- Any other websites or online software applications that allow individual users to post or publish content on the internet.

Students should exercise care and good judgment when posting personal information/content on these sites. As a student of the DPT program at Gannon University, the general public, clinical instructors, the assigned facility and future employers, may view postings/pictures/videos erroneously.

POLICY: Students should not post any information on social media sites in regard to patients, clinical sites, clinical instructors, students, faculty and staff, even if it is believed that that all identifying information has been blinded. Additionally, the student will refrain from interaction with staff or patients on social media. This policy is intended to protect the privacy and confidentiality of patients, fellow students, faculty and staff, adjuncts and guest lecturers, clinical educators and affiliated facilities. Student must read and comply with all clinical facility HIPAA and social media policies.

PROCEDURES/PRACTICES: If there is an infraction which occurs while completing coursework /activities on campus, the student will be reviewed by the Student Performance Committee. Noncompliance with these policies while in clinic may result in the clinic site dismissing the student with subsequent student review by the Student Performance Committee to determine his/her status in the program.

S. TRAVEL/LIVING EXPENSES

POLICY: Students are responsible for providing their own transportation to all clinical experiences. Students are also responsible for providing their own living expenses during clinical experiences.

PROCEDURES/PRACTICES: **Students should anticipate travel for clinical experience.** Students will secure housing and develop travel plans prior to the start of each clinical experience. Students should anticipate a total additional cost of \$3500 - \$4000 for all full-time clinical experiences. The cost incurred may vary significantly from student to student and from clinical to clinical depending on cost of living and travel expenses.

T. EVALUATION OF STUDENT

POLICY: Each student will receive an evaluation at mid-term and final of each clinical experience.

PROCEDURES/PRACTICES:

1. Evaluation of the Student:

An evaluation of the student is expected to be completed at mid-term and at the completion of the experience. It is recommended that informal evaluations be done on a daily and weekly basis in relation to specific patient care areas or in other areas as needed. Gannon University utilizes the electronic version of the Physical Therapy Clinical Performance Instrument (CPI) administered by Competency AI. Students should be

competent in problems specific to the systems they have studied. If any problems/questions/concerns arise regarding the evaluation process, the clinical instructor should contact the DCE at Gannon University. Concerns can also be addressed at the midterm visit or midterm phone call. The student may, at any time during a clinical experience, request additional feedback from either the clinical or academic faculty should problems or special concerns arise. A mastery level (for midterm and final performance) is established for each experience.

	Mid-Term Level	Final Level
Clinical Experience 1	Beginner	Advanced Beginner
Clinical Experience 2	Advanced Beginner	Intermediate
Clinical Experience 3	Intermediate	Advanced Intermediate
Clinical Experience 4	Advanced Intermediate	Entry Level

Final grades for all clinical experiences are on a pass/fail basis. This grade is assigned solely by the DCE. A student failing to meet mastery level in a clinical experience will receive a failing grade for the clinical experience and the student's status in the program will be reviewed by the Student Performance Committee. Students may be placed on Clinical Probation. Please refer to the policy.

U. SITE VISITS

POLICY: Every attempt will be made by the DCE or a faculty representative to complete a midterm visit for the purpose of reviewing the progress of the student, status of the clinical site, and early intervention of any problems, questions, or concerns by either the student, CI or both. This also enables the DCE to receive feedback about areas of program deficiencies in preparing students for clinical experiences. The faculty also utilizes this experience to gain additional insight into the rapidly changing health care market by understanding first-hand what is occurring in the clinics. Gannon University values the time spent with the SCCE and CI at the clinical site during these visits, encouraging each individual involved to use this visit as an opportunity to share and gain information about their respective programs.

PROCEDURES/PRACTICES: The DCE will communicate available meeting times to the student. The student will review availability with the CI and sign up for a mutually agreed-upon time. During the visit, a Clinical Experience Midterm Visit form will be completed by the visiting faculty member.

V. EVALUATION OF THE CLINICAL FACILITY

POLICY: Each clinical site will be evaluated each time it is utilized by the student using the site through completion of the modified online version of the Student Assessment of the Clinical Experience form, and by the DCE or faculty member completing the site visit. The DCE will complete a new clinic site review form for newly acquired clinical sites.

W. EVALUATION OF THE CURRICULUM

Curriculum content is always evolving and the faculty rely on student and clinical faculty input for necessary changes. Clinical faculty have the opportunity to provide input on necessary curricular changes at the time of the midterm site visit, by completion of a program survey that follows each clinical experience, and by direct communication with the academic faculty. This form is sent out at the end of each experience. Student input on the curriculum is sought in review sessions held after students return from CE1, CE2, and CE4.

X. CLINICAL PROBATION

POLICY: In the event that a student's performance falls below expectations, a critical incident occurs, and/or significant concerns are expressed by the CI, SCCE, and/or clinical academic faculty, the student may be placed on clinical probation.

PROCEDURES/PRACTICES:

- A letter will be issued from the DCE detailing the conditions of the probation.
- The conditions of the probation may include, but are not limited to established meetings between the DCE, SCCE, CI and/or student; weekly review of progress with DCE; written learning contract between the CI, student, and DCE.
- Upon successful completion of the conditions of the probation letter, the probation period may be discontinued.
- In the event that a student's performance falls below expectations, a critical incident occurs, and/or significant concerns are expressed, the student may be considered to be failing the clinical experience and may be reviewed by the Student Performance Committee.
- In the event that the student continues in the program, clinical probation criteria may be established.
- Unsuccessful completion of probation conditions at any time may result in a failing grade for the clinical experience and the student's status in the program will be reviewed by the Student Performance Committee. This may result in dismissal from the program.
- A maximum of two clinical probations is allowed for a student during the entire curriculum.

Y. READINESS FOR CLINICAL EXPERIENCES

Participation in clinical education is restricted to students who have satisfactorily met all academic competencies of previous courses and who have met all health requirements of the University and clinic site.

POLICY: Each student must successfully complete all academic coursework, including skills check-offs, practical exams and written exams prior to starting clinical experiences.

PROCEDURES/PRACTICES:

- DPT faculty have identified a list of skills in which students must demonstrate competence and safety.
- These skills are assessed initially in a skills check-off. The grading rubric for these procedures identifies the items which must be performed 100% accurately (safely and competently) by an asterisk.
- DPT faculty have also identified on the Practical Exam Assessment Form the level required for safe and competent performance. Practical exams are a comprehensive assessment of communication, skill performance, selection and prioritization of exam and intervention techniques, clinical decision-making, safety and organization.
- DPT faculty review academic course grades, competence on skills check-offs, and practical exams to determine student's participation in clinical experiences.

Z. CLINICAL EXPERIENCE PROGRESSION

POLICY: Students must achieve mastery level as determined for each clinical experience in order to progress within the program.

PROCEDURE/PRACTICES: Each clinical instructor and student will complete a midterm and final evaluation using the PT CPI (see section T). Students must meet the required skill level for each clinical experience in order to progress within the program.

The DPT faculty reserve the right to restrict student learning activities, including removal of the student from the site, at any time on the basis of any limitations demonstrated by the student to ensure the safety and welfare of the patient.

Appendix A: Clinical Site/Practicum Communication in Advance of Student Return to Clinical Experiences/Practicum Experiences

Gannon University and the DPT program/department appreciate your commitment to the education of our students. We hope that you have remained healthy and safe in recent weeks. As we prepare for our students to return to clinical experiences/practicum experiences, we wanted to reach out to you to better understand the status at your site and any requirements for students to complete an experience at your practice/facility.

Personal Protective Equipment (PPE):

- Does the site have adequate PPE for staff and students?
- Do students need to have/provide any specific equipment (i.e. cloth facemask)?
- Will the site provide N95 fit testing, if required by the site?

COVID-19 Testing:

- What is the status of COVID-19 testing in your facility/region?
- Is there testing available for patients, healthcare workers and students if necessary?

Clinical Faculty/Preceptor and Staff Availability:

- Are there adequate clinical faculty/preceptors and staff to meet the outcomes/objectives of the course/experience? (program note: will it meet accreditation requirements?)

Patient/Client Volume:

- Do you anticipate adequate patient volume to meet the outcomes/objectives of the course/experience? (program note: will it meet accreditation requirements?)
- Will there be limitations on the duration and/or experiences for the student clinical experience/practicum experience? If yes, describe. (program note: will it meet accreditation requirements?)

Requirements, Restrictions, Policies, Procedures:

- What requirements are in place at your site/facility that students must meet in advance of their clinical experience/practicum experience?
- What policies and procedures must be followed by students while completing their clinical experience/practicum experience?
- Do you have travel restrictions for students while they are completing their experience at your site?

We ask that you continue to keep us updated regarding any changes in requirements, policies or procedures, or any concerns related to staffing and patient/client volume. You can contact Courtney Roca (email: roca001@gannon.edu, phone: 814-871-5710) or Constance Lewis (email: lewis080@gannon.edu, phone: 814-871-5539). Thank you again for your ongoing dedication and partnership.

Appendix B: Student Acknowledgement for Return to Clinical Experiences/Practicum Experiences

The health and well-being of students is a priority. You should begin or resume a clinical experience/practicum experience during the COVID-19 pandemic only if you are comfortable doing so. Additionally, you should engage in direct patient care only if you are permitted by the clinical site/practicum site and are comfortable doing so. We strongly encourage you to speak with the clinical site/practicum site about any concerns that you have about your health and well-being prior to beginning, and throughout, the clinical experience/practicum experience.

It is important that you understand the risks associated with resuming or beginning a clinical experience/practicum experience during the COVID-19 pandemic. In addition to risks that you may normally encounter when present within a clinical facility, such as risk of an injury or contracting a disease or illness, resuming or beginning a clinical experience/practicum experience at this time may increase the risk that you may come into contact with or contract COVID-19. Individuals who contract COVID-19 may experience a wide range of symptoms, from mild symptoms to severe illness or death. Additionally, an asymptomatic person may inadvertently spread COVID-19 to others.

If you have a health condition that puts you at high risk for serious illness from COVID-19 or have unique circumstances, you should consult with your personal health care provider prior to beginning or resuming your clinical experiences/practicum experiences. An example of a unique circumstance is a person who is a caregiver for an immunosuppressed family member. You should also refer to [CDC's guidelines for at-risk populations](#) for further information. If necessary, you may request a medical leave of absence until you can safely return to direct patient care activities. A leave of absence may result in a delay in program completion/graduation.

If you are concerned about returning to your clinical experience/practicum experience for any reason, you may choose to take a personal leave of absence until such time as you are comfortable returning to your clinical experience/practicum experience. A leave of absence may result in a delay in program completion/graduation.

If you choose to resume or begin a clinical experience/practicum experience during the COVID-19 pandemic, it is important to understand the requirements and your responsibilities throughout the clinical experience/practicum experience. By signing below, you are acknowledging your understanding of the following requirements for the return to your clinical experience/practicum experience:

- I have completed the required education and training modules as outlined by my program.
- I will abide by all University, program, and clinical site/practicum site policies and procedures as well as all requirements of the University, program, clinical site/practicum site, as well as local, state, and federal governments and agencies. I acknowledge that these policies, procedures, and requirements may change from time to time in response to the COVID-19 pandemic.
- I will immediately contact [Gannon University's Health & Wellness Center](#) if I experience signs and symptoms of COVID-19 or experience a high-risk exposure event and will follow all provided guidelines.
- I will follow appropriate personal protective equipment (PPE) requirements and will report any concerns related to PPE availability and use to the director of clinical education/clinical coordinator/academic fieldwork coordinator.
- I will limit travel before and during clinical experiences/practicum experiences and will follow any self-quarantine requirements prior to the start of a clinical experience/practicum experience and any travel restrictions during a clinical experience/practicum experience.
- I will follow CDC and site recommendations and regulations related to COVID-19 illness precautions and prevention (attached below).

If you have questions or concerns relating to your health and well-being, please contact your personal health care provider prior to beginning or returning to your clinical experience/practicum experience. If you have questions relating to University or program policies and procedures, please contact the Chair/Program Director and/or Director of Clinical Education/Clinical Coordinator/Academic Fieldwork

Coordinator. For questions related to policies and procedures or requirements of the clinical site/practicum site, or the local area in which the clinical site/practicum site is located, please contact your clinical site/practicum site.

I acknowledge with my signature below that I have reviewed and understand all of the information and I will conform to all stated requirements, policies, procedures and guidelines. Failure to comply may result in the suspension of clinical experiences/practicum experiences, a delay in program completion/graduation, placement on a behavioral contract, program probation, or dismissal from the program. I understand that requirements, policies and procedures are subject to change and I will complete all subsequent requirements as indicated. I also understand my option to take a leave of absence if I choose based upon risk for serious illness or concern about return to clinical experiences/practicum experiences.

Printed Name

Signature

Date

COVID-19 Illness Precautions and Prevention Recommendations

The Centers for Disease Control and Prevention (CDC) has outlined prevention strategies <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>, as well as symptoms to watch out for <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html> related to COVID-19. Students should be familiar with this information. Some examples include:

- Wash your hands frequently for 20 seconds or more under warm water with soap.
- Use alcohol-based sanitizer that contains 60%-95% alcohol if unable to wash hands.
- Avoid touching your eyes, face, and mouth with unwashed hands.
- Wear a cloth face cover.
- If you cough, sneeze, or have a runny nose, always cover your mouth and nose with a tissue.
- Throw used tissues into a trash can immediately and wash your hands thoroughly before touching anything or anyone.
- Do not share food, drink, utensils or dishes with others, and wash dishes, cups and silverware after use to prevent someone else from using contaminated items.
- If you become ill with a fever, cough or other symptoms (see the CDC website for more information about symptoms <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>), please stay home from clinical rotation/practicum sites until your healthcare provider recommends that you can return. Please notify your faculty contact at Gannon, as well as your clinical site/practicum site of any absence due to illness. Please contact [Gannon University's Health & Wellness Center](#) immediately and follow all provided guidelines. If illness should result in multiple days off site, the program will work with you to come up with a solution.