



**Physical Therapist Assistant Program  
State Technical College of Missouri  
Student Handbook**

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- A. APTA Standards of Practice for Physical Therapy
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- D. Professional Behaviors (Generic Abilities)
- E. PTA Program Confidentiality Statement
- F. Informed Consent to Serve as a Laboratory Subject
- G. Informed Consent to Photograph-Media Release Form
- H. Orientation and Student Handbook Signature Form
- I. APTA Core Values for the PT and PTA
- J. Informed Consent Regarding Potential Health Risks During Clinical Practice
- K. Release of Information to Clinical Sites

**WELCOME** to the Physical Therapist Assistant (PTA) Program at State Technical College of Missouri. We are pleased that you have selected this program to prepare you for an exciting career as a PTA. The staff and faculty of the program are here to assist you through the learning process as you work toward achieving your career goals. You have chosen a very exciting career that requires significant academic preparation. Class sizes are relatively small to maximize the teacher to student ratio, enabling instructors to give personal attention when needed. Your attendance and active participation are essential to effective learning. Your success is dependent on your willingness to take responsibility for learning both academic and professional aspects of physical therapy. The PTA program can be challenging, both mentally and physically. Although the majority of students have many responsibilities outside of school (jobs, significant others, families, etc.), school must become a priority, which may require changes in employment status as well as sacrifices in personal/family lives. A strong commitment to learning and significant out of the classroom study time is necessary to succeed in the program.

This program handbook is designed to facilitate understanding of policies/procedures, rules and regulations of State Technical College of Missouri as well as the PTA Program. It is used in conjunction with the State Technical College Student Handbook and College Catalog. Some program policies may be more specific than College policies and in these cases, program policies take precedence. Please take time to read these publications. Individual course syllabi are provided at the start of each course. These serve as a primary source of information from the instructor, and may be modified at the discretion of the faculty. All syllabi are available on the learning management course software. You will be assigned a faculty advisor and all PTA faculty have an open-door policy. Please feel free to come by, email, or call for an appointment if we can be of assistance. Specific office hours are posted each semester in the department and on course syllabi.

## **PTA Program Faculty**

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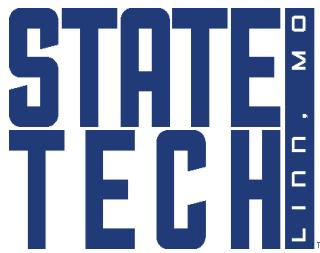
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<https://www.statetechmo.edu/programs/healthsci/pta/>

## **Accreditation**

State Technical College of Missouri is accredited by The Higher Learning Commission. For more information: [www.hlcommission.org](http://www.hlcommission.org).

The Physical Therapist Assistant program at State Technical College of Missouri is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: [accreditation@apta.org](mailto:accreditation@apta.org); website: [www.capteonline.org](http://www.capteonline.org).



# State Technical College of Missouri

## Academic Calendar

FALL SEMESTER	2023-2024	2024-2025	2025-2026	2026-2027
Power Up	August 21, 2023	August 19, 2024	August 18, 2025	August 24, 2026
Fall Semester Begins	August 22	August 20	August 19	August 25
Labor Day/College Closed	September 4	September 2	September 1	September 7
Professional Development/No Classes*	September 5	September 3	September 2	September 8
End of 1 <sup>st</sup> Block	October 12	October 10	October 9	October 15
Advisory Council/No Classes	October 13	October 11	October 10	October 16
Beginning of 2 <sup>nd</sup> Block	October 16	October 14	October 13	October 19
Thanksgiving/College Closed	November 22-24	November 27-29	November 26-28	November 25-27
Finals	December 11-14	December 9-12	December 8-11	December 14-17
Fall Semester Ends	December 14	December 12	December 11	December 17
SPRING SEMESTER				
Spring Semester Begins	January 4	January 9	January 8	January 7
Martin Luther King Day/College Closed	January 15	January 20	January 19	January 18
Presidents' Day/College Closed	February 19	February 17	February 16	February 15
End of 1 <sup>st</sup> Block	February 29	March 6	March 5	March 4
Advisory Council/No Classes	March 1	March 7	March 6	March 5
Spring Break/College Closed	March 4-8	March 10-14	March 9-13	March 8-12
Beginning of 2 <sup>nd</sup> Block	March 11	March 17	March 16	March 15
SkillsUSA Contest/No Classes	April 4-5	April 10-11	April 9-10	April 1-2
Free Days/College Closed	March 28-29	April 17-18	April 2-3	March 25-26
Finals	May 6-9	May 12-15	May 11-14	May 10-13
Spring Semester Ends	May 9	May 15	May 14	May 13
Commencement	May 11	May 16	May 15	May 14
SUMMER SEMESTER				
Extended Summer Semester Begins**	May 13, 2024	May 19, 2025	May 18, 2026	May 17, 2027
Memorial Day/College Closed	May 27	May 26	May 25	May 31
Regular Summer Semester Begins**	June 3	June 2	June 1	June 7
End of 1 <sup>st</sup> Block	June 28	June 27	June 26	July 2
Beginning of 2 <sup>nd</sup> Block	July 1	June 30	June 29	July 6
Independence Day/College Closed	July 4-5	July 4	July 3	July 5
Regular Summer Semester Finals	July 25-26	July 24-25	July 23-24	July 29-30
Regular Summer Semester Ends**	July 26	July 25	July 24	July 30
Extended Summer Semester Ends**	August 9	August 8	August 14	August 13

\* This is a required work day for College employees. The College is closed to the public.

\*\* Some programs and/or classes may have alternate begin and end dates.

The College academic calendar is subject to change.

Approved June 25, 2024 by the State Technical College of Missouri Board of Regents.

## **Program Mission Statement**

The Physical Therapist Assistant program prepares competent physical therapist assistants to improve the health of society.

## **Program Philosophy**

The Physical Therapist Assistant program will promote open communication and mutual respect among students, staff and faculty. The student should be an active participant in this process by helping to plan, develop, and evaluate his/her educational experience. The student is encouraged to practice critical thinking and communication of possible solutions with faculty in preparation for effective communication with physical therapists and other health care professionals.

The program will foster the student's personal and intellectual development in combination with the achievement of specific physical therapy competencies. This is accomplished by stimulating the student to use his/her own creative capacities, acquire an independence of vision and judgment, and develop decision-making and communication skills along with an inquiring mind.

The graduate will complete basic preparation for contributing to the profession and community through service learning that may include the promotion of health, prevention of injury/disability, and the restoration of function and community involvement. The student should be committed to maintaining high professional standards. Faculty wish to impress upon the student that education does not end upon graduation, but is a lifelong process that is necessary to remain informed of current trends affecting the profession and society.

The curriculum will be reflective of current scientific development and integrates didactic learning with clinical application. To fulfill this requirement, the faculty and staff may carry out creative endeavors, gain scholarly achievement, and express their opinions. The program will encourage continued clinical involvement of the faculty as well as communication with educators, community, state, federal and professional organizations, and members of the health professions.

The Physical Therapist Assistant program should be an integral part of both the campus and the community. Internal and external communications will improve the educational process as a whole. Close coordination between the program and the professional communities will provide a learning exchange that benefits both the program and the community.

## **Non-Discrimination Policy**

As per Federal mandate, applicants for admission or employment, students, parents of secondary school students, employees, sources of referral of applicant for admission or employment, and all unions or professional organizations holding collective bargaining or professional agreements with the College are hereby notified that the College is committed to nondiscrimination and equal opportunities in its admissions, educational programs, activities and employment regardless of race, gender identity, gender expression, sex, sexual orientation, religion, color, national origin, age, disability, or status as a protected veteran to ensure nondiscrimination as required by Title VI of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX of the Education Amendments of 1972 (Educational Amendments, 20 U.S.C. §§ 1681-1688), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794), and Title II of the Americans Disabilities Act of 1990 (42 U.S.C. § 12101, et seq.)

A student may not be discriminated against on the basis of race, gender identity, gender expression, sex, sexual orientation, religion, color, national origin, age, disability, or status as a protected veteran in:

- Admission
- Access to enrollment in courses
- Access to and use of college facilities
- Counseling and guidance materials, tests, and practices
- Vocational education
- Physical education
- Competitive athletics
- Graduation requirements
- Student rules, regulations, and benefits
- Treatment as a married and/or pregnant student
- Housing
- Financial assistance
- Placement services
- Health services
- College-sponsored extracurricular activities
- Most other aid, benefits or services

If you have questions or complaints related to compliance with this policy, please contact Title IX Coordinator or Chief of Staff, One Technology Drive, Linn, MO 65051, (573) 897-5201, [title9coordinator@statetechmo.edu](mailto:title9coordinator@statetechmo.edu); The Kansas City Office for Civil Rights may be reached at U.S. Department of Education, Office for Civil Rights, One Petticoat Lane, 1010 Walnut St., Suite 320, Kansas City, MO 64106. The telephone number is (816) 268-0550 and fax number is (816) 268-0559. Or email: [OCR.KansasCity@ed.gov](mailto:OCR.KansasCity@ed.gov). The College's full Non-discrimination Policy can be found on the College website at [www.statetechmo.edu](http://www.statetechmo.edu), the Policy Library.

### **Accommodating Students with Disabilities**

The PTA Program follows the procedures of State Technical College in regards to accommodating students with disabilities. It is the student's responsibility to initiate contact with the appropriate College staff and follow the established College procedures. (See State Technical College Policy Library and <https://www.statetechmo.edu/ada-accessibility/> .

State Technical College of Missouri is committed to providing equal opportunities for students of special populations in accordance with Section 504 of the Rehabilitation Act of 1973 and with the Americans with Disabilities Act (ADA) of 1990. Individuals are hereby notified that this institution does not discriminate on the basis of race, color national origin, religion, sex, age or handicap in admission or access to facilities and programs; or to equal treatment/employment in its programs and activities. Any persons having inquiries concerning State Tech compliance with such regulations should contact the Vice President for Student Affairs by phone at 573.897.5201 or by mail at: State Technical College of Missouri, One Technology Drive, Linn, MO 65051. Disability website: <https://www.statetechmo.edu/wp-content/uploads/2022/05/Accommodations-Requirements-5-31-22.pdf> . Email: [Counselingservices@statetechmo.edu](mailto:Counselingservices@statetechmo.edu) .

Special needs - State Tech provides supports for students who have documented permanent disabilities by making reasonable accommodations in regard to academic instruction and other college or student related activities. Accommodations may include, but are not limited to: adaptive technology, environmental modifications, alternative testing arrangements, note taking services, and use of prerecorded media.

Any student who has a properly documented disability that requires reasonable accommodations to complete the clinical experiences must identify such needs to the DCE and the Program. The request

for accommodations must be submitted at the time clinical sites are chosen for the student so that appropriate arrangements can be made for the student and potential clinical sites. Clinical sites and instructors will be informed of the need for accommodations for the student by the DCE with the student's permission. The clinical site will determine if the accommodations are reasonable and can be implemented at the clinical site. If accommodations cannot be made, an alternate clinical site will be chosen by the DCE. The student is still required to complete all required components of the clinical education program for successful completion of their degree.

## **PTA Program Goals and Outcomes**

The goals of the program are to provide the opportunity for students to develop:

### **GOAL #1:**

Behaviors and skills sought by employers.

#### **Outcome #1:**

Graduates will assume a position as a physical therapist assistant within the health care system.

### **GOAL #2:**

Necessary entry-level skills to obtain positions as physical therapist assistants who work under the supervision of licensed physical therapists.

#### **Outcome #2:**

Graduates will display entry-level data collection and intervention skills, adopt professional behaviors consistent with entry-level generic abilities, and will pass the licensure exam.

### **GOAL #3:**

Communication, professionalism, and leadership skills that will enhance job performance.

#### **Outcome #3:**

Graduates will adhere to the standards of conduct and the code of ethics for the Physical Therapist Assistant and acknowledge the professional leadership provided by the APTA.

## **Student Outcomes**

Upon completion of the program, the graduate will be able to:

1. Meet all requirements for the Associate of Applied Science degree at State Technical College of Missouri.
2. Take and pass the National Licensure Examination.
3. Practice as an entry-level Physical Therapist Assistant under the supervision of a licensed Physical Therapist providing:
  - a. Patient care through appropriate modalities, exercise programs or other interventions as outlined in the plan of care written by the physical therapist.
  - b. Assessment of patient needs and progress based on the response to treatment; communication, feedback, and follow-up with supervising PT.
  - c. Patient education and instruction.
  - d. Related patient care and support services as a part of a health care team.
4. Demonstrate professionalism and effective communication with other health care providers, patients, families, and the community.
5. Display a commitment to life-long learning in order to enhance professional growth.

To achieve stated educational outcomes, all courses in the PTA curriculum are designed to develop knowledge, skills, attitudes, and behaviors essential to successful PTA practice. Common curriculum goals are foundational to development of course objectives and learning activities. These common goals are:

1. Understanding the role and scope of practice of both PTA and PT.
2. Development of professional conduct and behaviors.
3. Respect for all individuals including those with cultural differences.

4. Development of effective verbal and non-verbal communication skills.
5. Utilization of professional communication and correct medical terminology for all oral and written communication.
6. Integration of learning experiences to build the framework for problem solving and critical thinking.

**Comprehensive/practice exam:** The purpose is to assist students in being successful on the licensure exam with preparation for, exam endurance, and managing exams of that caliber. Students will be given comprehensive exams at the conclusion of the fall and spring semesters for practice, test endurance, and as a baseline assessment. Two practice exams will be given during the summer semester utilizing the Academic Practice Exam Assessment Tool (PEAT) from the Federation of State Boards of Physical Therapy (FSBPT). Students are required to pass one of the PEAT exams with 600/800 scaled score or higher to aid in success on the actual licensure exam. Students who do not pass one of the two exams may take an incomplete for the course assigned and purchase a student PEAT exam at their own expense. The third attempt must be passed with a minimum 600/800 scaled score. Failure to pass the exam results in failure in the course and dismissal from the program. Students may then follow the re-admission policy if they choose and may be directed to an individualized study plan and remediation is indicated by the results or required to enroll in a PTA 299 Special Topics course at their own expense.

## **Direction & Supervision of the Physical Therapist Assistant**

HOD P06-18-28-35 [Amended: HOD P06-05-18-

26; HOD 06-00-16-27; HOD 06-99-07-11; HOD 06-96-30-42; HOD 06-95-11-06; HOD 06-93-08-09; HOD 06-85-20-41; Initial: HOD 06-84-16-72/HOD 06-78-22-61/HOD 06-77-19-37] [Position]

Physical therapists are responsible for providing safe, accessible, cost-effective, and evidence-based services. Services are rendered directly by the physical therapist and with responsible utilization of physical therapist assistants. The physical therapist's practice responsibility for patient and client management includes examination, evaluation, diagnosis, prognosis, intervention, and outcomes. Physical therapist assistants may be appropriately utilized in components of intervention and in collection of selected examination and outcomes data.

Direction and supervision are essential in the provision of quality physical therapist services. The degree of direction and supervision necessary for ensuring quality physical therapist services is dependent upon many factors, including the education, experiences, and responsibilities of the parties involved, as well as the organizational structure where physical therapist services are provided.

Regardless of the setting in which the physical therapist service is provided, the following responsibilities must be borne solely by the physical therapist:

1. Interpretation of referrals when available
2. Evaluation, diagnosis, and prognosis
3. Development or modification of a plan of care, which is based on the initial examination or reexamination and includes the physical therapy goals and outcomes
4. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render services and when it may be appropriate to utilize the physical therapist assistant
5. Revision of the plan of care when indicated
6. Conclusion of an episode of care
7. Responsibility for any "hand off" communication
8. Oversight of all documentation for services rendered to each patient or client

Only the physical therapist performs the initial examination and reexamination of the patient and may utilize the physical therapist assistant in collection of selected examination and outcomes data.

The physical therapist is responsible for services provided when the physical therapist's plan of care involves the physical therapist assistant. Regardless of the setting in which the service is provided, the determination to utilize physical therapist assistants requires the education, expertise, and professional judgment of a physical therapist as described by the Standards of Practice for Physical Therapy, the Code of Ethics for the Physical Therapist, and the APTA Guide for Professional Conduct. (*See Appendices A, B, C*)

In determining the appropriate extent of assistance from the physical therapist assistant (PTA), the physical therapist considers:

1. The PTA's education, training, experience, and skill level.
2. Patient/client criticality, acuity, stability, and complexity.
3. The predictability of the consequences.
4. The setting in which the care is being delivered.
5. Federal and state statutes.
6. Liability and risk management concerns.
7. The mission of physical therapy services for the setting.
8. The needed frequency of reexamination.

## **Role of the Physical Therapist Assistant (Adapted from the Normative Model of Physical Therapist Assistant Education Version 2007)**

Physical therapist assistants (PTAs) provide physical therapy services under the supervision and direction of the physical therapist. They implement selected components of patient/client interventions and obtain data related to interventions; make modifications either to progress the patient/client as directed by the supervising PT or to ensure patient/client safety and comfort. PTAs also participate in patient/caregiver education, interact with, and provide education to other healthcare professionals, aides and volunteers. Physical therapist assistants contribute to society and the PT profession through the provision of physical therapy services, teaching, and administration.

The requirements of supervision of the PTA are dependent upon several factors:

- Consideration to complexity, acuity, and needs of the patients/clients under care;
- Education, experience/competency of the PTA;
- Predictability of the consequences related to the intervention;
- Setting in which service is provided;
- Federal and State statutes; and
- Liability and risk management concerns.

The **Physical Therapist** holds responsibility for the following (*Excerpts from the Missouri Practice Act*)

- Interpretation of physician referrals
- Initial evaluation and problem identification
- Development/modification of the treatment plan/ program, including long and short term goals
- Determining tasks appropriate for delegation to PTA
- Communication of delegated functions and instructions to the PTA including precautions, special problems, contraindications, goals and anticipated progress, plans for re-evaluation
- Supervision of the assistant as appropriate
- Timely review of documentation, re-evaluation of the patient, adjustment of the treatment plan with the PTAs input, and documentation of discharge status
- Arrangements for reports (written/verbal) from the assistant under PT direction to the physician or other appropriate health care personnel

Physical Therapist Assistant is responsible for the following: (*Excerpts from APTA model job description for the PTA*)

- Carries out Physical Therapy plan of care or portions thereof, as planned and directed by the Physical Therapist.
  - Accepts responsibilities for patient's personal care and safe environment throughout treatment.
  - Follows established procedure/observes safety precautions in the application and use of heat, cold, light, water, sound and massage.
  - Carries out positioning and exercises.
  - Trains patients in exercises, ambulation and functional activities.
  - Carries out treatment utilizing special equipment.
  - Cares for braces, prostheses, bandages and other assistive devices.
  - Observes and reports the patient's responses to the Physical Therapist.
  - Acts as an assistant to the Physical Therapist when the Physical Therapist is performing tests, evaluation and complex treatment procedures.
- Carries out responsibilities appropriate to the established Physical Therapy service:
  - Participates in clerical and reception activities.
  - Complies with procedures for maintenance of supplies and equipment and carries out duties necessary to comply with the related needs as delegated to him.
  - Maintains surveillance of environmental conditions and safety within the Physical Therapy service.

## **Code of Ethics**

The American Physical Therapy Association (APTA) provides guidelines for professional conduct for Physical Therapist Assistants. Other aspects of the APTA will be covered in various courses; however, the Standards of Ethical Conduct for the Physical Therapist Assistant is included in this handbook for your review and reference. (See the *Guide for Conduct of the PTA—Appendix B; and the Core Values for the Physical Therapist and Physical Therapist Assistant—Appendix I*)

## **Essential Functions of the Physical Therapist Assistant**

For students to be successful in the PTA program and a career as a PTA, they must possess the following:

1. Academic ability to maintain at least a “C” (75%) average in all core PTA courses
2. Ability to perform appropriate physical therapy skills such as:
  - a. Selected data collection (measuring joint motion, providing manual force to judge muscle strength, visualize/assess posture and gait (walking), perform balance tests, manipulate blood pressure cuff, and stethoscope, etc.)
  - b. Treatment interventions including use of heat, cold, and electrical modalities, therapeutic exercise, administration of first aid/CPR, and functional mobility training (use of wheelchairs, gait, positioning, assisting patients to move from one surface to another, bed mobility, etc.), manual therapy, and wound care techniques consistent with the PTA scope of practice.
  - c. Appropriate safety and infection control measures according to OSHA recommendations (includes hand-washing, universal precautions, and aseptic technique).
  - d. Ability to communicate effectively through written, verbal, nonverbal, and technological means with staff, patients/clients, caregivers, and other healthcare professionals
  - e. Ability to effectively access and utilize information from a variety of sources including textbooks, medical records, and professional literature
3. Adequate physical ability and range of motion to frequently change positions which may include stooping, squatting, kneeling, bending, reaching, pushing, pulling, moving in excess of 100 lbs., climbing, standing, sitting, walking, and utilizing safe/appropriate body mechanics to prevent injury.
4. Sufficient fine-motor function and eye-hand coordination for manipulation of objects
5. Ability to identify and manage stress in a mature, healthy manner
6. Flexibility in work environment with ability to multitask and prioritize duties
7. Ability to learn and apply new information with regard to technology, physical therapy interventions, professional policies, and procedures, etc.
8. Adequate critical thinking and problem-solving skills to facilitate ethical, safe, and effective physical therapy practice.

## **Ethics and Professional Conduct**

PTA students are expected to comply with ethical standards and follow the *Guide for Conduct of the PTA*, *The Standards of Ethical Conduct for the PTA*, and *the Core Values for the Physical Therapist and Physical Therapist Assistant* as outlined by the American Physical Therapy Association (APTA) (See Appendices B, C, I). This document will be referenced in several courses throughout the curriculum and is available on the APTA website at <https://www.apta.org/>. Students should also refer to the Professional Behaviors (Generic Abilities Appendix D) in this handbook for additional guidance about acceptable behaviors. Students are expected to exhibit professional behavior during school and clinical experiences by acting as though it were their place of employment; i.e., attend all classes as scheduled, arrive on time, dress appropriately (see dress code), take responsibility for actions, treat others with dignity and respect, keep noise to a minimum, follow policies and procedures, etc. Dignity and respect of others includes conduct online, on social media, in-person, and in or out of class time.

## IMPORTANT INFORMATION

### **Enrollment/Course Materials**

Enrollment in the PTA Program is 25 students. It is determined by faculty to student ratio, facility size, available equipment, and job placement. Enrollment in PTA professional courses is limited to students who have been accepted into the PTA program. All PTA courses must be completed in the proper sequence.

Course schedules and locations will be available at orientation/registration at the beginning of each semester. College fees for the PTA Program are based on credit hours for specific courses. Books and supplies are available through the State Technical College bookstore located on the main campus, except resources such as APTA membership and Scorebuilders course textbook and exams. Additional expenses and/or fees are described on the college's website, course syllabi, or other program materials. Booklists are available on the State Tech website at: <https://www.statetechmo.edu/bookstore/> additional information about attaining books will be provided at orientation/registration. Student should also have access to Microsoft Windows Suite for classwork.

### **APTA Membership Requirement**

The American Physical Therapy Association (APTA) is the professional organization for physical therapists, physical therapist assistants, and student PTS and PTAs. Membership is required as the primary resource for reading material, assignments, and research for a number of classes. Benefits of membership include access to practice guidelines, discounts, scholarships and grants, news and publications, evidence and research resources, employment resources, and involvement opportunities. Using APTA membership in class allows us to avoid buying multiple books, paying for database information, and easy access to professional materials and advocacy—a cost of at least an additional \$300 for the three semesters.

In addition, research resources from APTA will also be used in multiple other courses and will make completing those assignments easier to find appropriate sources. Nearly every lecture class will have assignments that can be completed or enhanced by using information from APTA resources.

We also may have the opportunity to advocate for our profession and for our patients throughout the course of the year as well. APTA membership will keep you up to date and informed of legislation that impacts our profession.

After graduation students are encouraged to maintain their APTA membership as it is the voice of the physical therapy profession in federal and state government, the main advocacy group for patients and high quality patient care in physical therapy, the voice for appropriate reimbursement of PT services, promotion of the benefits of PT, networking, awards/ honors and career development, access to practice guidelines and evidence-based practice, discounted and high-quality continuing education, and clinical and practice resources. Often, if a prospective graduate is an APTA member, they may receive higher consideration than another applicant who is not a member.

### ***Signing up:***

**We recommend that you sign up by August 15-at the latest.** This will allow you to renew for another year under the student rate before starting to pay the professional rate with starter dues. If you sign up earlier, you will need to renew next summer to complete you summer classes. Contact the APTA at: APTA.org, phone: 800-999-2782, ext. 3395, or mail to: APTA, P.O. Box 75701, Baltimore, MD 21275-5701.

When you sign up online go to APTA and You then Explore Membership and choose Join/Renew (use your State Tech student e-mail for now) follow the online instructions. The only chapter you need to sign up for is Missouri. When you join, **be sure to choose the student physical therapist assistant option so you get the cheaper student rates.** The fee is \$80 for national dues with \$20 for Missouri

dues for a total of \$100. This is the full amount for a whole year of access to materials, readings, and updates that you can use for a lot of classwork!

**Please be sure to put State Technical College of Missouri under the Education portion so that you can be entered in a drawing for prizes during the Reach100 Challenge later in the school year.**

### **Library Facilities/MOBIUS Missouri Online Bibliographic Information User System**

Library resources are available to students through the following:

- The State Tech library is located in the Information Technology Center on the main campus in Linn and online at <http://www.statetechmo.edu/library/index.php>. An electronic card catalog can be accessed to find the materials that are available. A Media Specialist is available for consultation regarding instructional technology and MOBIUS.

Students may access information from other Missouri Institutions of Higher Education through MOBIUS. Items requested by students are transported in a timely manner via courier service. Policies regarding library resource use apply. Additional reference books are available in instructors' offices and may be used with permission. PTA staff or faculty must be contacted in order to access these materials. Personal computers with Internet access and a wide range of software are available for student use.

**STUDENTS ARE REQUIRED TO UTILIZE VARIOUS LIBRARY RESOURCES THROUGHOUT THE CURRICULUM. SEE INDIVIDUAL COURSE SYLLABI FOR DETAILED INFORMATION AND SPECIFIC LIBRARY ASSIGNMENTS.**

### **Communication**

Students are expected to activate the State Tech e-mail address and to have regular access to a personal computer in order to receive electronic communications for participation in all courses, which are web-assisted. Student e-mail is the primary means of communication with the student. Please check your State Tech e-mail daily. Students are responsible for monitoring information sent to e-mail or delivered to the student. Faculty check e-mail no less than twice daily on weekdays. Faculty mailboxes are located near the PTA lab and the PTA classroom of the Health Sciences Center.

Throughout the PTA program, instructors require submission of on-line assignments via Canvas and/or e-mail. Grades will not be communicated via e-mail and will not be posted in order to protect your privacy. Secure grades for all courses are available through Canvas.

Faculty office hours are posted on office doors each semester and in the syllabus. Although all faculty have an open-door policy, students should seek assistance at appropriate times, and appointments may also be scheduled with instructors for assistance and consultation. Contact information is included on each course syllabus as well as in the front of this handbook.

### **Establishing Appropriate Working Relationships with Faculty:**

1. Ask how each faculty member would like to be addressed. Some faculty are more formal than others. Do not assume that all faculty wish to be addressed on a first-name basis.
2. Communicate directly with faculty if you have a problem or a concern. Do not put off addressing concerns. If unable to achieve resolution, schedule and speak with the Program Director.
3. Communicate in a professional manner, just as you would communicate with a supervising therapist or another healthcare professional. Use correct grammar, spelling and punctuation.
4. Faculty will make every effort to respond to voice messages or email within 24 business hours and respectfully ask that students do the same. Note faculty office hours and utilize availability appropriately.

### **Advisement**

Academic advisement is essential for the success of each student enrolled at State Technical College of Missouri. Each student has an assigned academic advisor. It is suggested that students meet with their advisor:

- during student orientation, or early in semester to review the educational plan

- to review progress, academic status
- prior to end of semester to review progress/update educational plan prior to registration for next semester

Students are encouraged to meet with individual instructors to discuss issues or concerns regarding specific courses. Instructors will communicate with advisors/one another regarding progress to facilitate student learning/success. Students are expected to take responsibility for their learning and to seek assistance when needed. Students may be referred to student services personnel to assist in advisement and to address issues including but not limited to: academic performance, behavioral issues, stress management, resource utilization, etc.

### **Expectations of Students**

This program is challenging, both mentally and physically. Success requires a strong commitment and willingness to study outside of scheduled classes. While most students have responsibilities in addition to school (jobs, families, activities, etc.), the rigor of the program necessitates shifting of priorities for successful completion, and ultimate achievement of licensure as a PTA. Faculty are committed to helping students succeed and are available to assist with identification of appropriate resources upon request by the student. However, students must make school a priority, which often requires changes that may include reducing hours of employment as well as modifications in personal/family lives and other activities.

**Students are required to accommodate personal and work schedules to that of the program in both the academic and clinical components.** A leave of absence or vacation from other employment may be necessary to achieve completion of the required clinical affiliations, as well as other assignments or projects. Physical therapy departments have variable hours of operation and students **must** accommodate to the schedule of their assigned affiliation. If a holiday or scheduled day off for the college falls during clinical education, the student is expected to follow the schedule of the clinic or facility to which he or she is assigned. In other words, if the PT department is open, the student is expected to be there, regardless of the college schedule.

While in the program, students will acquire and develop entry-level job readiness skills. The PTA program applies professional behaviors / competencies and State Tech job readiness skills assessment. Professional behaviors are critical for successful completion of the PTA program and for entry into the physical therapy profession. Policies are in place to address deficits in development of these behaviors and related consequences with regard to progression through the PTA program. This plan is consistent with the expectations of employers of physical therapy professionals.

### **Student Responsibilities**

1. **Attendance:** PT is a hands-on profession. Students are expected to attend all classes. It is not possible to make-up the discussion, demonstration, and interaction that occurs in the classroom. Lecture capture (when available) does not substitute for attendance and participation. Attendance is recorded and submitted to the College for the student transcript.
2. **Preparation:** PTA students are expected to read assignments prior to class. Class sessions are designed to build upon information gleaned from the textbook. Students who fail to prepare for class will likely find themselves ill-informed and will not receive maximum benefit from the classroom experience.
3. **Arrive on-time:** Once employed as a PTA, the expectation will be to arrive for work at the scheduled time. The expectation is the same while in school. It is discourteous and disruptive to walk into class late and it interferes with your learning. Please plan your schedule and be prompt. Tardiness is recorded as a part of the attendance score.
4. **Prioritize:** Plan your time so that you are able to keep up with assignments and commitments. Refer to the syllabus often and use a planning calendar. The syllabus will contain accurate due dates. Instructors make every effort to keep course software updated, but please depend on course syllabi.

5. Participate: Plan your schedule so that you are able to participate in extra events and learning opportunities including service learning, professional activities or Health Sciences club activities, and lunch and learn activities.
6. Communicate with faculty: Please notify faculty members if you must miss class. If you have concerns or suggestions for the good of the group, use faculty office hours to communicate.
7. Personal health: Take care of yourself and stay healthy. Try to form a strategy to get adequate rest, nutrition, and exercise. Practice positive stress management and utilize your support system.
8. Courtesy and Respect: While preparing to become a part of the profession of physical therapy, be courteous and respectful of faculty, staff, classmates, and others. Treat others as you wish to be treated. The PTA school environment is a practice setting for behaviors that you will exhibit in the workplace.

### **PTA Labs**

The PTA practice lab is used solely for educational purposes. Students may use **only** equipment and supplies that they have previously covered in class and lab. Safety Data Sheets (SDS) manual is available upon request. Blood pressure cuffs and stethoscopes may be available for student check out. Please see program personnel to check out equipment. **No other equipment** is allowed to leave the department.

### **Laboratory Rules**

1. Notify faculty when practicing outside of scheduled class time during open lab times when faculty may not be in attendance in the lab.
  - a. Students only allowed in the lab if HSC faculty or staff are in the building.
  - b. Students will be asked to leave when faculty leave so the lab and classroom can be secured
  - c. Electrical equipment (US, E-stim, traction) may not be used unless a PTA faculty member is on the premises
  - d. Students will practice on themselves (if appropriate) or fellow classmates in the PTA lab.
2. Try to work with a partner in the lab (fellow student, lab assistant, or instructor)
3. Practice interventions on healthy tissue only. DO NOT attempt to provide physical therapy intervention for a pathological condition to yourself or to others. This constitutes practicing without a license!
4. Notify instructors of any contraindications, conditions, or pathologies which may restrict your ability to experience or perform interventions.
5. Practice established infection control and safety procedures.
6. Do not attempt to use equipment that has not been covered in class.
7. Follow manufacturer's recommendations and/or school performance guides when utilizing equipment and practicing interventions.
8. Notify PTA faculty regarding faulty equipment.
9. Keep noise down.
10. Respect other people working or studying in the building.
11. Clean all equipment/supplies used.
12. Return all equipment, supplies, and trash to the appropriate locations.
13. Notify a PTA faculty member of any supply items that are running low.
14. BP cuffs and stethoscopes for practice at home must be signed out through a PTA faculty member.
15. State Tech facilities, and/or instructors are not responsible for items lost or stolen. It is suggested that you do not wear or bring items of value with you to school.
16. Backpacks are to be stowed out of the way to maintain clear walkways and so as not to interfere with lab practice.
17. Lab Dress Code: Shorts and tank tops/sports bras are required in many lab sessions to visualize/palpate specific anatomical structures. Students may be required to wear hospital gowns in class if proper lab dress is not available. Dress should be appropriate for the planned learning activities as stated on course syllabi. Flip flops or open toed shoes are not acceptable. Leggings are not appropriate for all activities. Job readiness points will be deducted for inappropriate lab dress.
18. Students are expected to demonstrate respect and courtesy for academic faculty, staff, lab assistants, guests, clinical faculty, and fellow classmates at all times.

19. A weekly lab-cleaning team will be utilized to maintain facilities, equipment, and laundry. Students will be assigned on a rotating basis.
20. If you open a door, please take responsibility to make sure it is closed and locked at the end of class.
21. Tobacco use including e-cigarettes and chew is prohibited in the labs, classroom or anywhere in the Health Sciences Building. This is a tobacco free campus.

### **Professional Dress Code**

The PTA Program requires students to present a clean, neat and professional appearance appropriate for a healthcare environment. Recognizing that styles in clothing and hair are personal and subject to change, the following guidelines are provided to identify for students the limits of acceptability in matters of dress and grooming while attending the PTA Program. Students are required to purchase two State Tech PTA polo's for lab practical, clinical, guest speakers, and presentations. Additional guidelines may be provided as appropriate. Students are expected to comply with this policy when attending classes or representing the college and/or the PTA program. This includes time spent off campus for class/observation. Failure to follow this policy could result in disciplinary action taken by academic faculty.

#### **Guidelines for Appropriate Appearance/Dress**

1. Students are required to maintain personal hygiene by daily bathing and to use deodorant to avoid offensive body odors. Hygiene is important as we are studying human anatomy and we frequently use students as lab subjects. Only light scents of colognes, perfumes and other toiletries should be used as patients and staff may be sensitive to fragrances.
2. A neat and clean hairstyle is part of a well-groomed appearance. Hair should be maintained in a manner so that it does not fall forward or cover the face. Extremes in hairstyles and color are not appropriate.
3. Facial hair must be kept clean and neatly trimmed.
4. Fingernails must be kept clean and neatly trimmed. Extremes in nail color, ornamentation, and length are not appropriate. Artificial or press-on nails are not appropriate. Further guidelines may apply. While on clinical, specific clinical site policies should be followed regarding dress code/personal appearance. State Tech or facility nametags will be worn at all times during clinical/observation experiences to identify you as a student. Jewelry is kept to a minimum; however, a watch with a second hand is strongly recommended.
5. Clothing that displays writing, graphic messages, rhinestones, beading, and glitter ornamentation is inappropriate.
6. **Shirts, sweaters, and blouses must be of non-clinging and non-revealing style and fabric. Low-cut, front or back, shirts, blouses, skirts, or dresses are inappropriate, unless covered with a coat or sweater at all times.**
7. Earrings, pierced or clip, should be small and conservative. Any other form of body piercing which is visible to others may be considered inappropriate in some settings.
8. Casual attire such as jeans or shorts, while not suitable for clinical assignments, is allowed during regularly scheduled classroom sessions. No open toe shoes. Attire should be **casual and conservative**.
9. Professional attire (slacks – no jeans; State Tech PTA polo shirt and nametag) are required for lab practicals, assigned observations, presentations, projects, and guest speakers.
10. Students should be advised that visible body art may not be permitted in some physical therapy settings.

If a clinical site does not specify a dress code, appropriate attire is professional, business casual such as slacks (**no jeans**) worn with a casual shirt such as State Tech PTA polo (preferred). Leather closed-toe shoes are recommended. Some facilities allow leather running or tennis shoes in good condition. Sandals, t-shirts/sweatshirts with insignias or pictures are prohibited. **State Tech photo nametags or facility issued nametags are required at all times during clinical experiences.**

### **Clubs and Organizations**

As a PTA student, many opportunities exist for participation in extracurricular activities. These include but are not limited to Student Government Association (SGA), Student Ambassador, committee membership, intramural sports, Missouri Physical Therapy Association (MPTA), Missouri Student Special Interest Group (MSIG) representative, Health Sciences club and Phi Theta Kappa. Students are encouraged to participate in campus and community activities.

# CURRICULUM

<b>1<sup>st</sup> Year FALL SEMESTER (August – December)</b>		
ASC 104	Human Anatomy and Physiology w/Lab I	4
ASC 110	Medical Terminology	1
COM 101	English Composition	3
COM 111	Oral Communications	3
CPP 101	Introduction to Microcomputer Usage	3
MAT 071	Intermediate Algebra (if needed)	4
	<b>Total Credits For Semester</b>	<b>18</b>
<b>1<sup>st</sup> Year SPRING SEMESTER (January – May)</b>		
ASC 106	Human Anatomy and Physiology w/Lab II	4
MAT 119	Elementary Statistics	3
PSY 161	Health Psychology	3
PTA 102	Advanced Musculoskeletal and Nervous System Anatomy	2
Social Science	Social Science General Education Requirement	3
	<b>Total Credits For Semester</b>	<b>15</b>
<b>2<sup>nd</sup> Year FALL SEMESTER (August – December)</b>		
PTA 106	Introduction to PTA and Documentation	2
PTA 115	Basic Patient Care Lab	1
PTA 116	Basic Patient Care	2
PTA 118	Functional Anatomy and Kinesiology	3
PTA 119	Functional Anatomy and Kinesiology Lab	1
PTA 121	Physical Agents and Modalities Lab	1
PTA 125	Principles of Therapeutic Exercise Lab	1
PTA 127	Physical Agents and Modalities	1
PTA 129	Health and Disease I	4
	<b>Total Credits For Semester</b>	<b>16</b>
<b>2<sup>nd</sup> Year SPRING SEMESTER (January – May)</b>		
PTA 135	Clinical Practice I	2
PTA 202	Health and Disease II	1
PTA 204	Electrotherapeutic Modalities	1
PTA 205	Electrotherapeutic Modalities Lab	1
PTA 206	PTA as a Profession and Job Strategies	2
PTA 208	Orthopedics for the PTA	2
PTA 211	Orthopedics Lab for the PTA	1
PTA 223	Neurological Therapeutic Exercise	3
PTA 224	Neurological Therapeutic Exercise Lab	2
	<b>Total Credits For Semester</b>	<b>15</b>
<b>2<sup>nd</sup> Year SUMMER SEMESTER (May – August)</b>		
PTA 220	Comprehensive Review and Licensure Requirements for the PTA	2
PTA 235	Clinical Practice II	4
PTA 245	Clinical Practice III	4
PTA 289	Research in Physical Therapy	2
	<b>Total Credits For Semester</b>	<b>12</b>
	<b>Total Credits</b>	<b>72</b>

NOTE: PREPARATORY MATH SEQUENCE FOR MAT 119 INCLUDES: INTRODUCTORY ALGEBRA-MAT051 AND INTERMEDIATE ALGEBRA-MAT 071

Course descriptions can be found at the following link: <https://www.statetechmo.edu/catalog-program/physical-therapist-assistant/>

## **Curriculum Design**

The course of study is 5 semesters in length, 72 credit hours, and successful completion leads to an Associate of Applied Science (AAS) degree. The curriculum includes general education courses, related general education courses, physical therapist assistant professional courses, and supervised clinical practice in approved clinical facilities.

Full-time integrated and terminal clinical affiliations are 40 hours per week, which enables students to apply skills that have been learned in lab courses. Clinical sites are located mainly in the state of Missouri. Students are responsible for all costs incurred during clinical affiliations. **Students will be required to travel to assigned clinical sites which may be located an hour or more drive from the home location.** All students must have CPR certification prior to clinical and must furnish proof of health insurance as well as current immunizations.

## **Instructional Design**

Qualified academic faculty are assigned to teach PTA professional courses. Guest lecturers with expertise in specialized areas will augment some course presentations to enhance learning experiences. As such, these are not substitute teachers, but individuals providing a high quality of knowledge for student benefit. Students will be responsible for material presented and are asked to give guest lecturers appropriate attention and respect. All courses utilize course software (Canvas) and instructional technology to augment information and to facilitate communication. Students are asked to check the college e-mail account daily. WiFi access is available in the Health Sciences Center in Linn. Computer labs are available throughout the main campus

Students will receive a syllabus at the start of each course, which includes the following information:

1. Title/catalog number of the course
2. Number of credit hours
3. Number of lecture/laboratory hours per week
4. Course description and objectives
5. Department offering the course
6. Requisites
7. Instructor information
8. Course materials - Required books, tools, and other materials
9. Optional/Recommended books and materials
10. Grading system and policy
11. Policies – attendance, job readiness expectations, copyright and fair use, reasonable accommodations, non-discrimination
12. Library assignment
13. Special class or laboratory procedures
14. Teaching methods and learning experiences
15. Course competencies
16. Plan of instruction

Students are encouraged to refer to the course syllabus often and to utilize it as a guide for the course. Syllabi are posted on the College's learning management system online.

NOTE: Assignments, projects, quizzes, and examinations may be added or deleted, and the plan of instruction may be modified as appropriate to facilitate learning. Students will be notified if there are changes to the published schedule of instruction.

## **Presentation of Material**

Information presented in PTA courses is sequential; i.e., each course and each semester builds upon previous work. Material in each course is presented to students with consideration of various learning styles. Students receive information multiple times through a variety of instructional methods. Students must be active, responsible participants in the educational process to ensure learning.

Material is generally presented/demonstrated as follows: (see course syllabi)

- Students complete reading/other assignments to prepare for class and for upcoming material. Reading and preparatory assignments are given in advance (see syllabi) and should be completed prior to class. Other assignments should be completed by the due date.
- Information is presented in class using lecture, demonstration, group activities, audiovisual aids, classroom discussion, written assignments, self-directed activities.
- Skills are practiced with guided supervision in lab.
- Students demonstrate skills to instructor/assistants through scheduled competency checks.
- Students demonstrate combined skills/behaviors during lab practical examinations (case scenario). Essential safety components MUST be correctly executed in order to pass each lab practical exam.
- Students utilize knowledge/skills learned in the classroom/lab in the clinical setting under the supervision of the clinical instructor.

## **Performance Evaluation**

Performance is evaluated by numerous methods, at the discretion of the instructor. The following types of evaluation are most frequently used:

1. Written or oral quizzes, either announced or unannounced (most administered using Canvas)
2. Written unit, mid-term, final and comprehensive examinations (most administered using Canvas). All major exams will be password protected and completed in a proctored environment following established guidelines for testing and test security. Academic dishonesty will not be tolerated. Testing environment guidelines include but are not limited:
  - Exams are password protected and administered in a proctored environment.
  - Cell phones, watches, notes, other technology, etc. must be inaccessible and may be placed in a designated area.
  - Students must remain in the testing room for the duration of the examination.
  - Backpacks may be placed in a designated location.
  - Hats will not be worn during testing.
  - An alternate means of testing may be used in the case of unavoidable absence.
  - All testing guidelines are established to follow the Non-Discrimination Policy as outlined in the State Technical Policy Library and website.
3. Students may be evaluated through oral quizzes/exams or other methods deemed appropriate to meet the needs of the student. Students may request accommodations by contacting the Vocational Resource Educator (VRE), or may be referred to the VRE by academic faculty. Students are responsible for providing evidence of need for accommodations prior to any interventions.
4. Written reports and/or projects (either individual or group) are required in PTA courses. These may include community and service learning projects and involve research and use of library resources. Instructors will specify when assignment or projects are intended to be completed as a group. Point deductions may occur for collaboration on assignments intended to be completed individually.
5. Oral presentations are required in some courses and are required for clinical in-service presentations. Activities, which include speaking in front of the class, will be included in the curriculum to aid students in developing or refining oral communication skills.
6. **Lab competency skills checks and lab practicals** - Instructors and lab assistants evaluate laboratory skills through competency checks and lab practical examinations. Simulations of patient situations are used for laboratory and competency checks. Performance evaluations are based on established criteria and provided in the form of performance/competency guides. "Triggers" or critical safety elements are steps that are essential for safety and effectiveness of interventions. They are designated on score sheets. If safety is compromised, students will be required to repeat all or part of the lab practical or competency check, and scores will be adjusted as per program policy. Other remediation activities may be needed to assist student learning. Successful performance of all competency skills checks and lab practical examinations is required in order to progress to clinical education and continue through the PTA Curriculum. (See Academic Standards)

7. Students are responsible for monitoring their progress in each class and seeking assistance as needed. However, students in danger of falling below acceptable standards will be alerted by the instructor as soon as possible. The college's Ready to Report system will be employed to assure early retention intervention. Faculty are required to refer students who are deficient in attendance and/or performance. While the responsibility for raising the grade lies with the student, a number of options for remediation are available. The student should schedule a conference with the instructor or advisor immediately for assistance and develop a plan of action. Students are encouraged to utilize the Academic Resource Center (ARC) on the main campus for academic assistance.
8. **Comprehensive/practice Exam** - Required comprehensive practice exams will be administered online and are part of fall, spring, and summer semester course work. Failure to pass a summer semester exam in PTA 220 with a score of 600/800 or above results in failure of the course and dismissal from the program.
9. **Attendance** - Attendance is imperative for success and may be considered in the grade earned for each course. Please refer to syllabi for detailed information. Attendance grades for each course are recorded on the student transcript as per AJA@ State Tech®.
10. **Job Readiness Scores** – The college records scores for job readiness skills on student transcripts. These scores can be used by prospective employers who request a transcript to assess student readiness in the areas of safety, trust, timeliness, work habits, interpersonal skills, and citizenship. Students are introduced to Professional Behaviors, and faculty utilize these as well as the Job Readiness Assessment to determine scores. (See *Professional Behaviors Chart – Appendix D*)

**Service Learning** - As a Physical Therapist Assistant, it is important to demonstrate an awareness of social responsibility, citizenship, and advocacy, including participation in community service organizations and activities. To accomplish this objective, courses throughout the PTA curriculum will include service-learning objectives. PTA students will participate in various service learning projects and will complete associated reflective assignments.

### **Academic Standards**

Students must achieve a grade of "C" (75%) or above in all professional classes and average a 75% on all exams in order to continue enrollment in the PTA program. The standard for performance in PTA classes is consistent with that required to pass the PTA licensure exam. If a course grade below (75%) "C" is earned, a test average of 75% is not achieved, or if a student withdraws from any PTA course, the student will be ineligible to continue enrollment in the program. (See individual course syllabi for additional information about grading). In addition to mastery of content, students are expected to demonstrate behaviors consistent with appropriate levels of generic abilities. All professional courses, excluding Clinical Education courses will provide students with a job readiness score that reflects those "soft skills of employment" or generic abilities. **Note: Lecture and lab courses are assigned separate course numbers and a separate grade will be assigned to each course. A student may not continue enrollment in the program unless a "C" (75%) and 75% exam average is earned in both lecture and lab courses.** Lecture and lab courses are designed to be taken concurrently. A student has until six weeks after the end of the semester during which a class is completed to petition for a final academic grade to be changed. The student will complete a Final Grade Appeal form located at <https://www.statetechmo.edu/campus-services/counseling-services/ready-to-report/>.

### **Grading Scale**

Grading Scale	A	B	C	D	F
	91.5 to 100%	82.5 to 91.4%	74.5 to 82.4%	64.5 to 74.4%	64.4% and below

## **Attendance policy (See Also Dismissal Procedures-per State Technical College Catalog)**

Students are expected to attend all scheduled classes. In accordance with Professional Behaviors (see Appendix D) students are responsible for preparation, prompt attendance and participation in all class sessions. Students are responsible for all material presented, assignments, skills, etc. regardless of attendance. It is also the student's responsibility to obtain any handouts and to schedule an appointment with the instructor to make up any work as needed. If absence is unavoidable, students must notify each instructor via email. Job Readiness points may be deducted for infractions such as tardiness, inappropriate behavior, lack of preparation and participation, insubordination, etc. at the discretion of the instructor. Failure to notify instructors of unavoidable absences may result in additional point deductions, and/or a "zero" on any assignments, quizzes, or exams missed. Failure to report absence from a clinical education site may result in removal from the site and/or failure of the course. Absences are reported to Student Services department. See each individual course syllabi for specific course attendance policies. Consistent with the mission to prepare students for profitable employment, State Tech requires that attendance be recorded. Attendance and Job Readiness will be reflected in separate scores on the student's transcript. Habitual absence and tardiness will result in a referral to the College's Counseling department.

## **PTA Make-up Policy** (see also individual course syllabi, attendance and grading POLICIES)

### **Lecture/Lab:**

1. The student is responsible for making arrangements for obtaining lecture notes/handouts missed due to absences or tardiness, as well as any assigned material. Course materials and recorded lectures are usually available on Canvas.
2. Only assignments turned in on time will receive full credit. Assignments that are incomplete or late will receive a zero score. Assignments will be awarded up to 75% of the grade (minus deductions for wrong answers) if completed or turned in within 7 days after the due date. The instructor may require students to complete all assignments to be able to progress through the course.
3. It is the student's responsibility to know what has been assigned and when assignments are due.
4. The instructor is not obligated to schedule additional time for laboratory make-up.
5. Lecture capture may be available to view missed material. Lecture capture is not a substitute for attendance

## **Competency Skills Checks**

In order to assure that each student is competent and safe in performance of PTA skills; students are required to perform assigned tasks while being evaluated by an instructor. Performance objectives provide detailed instruction for each task. The procedure is as follows:

1. Students will be presented with step-by-step instruction for performance of data collection and therapeutic interventions in class via handouts, textbooks, and other resources.
2. Laboratory instruction and practice is necessary for development of essential skills. **This will likely involve time outside of regularly scheduled sessions.**
3. Students have the opportunity to practice skills and interventions during:
  - Formal labs
  - Open lab time, either individually or in groups
  - Individual/group appointments with instructors
4. Instructors may post a skill competency sign-up or schedule lab time for competency checks. **Students are expected to arrive well-prepared to perform the skill. Time limits may be placed on competency checks.**
5. The instructor will present a brief patient/client scenario (written or oral) containing the skill(s) the student must perform.
6. The student must perform each skill at a level comparable to the expected performance on a lab practical examination. **If a critical safety or effective element is missed, the student must repeat the competency/skill check.**
7. The student must perform each skill with a score of at least 75% with no critical safety elements missed. Skill competency/checks are graded using a point system established by the

instructor. Students may have more than one try to pass a skill competency. The initial attempt and two re-takes are allowed. If the competency is passed on a subsequent attempt, the recorded score will be 75%. If a student requires a re-take, the overall lab grade will be impacted but still allow the student to qualify to take the lab practical. Faculty have the discretion to allow additional attempts for specific competencies but remediation activities may be required (i.e. blood pressure).

8. Students are strongly encouraged to complete independent practice in preparation for performing a competency.
9. Students may be required to complete Subjective, Objective, Assessment, and Plan (SOAP) notes for scenarios/skills.
10. All skills that require competencies are listed on the course syllabus and will be graded according to the course syllabus. **All must be successfully completed prior to taking the final lab practical examination. Specific criteria are identified for passing a skill check, i.e., performing essential steps per performance guide, completing tasks without verbal cues, etc. Established criteria represents safe and competent performance that would be acceptable for progression to clinical education. Failure to perform safely or effectively will result in failure of the attempt. Triggers are noted on competency checklists.**
11. Failure to successfully complete the competency skills checks and submit requested documentation of skill competencies prior to the lab practical will restrict participation in the lab practical and may jeopardize successful completion of the course, as well as progression to clinical.
12. Students may be asked to participate in peer review learning experiences, but peer review does not substitute for instructor evaluation.

### **Lab Practical Examination Policy**

Laboratory courses will be graded, in part, by practical examination. Lab Practical examinations are simulated patient/client situations in which the student is given case scenarios and must perform, for a selected case, a combination of clinical skills and professional behaviors learned in multiple courses. Emphasis is placed on planning, integration of skills, infection control, safety, professionalism, positioning, body mechanics, and knowledge of pathology. Students are graded on performance using a scoring rubric. Sample rubrics are typically available on the course management system. Failure to correctly perform ANY designated essential safety or effectiveness element will result in failure of the exam for the associated course(s). Students must pass each laboratory practical with the minimum designated grade for that practical or a grade of 75% ("C") on the re-take attempt. Like any other exam, preparation is required for success. A first attempt will be performed and a second attempt will be allowed and students may be videotaped during performances for purposes of review or self-evaluation. Further practice (remediation) may be needed before retaking the practical exam. The purpose of these examinations is to assure that students are competent and safe in performance of skills prior to placement in clinical education.

Students will be allowed a second attempt to pass a lab practical exam in order to proceed in the program. If a student performs both attempts without passing the required lab practical examination the student will not successfully complete the course and cannot proceed in the PTA program. If a second attempt is needed to pass a lab practical, the recorded score for that exam will be 75% of the points possible, once a passing level has been achieved. Lab practical examinations may be written to represent skills in more than one class. Grades for specific skills/interventions are assigned to the class in which they are taught. In the event of a failed lab practical exam, the following actions will be taken.

### **Procedure for Lab Practical Retakes**

1. The **student** may schedule a meeting with the course instructor to discuss areas of concern to request remediation.
2. If a student does not pass content for one class but passes the other class, a retake is required but the plan of care for the practical may be revised as per instructor discretion.

3. The lab practical re-take exam will be scheduled at the discretion of the course instructor. The student must schedule the re-take with the instructor. **NOTE:** Scheduling issues that occur as a result of a failed lab practical may cause a delay in clinical education and/or graduation.
4. The maximum number of attempts is two. The lab practical grade for a repeat test is the lowest passing score or 75%. Failure to complete and submit required competency check-offs, with documentation, before the date of the lab practical will result in forfeiting the first lab practical attempt. In this case, the recorded score will be the actual performance score.
5. Faculty will video the re-take attempt for additional review or student self-assessment as needed.
6. If the second attempt does not result in a passing grade, a “0” will be entered in the gradebook for that exam. The student will not pass the course with the required “C” and may not proceed in the PTA curriculum.
7. If a student receives a grade in any PTA course less than a “C”, the student may not proceed through the curriculum and is subject to the re-admission policy.
8. **If a student fails to successfully complete all lab practical exams, the student may not proceed through the curriculum and is subject to the re-admission policy.**
9. Because determination of safety and competency of students prior to clinical placement is dependent upon successful completion of lab practical examinations, students may not begin clinical education until all lab practical examinations have been passed with a minimum score of 75%. The lead instructor for any given course may make the final determination of lab practical scores.
10. The intent of retakes and remediation is successful achievement of course objectives. Alternate assignments may also be required to facilitate student learning as deemed appropriate by the instructor, but will not substitute for successful completion of lab practical examinations.
11. After a lab practical failed first attempt, the student will be academically referred and asked to sign a Possible Separation from Department form.
12. If a student fails a course, the student dismissed from the program must follow the readmission policy.
13. As per the readmission policy, the student will be responsible for demonstrating safe and effective competency in all skills which have been previously learned prior to proceeding in the didactic or clinical education coursework. This could be accomplished through a Special Topics course (PTA 299) that would include lab practical examinations or competencies for previously learned skills. A score of 75% must be achieved.

### **Unsuccessful Completion of a Course**

1. Because the didactic curriculum is sequential, students must successfully complete all PTA coursework as determined, to continue enrollment in the program. Students must be in good standing with academic coursework to begin a clinical affiliation. Students may, in some cases, be allowed to continue academic coursework in the event of an interrupted or remediated clinical experience. However, all clinical practice courses must be completed in sequence.
2. Content learned in a PTA professional course is directly related to that learned in other PTA courses. This is especially true for those courses with lab practical examinations. Students who pass one course will be required to re-demonstrate competency in safe and effective practice of any content learned in previous coursework when under readmission to the program. Students may be required to enroll in a special topics course (PTA 299) for assessment of competency in required skills.
3. Expectations in the profession of physical therapy are high for academic knowledge, clinical skills, and professional behaviors. A student may be unsuccessful if he/she is not able to fulfill academic, skill, or professional behaviors-related competencies. Faculty may recommend the student seek resources such as counseling, tutoring services, or others that may enhance the student’s chances for successful completion of the program.

## **Referral Policy**

In the event that student performance declines and places the student in jeopardy of failing a course the State Technical College's Early Alert Reporting process will be initiated. Students will be referred to a counselor to assist with various resources in conjunction with retention efforts. The student, the referring course instructor, the student advisor, the College counselor, and the Vice President of Student Affairs will receive email notification of any early alert. Documentation and submission of an early alert report will follow the College's policies and procedures (see the college's Policy Library and Ready to Report website). An Early Alert report will be initiated for attendance concerns, academic performance concerns, and AJA concerns. If the student continues to be in jeopardy of failing a course, the student may be asked to sign a Possible Separation from Department form.

## **Suspension/Dismissal Procedures**

PTA students are subject to all College policies and procedures regarding suspension/dismissal for disciplinary reasons. (See the College's Policy Library for information).

## **Re-Admission Policy**

Students who wish to apply for readmission to the PTA program are encouraged to meet with faculty and/or student services personnel to discuss options. Students previously enrolled in the professional curriculum (2<sup>nd</sup> year) of the Physical Therapist Assistant Program, and withdrew prior to completion or who were academically ineligible to continue their enrollment will be subject to the following regulations for readmission:

1. A new State Tech Application for Admission must be submitted along with official transcripts from any colleges or schools attended since last enrollment at State Technical College of Missouri.
2. Candidates for readmission must submit a letter requesting re-admission to the PTA Program, explaining the reason(s) for previous withdrawal, and activities that have been pursued in the interim to increase the likelihood of future success.
3. Candidates for readmission must submit the request by July 1 for spring semester readmission, by May 1 for fall semester readmission, and December 1 for summer semester readmission.
4. Students who request readmission may be asked to enroll in a PTA 299 course prior to returning to the program.
5. The PTA 299 course will be customized to meet the needs of the enrolled student(s). The content will focus on review of previous coursework and will include both lecture and lab components as appropriate.
6. Students must demonstrate knowledge, skills, and attitudes through avenues that could include practical examinations, written/oral examinations, projects, etc. as deemed appropriate. The PTA Program Director and appropriate faculty will determine content that is needed.
7. The student will be considered for readmission one time only. Eligibility for readmission is limited to two years and is subject to space availability.
8. After 2 years, a previous student must complete a new application to be considered for admission. Admission is competitive. The admission year program selection policy is followed.
9. Clinical Education – students who fail a clinical experience and are dismissed from the program will follow the above noted procedure for re-admission.

## **Academic Integrity**

Students are expected to abide by the State Technical College Academic Integrity policy in all aspects of academic preparation. Academic dishonesty will not be permitted to take place without consequences. Academic dishonesty means that students will neither give nor receive unauthorized assistance from any person, paper or object, on any test, paper, assignment, examination, or project. Refer to the College's student handbook for definitions of academic dishonesty. When paraphrasing statements or using direct

quotations, credit should be given to the source. The use of another person's words without acknowledgment of the source is plagiarism. Collaboration for assignments that are intended to be completed independently is academic dishonesty.

We believe that the actions of each person in the profession of physical therapy reflect upon all of us. Therefore, students have an obligation to maintain the honor of the profession, not only through behavior, but also by helping others live up to the standards and ethics of the Physical Therapy profession. The primary persons who are empowered to monitor, detect, report, and recommend sanctions for academic dishonesty are instructors. Initial consequences for academic dishonesty are instructor-driven. Instructors may deduct credit or refuse to accept work that is in question. Additional consequences for academic dishonesty will follow the College's procedure (see the College's Policy Library).

Instructors are encouraged to implement practices to prevent cheating during tests. These may include but are not limited to the following general testing procedures:

- In case of student tardiness, the instructor reserves the right to not admit the student to the testing area.
- Backpacks, hats/caps, and personal items must be removed during testing.
- Cell phones, watches, notes, other technology, etc. are not allowed during testing
- Students are asked to remain in the room for the duration of the examination.
- Instructors may end the student's examination if he/she leaves the room before completion. Students may not exit the testing area without instructor permission during a test

On-line testing procedures will be followed for all on-line tests including but not limited to: password protection, use of a lockdown browser, proctored tests, use of Java Security to prevent printing test, limit time/location/access to test, test set up to shuffle questions or answers.

# PTA PROGRAM POLICIES

## Student Requirements for Clinical Education Policy

Each student is to complete the following requirements to be able to participate in clinical education experiences.

### Health Insurance

Students are asked to provide (either the insurance form or a copy of their card) as evidence of health care coverage. The College does not provide health insurance coverage. Students are responsible for securing healthcare coverage on their own. **All** students must show evidence of coverage, and should carry their card with them on clinical affiliations. Students are to have health insurance coverage prior to clinical placement.

### CPR Requirement

All PTA students must be certified in CPR BLS prior to clinical experiences, which begin in the 4th semester (2<sup>nd</sup> year – spring semester). **Students must provide a copy of the CPR card for their student file.** in the preceding fall semester, and are encouraged to carry their card with them on clinical affiliations.

### Immunizations and Required Tests

In the course of your educational program, you will be spending time in hospitals, clinics, nursing homes, and schools. It is important that students are adequately protected from certain communicable diseases as well as tested to make certain that you will not transmit one to those in your care. Students must provide accurate health information in compliance with healthcare standards. **Students will not be allowed to proceed to clinical education until all required documents have been submitted according to the program's procedure in the established timeline. Late submission of required documents will result in a hold being placed on the student's school account until the documents are submitted. A hold on the account may delay registration for future classes, which includes clinical education.**

Requirements include, but are not limited to, the following: physical exam and health history form and immunizations. All costs for the examination, immunizations, and drug screen are the student's responsibility. Some clinical sites may require additional tests or immunizations. The cost and coordination of additional tests is also the responsibility of the student. A copy of all immunization and health documents will be retained by the DCE and available per the request of clinical sites. The student must provide documentation of completion of the following required tests and immunizations:

1. Measles, Mumps, and Rubella (MMR): positive titers with dates listed or documentation of two immunizations
2. Tetanus/Diphtheria (Tdap): documented within ten years
3. Tuberculin (TB) 2 step skin test: yearly (positive skin test requires chest x-ray to confirm absence of disease)
4. Varicella (Chickenpox): 2 dose vaccination or proof of positive titer
5. Hepatitis B: 3 dose immunization, positive titer, or signed waiver
6. Flu vaccine: yearly
7. COVID vaccine per the clinical site's policy
8. Physical exam and health history - students are required to fully and accurately complete the health history, including any known health conditions or physical limitations that may limit their ability to fully participate in the program's course work and clinical education experiences.

**It is the student's responsibility to notify the program faculty of any medical conditions and/or medications, including new onset or changes, which may affect their performance in the classroom, lab, or clinical settings. Clinical facilities reserve the right to determine if a student may practice in their facility while under a physician's care.**

Exemptions for immunizations may include a documented medical condition (allergic reaction or other) or documented religious beliefs. Appropriate form must be completed by the appropriate personnel (physician, religious leader, etc.) to document exemptions. Certain exemptions may be recognized but it is ultimately a decision of the SCCE/administration at the clinical site to determine if an exempted student will be accepted for clinical placement.

### **Criminal Background Checks**

The PTA program requires students to obtain a formal criminal background check prior to the start of clinical experiences as part of the student requirements for clinical experiences. These include: federal, national, state, county background checks, and Social Security number tracking. The DCE will coordinate the process of obtaining the background checks with students at the cost to the student. If the background check identifies issues that may preclude clinical placement, the DCE will meet with the student to clarify the issues that were identified. The prospective clinical site will be notified prior to placement. Acceptance or rejection for a clinical placement based upon a positive background check is the decision of the SCCE/administration at the clinical site and the DCE must be notified. Clinical sites may require additional background checks to be completed by the student or the DCE prior to the start of the clinical experience. Background check results to be placed in the student file and forwarded to the clinical site upon request.

### **Drug/Alcohol Screening**

The PTA program does require a 10-panel drug screen for all students prior to the start of clinical experiences as part of the student requirements for clinical experiences. The DCE will coordinate the process of obtaining and reviewing the drug screening with the students. Drug screenings must be scheduled by the student at the cost to the student. Acceptance or rejection of a student for a clinical placement based upon the results of the drug screening is ultimately the decision of the SCCE/administration at the clinical site and the DCE must be notified. Clinical sites may require additional drug screens to be completed by the student prior to the start of a clinical experience. Drug screening results to be placed in the student file and forwarded to the clinical site upon request. A student's clinical placement could be delayed or cancelled following a positive drug screen, as well as being subject to program review.

The program follows PTA Program policies and procedures concerning drug screening and the College's policies and procedures regarding the use of drugs, drug screenings, and positive drug screenings. (see College's Policy Library)

### **Professional Liability Insurance Policy**

As a PTA student, you have personal responsibility for your own actions in your interactions with patients, even though you are not yet a graduate professional. It is necessary for students to be covered by professional liability insurance before participation in clinical education. The College provides professional liability insurance for you as a student of State Technical College of Missouri while you are on clinical experience. Proof of insurance will be provided to each clinical facility to which you are assigned.

### **Alcohol Policy**

State Technical College of Missouri is by law an alcohol-free campus. Regardless of age - being over 21 or not – no student may possess, sell, trade, distribute, manufacture, or use alcohol on any property owned or leased by State Tech or at any activity sponsored by State Technical College.

The possession, sale, consumption, or furnishing of alcohol on the College campus is governed by the College's Alcohol Policy and Missouri state laws. Laws regarding the possession, sale, consumption, or furnishing of alcohol are controlled by the Missouri Department of Alcohol and Beverage Control. However, the enforcement of alcohol laws on campus is the primary responsibility of the Associate Dean of Student Affairs. The State Technical College campus has been designated "Alcohol Free", and under no circumstances is the consumption of alcohol permitted. (See State Technical College Student Handbook "Alcohol Free Campus")

### **Drug Policy**

State Technical College of Missouri is by law a drug free campus. No student may possess, sell, trade, distribute, manufacture or use drugs on any property owned or leased by State Tech or at any activity sponsored by State Technical College. (See the College's Policy Library)

### **Smoking Policy**

The State Technical College PTA program is committed to the preservation of the health and wellness of all and is a tobacco free facility. Due to increased evidence that smoking and secondhand smoke pose significant health risks, the use of cigarettes, cigars, pipes, smokeless tobacco, e-cigarettes, and other smoking paraphernalia is prohibited. The policy applies to all students, employees, volunteers, visitors, patients, and others who may enter the facility. The campus is a tobacco free campus. (See the College's Policy Library)

### **Confidentiality/HIPAA Policy**

Students will spend time in several medical facilities and will have access to information that is confidential. Students are to maintain confidentiality at all times, both on and off school premises. When a patient enters a medical facility, all persons involved in the healthcare process assume an obligation to keep all information regarding the patient's identification and/or care in confidence. Reasons for admission/care, diagnosis, treatment, and all information obtained by virtue of your enrollment or clinical assignment should be held in the strictest confidence. Students are not to discuss any of this information outside the facility. Any disclosure of information is strictly on a "need to know" basis. Casual conversation with others may be overheard and thereby violate the right of privacy of others. Be particularly careful about conversation in eating places and other places of public gathering within the institution. Discussion of confidential information is not only a breach of ethics, but could involve you and the facility in legal proceedings. It may also result in termination of a clinical assignment. Students are required to sign a confidentiality statement regarding the above policy prior to exposure to patients or medical facilities. The program includes basic HIPAA training with completion verification.

*(See Confidentiality Statement – Appendix E)*

### **Student Privacy Policy**

A student file is maintained in the Student Academic Records Office of the campus. Separate PTA Program student files will be saved as a digital copy to be utilized by authorized PTA Program personnel only. These files include program specific forms, an advisor file with a copy of the education plan, admission information, etc. All computer files are protected by a password. Information in the student file is confidential and is shared with other faculty or college personnel when pertinent to the educational process. Students will be asked by the College to sign an Authorization for Release of Information form (attached) upon entering the program and this form will be kept in the student's academic record file and PTA Program file.

Students are assigned to a faculty advisor. Students have a right to privacy during advising sessions. Information shared with your advisor will be shared only for the purposes of assisting the student through the educational process.

Students will be asked to sign a consent form for audiovisual, photography, or videotaping that is used for educational or promotional purposes. If students photograph, videotape or audiotape subjects,

other than classmates, the student is responsible to obtain a signed consent from the subject(s). Forms are available in the PTA Office upon request. (See the College's Policy Library)

### **Release of Information Policy**

Student information and records are kept confidential and protected by the college practices outlined under the Article Identity Theft Prevention and further federal laws pertaining to academic, financial, and health records. The College will keep records to conform to all applicable state and federal laws including but not limited to the Family Educational Rights and Privacy Act; Gramm-Leach-Bliley Act; the Health Insurance Portability and Accountability Act (HIPAA). (Per the State Technical College Confidentiality Policy, Jan. 2022) The program will follow all applicable College policies pertaining to release of information.

The Family Education Rights and Privacy Act (FERPA) stipulates that information may be released to college employees only when the disclosure of information is to faculty or staff who have a "legitimate educational interest" in the student information. "Legitimate educational interest" is defined by the entities' role with State Technical College. This may include academic advising, letters of recommendation on behalf of the student, verification of a major or a degree, departmental recommendation for an award, or departmental/college program reviews. The program will not disclose any personally identifiable information about students except directory information without the written consent of the student. Clinical site coordinators and clinical instructors are informed that student records are to be kept private and confidential, and they receive information about FERPA policies. (See the College's Policy Library).

### **Students as Lab Subjects Policy**

Students enrolled in the PTA Program will be expected to serve as subjects during laboratory activities. Students typically portray a patient and receive assessments/interventions given by a classmate under the supervision of instructor(s). Special attire may be required or the student may be asked to partially disrobe. Student modesty is protected, just as modesty is protected during patient care. It is the responsibility of the student to notify PTA faculty and classmates if a lab activity/intervention is causing any discomfort/pain or if a contraindication is present. In the event of a pre-existing condition, students will be excused from receiving interventions that may be contraindicated and it is the responsibility of the student to inform faculty of such conditions. Students may be exposed to potential health risks during lab activities including but not limited to exposure to bloodborne and airborne pathogens, and accidental injuries including sharps injuries, musculoskeletal injuries, and chemical exposures. Students must sign a consent form for lab participation. (*See Informed Consent to Serve as Laboratory Subject–Appendix F*)

### **Consent for photography/audiotape/videotape Policy**

Students in the PTA program may be asked to participate in activities that require photography, audiotaping, or videotaping for educational or public relations purposes. Students will be asked to sign a consent form for participation. In conjunction with educational projects, students may wish to photograph, audiotape, or videotape subjects who are not students/classmates for educational purposes. Students must obtain an informed consent prior to the activity and must submit the consent form to the PTA faculty. If this involves a patient, the student will follow the policies and procedures of the clinical site for confidentiality and for obtaining consent. (*See consent form – Appendix G*)

### **PTA Student Orientation and Student Handbook Policy**

PTA students are provided electronic access to the PTA Student Handbook and are required to attend an orientation session to review program expectations, policies, and procedures. Students enrolled in the PTA Program must comply with established Program policies and procedures. Students are asked to sign an acknowledgement of receiving access to the handbook and attended an orientation review. The handbook should remain accessible throughout the program for reference of program policies and procedures. Students will receive all information, documents, and instructions related to completing

and submitting all student requirements for clinical education. It is the student's responsibility to complete and submit all required documents to the program. Students will also sign all acknowledgements during orientation. Acknowledgements will be maintained in the student file. (See Appendix H, *Orientation and Student Handbook Signature form*)

### **Program Assessment Policy**

Assessment plays an important role in our ongoing efforts to improve teaching and learning at State Technical College of Missouri. Student participation is needed to collect data for the improvement process. An annual Program Assessment Report is submitted to the College. This information then is integrated into the institutional report. Data used for assessment may include the following:

1. Selection Criteria (i.e., screening score; ACT test scores, high school G.P.A., college G.P.A. - if applicable).
2. General College assessment exam. This test is administered near the end of the curriculum and is a requirement for graduation from State Technical College.
3. Student Evaluations of Instruction (at the conclusion of each course).
4. Clinical Education performance evaluations and basic essential skill mastery.
5. Comprehensive examinations.
6. Exit survey (prior to program completion).
7. State Licensure Examination – National Physical Therapy Exam (NPTE) pass rates (**Passing the exam is required to obtain a license**).
8. Content data from licensure exam.
9. Graduate Survey (approximately 1 year post-graduation).
10. Employer Survey (approximately 1 year post-graduation).
11. Job Placement.
12. Retention of students.

### **Food/Drink Policy**

1. Students are not allowed to consume food during lecture or lab.
2. Drinks in a closed container only are allowed in lab or lecture.
3. During lunch breaks students may eat in classrooms but a clean environment must be maintained.

### **Inclement Weather Policy**

The PTA Program will follow the State Technical College policies concerning weather related and other events necessitating State Technical College closure. In the case of the College's closure, lecture and lab periods may be cancelled or instructors may utilize alternative methods of instructional delivery. The Chief of Staff will contact the President of the College who will make an assessment on whether the campus is open or closed for the day or at least a portion of the day. (Per the State Technical College Snow and Ice Policy) Decisions regarding PTA program class cancellations or late start times will be made as early as possible.

Students are encouraged to sign up for the State Technical College text alert notification system. College main campus & PTA program closures will be disseminated through the alert system, e-mail, and social media when appropriate. Students are encouraged to listen to local radio and television stations for cancellation notifications and all students are encouraged to check their College e-mail for information. Students are asked to use their best judgment when making decisions on traveling to class in the event of inclement weather. If a student judges it is unsafe to travel, they are to notify all appropriate PTA program faculty of their absence.

Faculty will determine method(s) to be utilized to cover course material and instruction missed due to school closings. These may include: lecture capture (live by Zoom or recording), open lab times, rescheduling courses, take-home assignments, etc. Students are asked to cooperate in these efforts to

keep courses running as smoothly as possible. Students should check their College e-mail and course management system (Canvas) for information regarding make up work.

If unable to attend, students are expected to notify the PTA program of their absence. Students are expected to check State Tech e-mail and course management system for information regarding make-up work. Absences due to inclement weather are not excused.

### **Complaint/Grievance Policy – Due Process**

The PTA Program is committed to the rights and privileges of students associated with this program in regards to due process. The program follows the College's policies and procedures concerning complaints/grievances. If a student feels that there has been a misunderstanding, discrimination, harassment, disagreement, or they question the procedures or practices of the College, the student may seek resolution by filing a formal written complaint.

Complaints/grievances concerning the PTA Program can be directed to the Program Director. Complaints/grievances concerning the PTA Program or State Technical College can be directed to the College following the College's formal policies and procedures.

Policies and procedures for complaint/grievances can be found in the State Technical College Catalog (<https://www.statetechmo.edu/wp-content/uploads/2022/05/2021-2022-State-Tech-College-Catalog-Policies.pdf>), and online at the State Technical College website. Complaint and grievance forms can be found on the State Technical College website at the "Ready to Report" weblink. Complaints/grievances are submitted in writing per the College's procedure. (See State Technical College Policy Library-Grievance Policy, and Ready to Report weblink, <https://www.statetechmo.edu/campus-services/counseling-services/ready-to-report/> )

No retaliation by the PTA Program or the College will occur if a complaint/grievance is made.

### **Potential Health Risks for Students Policy**

Students may be exposed to potential health risks during the education program and clinical practice including but not limited to exposure to bloodborne and airborne pathogens (e.g. TB, Hepatitis B, HIV, influenza, COVID). Other health risks may include accidental injuries: sharps injuries, musculoskeletal injuries, and chemical exposures. The student understands and assumes the risks involved in the education program and clinical practice and agrees to follow the policies and procedures of the College, the program, and the clinical site regarding these potential health risks. Students are expected to demonstrate behaviors to reduce the risk of infection transmission and accidental injury by following infection control/standard precautions and all safety practices and guidelines of the education program and the clinical site. Students will sign an Informed Consent Regarding Clinical Practice regarding exposure to potential health risks. This form will be kept in the student's program file.

### **Early Licensure Testing Policy**

Per state law, students may request early testing. Baseline criteria for early testing have been established to achieve the mission of the program and student outcome goals to develop competent physical therapist assistants. The program supports students who desire to take advantage of early testing but is also cognizant of the potential financial burden if the student is not prepared for early testing. (See Early Licensure Testing Policy in the PTA Program Policy Manual)

## FACILITY INFORMATION

Care must be taken to preserve facilities and equipment, which are used as a part of your training.

### **Health Sciences Center**

The PTA program is located in the Health Sciences Center on campus at One Technology Drive in Linn, Missouri.

### **Parking**

Students are to park between WHITE lines (NOT yellow lines) or a twenty-five dollar fee will be issued for violators. (See State Tech New Student Resource Guide "Parking")

### **PHONE USE**

Emergency - 911

### **PTA Program:**

PTA Director's Office	(573) 897-5337
PTA Instructor/DCE	(573) 897-5336
PTA Instructor	(573) 897-5334
PTA Fax	(573) 897-9981

### **Cellular Telephone Use**

Cell phones **must** be turned off or placed on silent during class and lab unless otherwise directed by the instructor. Talking on cell phones and texting or e-mailing on cell phones during class, lab, or clinical is not allowed. In addition to interfering with learning, this behavior is a distraction to other students and to the instructor. Cell phones must be placed at the front of the classroom, or in the location designated by the instructor during testing. Job readiness scores will reflect failure to comply. (See specific course syllabi for further guidelines at the discretion of the instructor).

### **Off-Campus Experiences**

Other regional facilities may be utilized for field trips or for specific learning experiences. If field trip sites are utilized, information about location of such classes will be provided in advance. Students are responsible for transportation to alternate sites and any associated risks or costs. Property is to be respected and facilities left clean, neat, and ready for subsequent use. Students will only be sent to off-site facilities which a Memorandum of Agreement (MOA) is in place. Facility/site representative and program faculty will be present for off-campus activities and students will be provided with an orientation. Some activities attended by students will not include a written agreement, APTA-Missouri Lobby Day, APTA-Missouri Central District Meetings, service learning, etc.).

## INFECTION CONTROL AND SAFETY

Students may be exposed to potential health risks during the education program and clinical practice including but not limited to exposure to bloodborne and airborne pathogens (e.g. TB, Hepatitis B, HIV, influenza, COVID). Other health risks may include accidental injuries: sharps injuries, musculoskeletal injuries, and chemical exposures. Students are expected to demonstrate behaviors to reduce the risk of infection transmission and accidental injury by following infection control/standard precautions and all safety practices and guidelines of the education program and the clinical site. This information will be covered in PTA courses as well as in the PTA Student Handbook. PTA instructors will provide specific information about infection control, biohazardous waste, and various types of disaster/emergency management in their courses.

### **Safety/Emergency Treatment**

If a student becomes ill or injured while attending class the program faculty will follow the policies and procedures of the College related to seeking medical or emergency care. The student must provide proof of insurance and is responsible for costs incurred.

Clinical facilities are responsible for access to emergency care while students are on clinical affiliations. Students must carry proof of insurance and are responsible for any costs incurred. Any serious injury or illness occurring during clinical affiliations involving the student should be reported to the DCE as soon as possible. The student will follow the policies and procedures of the clinical site concerning any serious injury or illness during the clinical experience. (*See appendix J, Informed Consent Regarding Potential Health Risks during Clinical Practice*)

### **Infection Control Policy**

The infection control policies of the Center of Disease Control, OSHA, and the National Safety Council that appear below have been adapted for the educational setting. PTA students will undergo bloodborne and airborne pathogen training as part of the curriculum.

### **Infection Control Practices**

Infection prevention and control involves a comprehensive effort to identify and prevent the spread of infection between persons and to identify potential sources of infection to insure the safety of all. When working in patient care areas, standard precautions are to be followed for all patients. It is to be assumed that all body substances are infectious and therefore proper precautionary measures should be taken to prevent the spread of bloodborne disease.

The provisions established by the Occupational Safety and Health Administration (OSHA) are contained in the OSHA Standard Number 1910.1030. Infection control is not limited to patient care areas. It also involves procedures and techniques for meeting established sanitation, sterilization and aseptic standards.

The implementation of **Infection Control** practices prevents the transmission of infectious diseases from blood and body fluids, involving both known and unknown sources. This system of protection assumes the presence of infection in all situations. Blood, wound, drainage, feces, mucus, pus, saliva, semen, urine, gastric contents, and emesis are all potential contaminants.

At the occurrence of any body-fluid spill, personnel should immediately put on gloves, wash the area with **hot**, soapy water, and then disinfect the area with an appropriate disinfectant.

### **General Infection Control Practices include:**

1. Use of Personal Protective Equipment (PPE) includes gloves, gown, goggles, mask, face shields, shoe and head coverings.
2. Proper hand washing before and after any patient contact. This action protects both patient and the caregiver.
3. Gloves are worn to protect hands from body fluids. This includes gloving when handling bedpans, urine receptacles, commodes, linen protectors, emesis basins, or any body-fluid collection device. It is not necessary to wear gloves to touch intact skin that is free of body-fluid contamination.
4. If clothing is likely to be soiled appropriate PPE are to be worn. This may include specialized gown, lab coat, or other protective clothing. When soiling occurs, clothing should be removed as soon as possible.
5. Masks should be worn when there is a potential for exposure to contaminated airborne particles. If there is danger of splashing, both masks and goggles should be worn.
6. Used needles and sharp items must be discarded into a puncture-resistant container that is labeled "BIOHAZARD".
7. Uncontaminated blood and body fluids can be flushed down the toilet. Contaminated blood and body fluid items requiring disposal should be placed in a designated biohazardous waste bag or container, secured, and disposed of according to infection control procedures. Saturated materials, posing threat of leakage, should be double-bagged.
8. Always wear gloves to collect bed linens in patient areas. Always wear gloves when hand washing small items.

**It is an OSHA regulation that no food or drink be consumed in patient care areas. Please respect this rule when in patient care areas.**

### **Hand Washing**

**The purpose of hand washing is to prevent the spread of infection and disease to other patients, personnel, and visitors. It is the single most important means of preventing the spread of infection. PTA students will learn, practice, and be graded on hand-washing technique.**

All personnel will perform hand washing:

- Before and after any procedures
- Between contact with different patients
- After touching excretions or secretions
- After taking care of an infectious patient
- Before performing any invasive procedure, touching wounds, changing dressings, specimen collection, catheterization, and after performing any of the above
- Before touching a patient who is susceptible to infection
- Before serving food
- Before and after preparing medication
- After personal toilet use, eating, coughing, sneezing and whenever in doubt

### **Hand Washing Procedure:**

Equipment: warm running water, liquid soap, and paper towels

1. Stand away from the sink to prevent cross contamination of clothing.
2. Turn faucet on to a comfortable temperature.
3. Regulate flow of water. Avoid splashing water.
4. Moisten hands in water. Hold hands over sink.
5. Apply soap
6. Bring hands together and create a heavy lather. Wash well beyond the area of contamination. Use friction.
7. Scrub for 15-30 seconds, typically 15 seconds but increase to 30 seconds if a known pathogen is present. Hold hands so that the flow of water is from wrist to fingertips.

8. With fingertips of opposite hand, circle each finger with a rotary motion from base to tip. Pay particular attention to area between fingers, around nail beds, and under your fingernails.
9. Rinse hands well under running water. Hold hands so that the direction of the water flow is from the wrist to your fingertips.
10. Pat hands dry with a paper towel.
11. Turn off water with the paper towel and discard.

### **Isolation Guidelines (Respiratory/contact)**

Patients requiring respiratory precautions should wear a mask at all times during treatment in the rehabilitation department. Appropriate protective barriers should be readily accessible to all staff for use with patients who have non-intact skin. Transportation to other departments should be kept to a minimum and specific precautions followed during transportation. Patients will be identified according to facility policy if on isolation precautions. No patient is denied ancillary services because the patient's illness necessitates isolation precautions.

PTA students should be aware of modes of transmission and should take appropriate infection control measures if a communicable infection is present. The program has masks and gloves available as needed.

### **Biohazardous Waste**

Per OSHA, biomedical or biohazardous waste is any waste product containing recognizable human blood, bodily fluids, or infectious materials. This includes dressings, gauze, containers, and other products or equipment that are noticeably contaminated with such fluids and thereby potentially harmful to a human being upon direct contact. Biohazardous waste is any item that has the risk of having infectious diseases that can be transmitted.

Other potentially infectious materials (OPIM) means: (1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Students are expected to follow the biohazardous waste disposal procedures of the clinical site.

### **Sharps**

Sharp items (needles, scalpel blades, other sharp instruments) will be considered as potentially infective and harmful. Sharp items will be handled with extreme care to prevent infection exposure and accidental injury. Dispose of sharp items in puncture-resistant containers immediately after use. Do not recap, purposefully bend, or otherwise manipulate by hand any needles that are to be disposed. Needles used in lab for training will be disposed of properly in an identified puncture-resistant container.

### **Cleaning and Housekeeping**

Mats and equipment should be cleaned with an appropriate disinfectant following use. PTA faculty will provide initial instruction to students. All equipment, supplies, models, etc. must be properly stored at the end of each class/lab period. Treatment tables should be covered with linens (as appropriate) during all patient care. Soiled linens and clean laundry should be placed in designated containers in the lab. Wash all soiled linens and towels in a machine using HOT water and detergent. Hydrocollators will be cleaned as needed and at least every 6 months.

# EMERGENCY PROCEDURES

It is important that all students, faculty, and staff do everything possible to prevent fires and reduce accidents. This will ensure not only personal safety, but also the safety of others.

Every effort has been made to see that students are provided a safe learning/working environment. All persons have the responsibility to maintain conditions that contribute to the safety of all present. Good judgment should be exercised at all times.

Safety policies and procedures in this handbook include both campus and facility information.

## **RAVE**

State Tech has implemented the RAVE Panic Button to improve safety and security of the campus. Students will be automatically enrolled for RAVE notifications via email and/or text. When a RAVE alert is issued, follow instructions based on the emergency notification, instructor/staff instruction, or posted instructions.

## **Fire/Fire Drill**

Instructors will be notified and will announce the fire drill. Close doors and windows. Do not attempt to put out the fire unless it is small enough for you to handle. Exit the building using the nearest door and proceed to the designated meeting place (grassy area north of the Health Sciences building-towards the Multipurpose Building). Wait for the all-clear announcement.

The Health Sciences facility is equipped with fire extinguishers and sprinklers throughout the building. In the event of a fire, call 911 to report the fire, contain the fire if possible using the nearest fire extinguisher, evacuate the building, proceed to the designated meeting spot as directed, and notify the instructor and main office.

## **R.A.C.E. System:**

- R**      Rescue person/patient or remove from danger.
- A**      Alarm. In case of fire pull alarm handle and call 911. Give the exact location of the fire.
- C**      Contain the fire. In case of fire, close doors and windows of the room where is fire is.
- E**      Evacuate or extinguish the fire if it is small enough for you to handle.

## **Fire Extinguisher Information**

### **Class of Fire:**

- A. Cloth, paper, wood
- B. Flammable liquids
- C. Electrical Equipment

### **Extinguisher Type:**

- Water pressure
- Carbon Dioxide
- Multi-purpose and Dry Chemical

### **Canister Color:**

- Silver
- Red
- Red

The following instructions outline the proper usage of a fire extinguisher:

## **P.A.S.S. Procedure:**

- P**      Pull the pin. This unlocks the operating lever and allows you to discharge the extinguisher. Some extinguishers may have other seals or tamper indicators.
- A**      Aim low. Point the extinguisher nozzle (or hose) at the base of the fire.
- S**      Squeeze the lever above the handle. This discharges the extinguishing agent. Releasing the lever will stop the discharge. (Some extinguishers have a button instead of a lever.)
- S**      Sweep from side to side. Moving carefully toward the fire, keep the extinguisher aimed at the base of the fire and sweep back and forth until the flames appear to be out. Watch the fire area. If the fire re-ignites, repeat the process.

## **ALWAYS KNOW THE LOCATION OF THE NEAREST FIRE EXTINGUISHER AND FIRE EXIT.**

Keep your back to an exit and stand six to eight feet away from the fire. Follow the four-step PASS procedure. If the fire does not begin to go out immediately, leave the area at once.

Always be sure the fire department inspects the fire site, even if you think you have extinguished the fire.

### **Severe Weather**

The National Weather Service issues weather alerts in two (2) classifications.

Tornado or Thunderstorm Watch Local weather conditions exist wherein tornadoes or thunderstorms may develop. Continue to monitor conditions and wait for further instructions.

Tornado or Thunderstorm Warning Tornadoes or thunderstorms have been sighted or indicated by radar. Sirens have been sounded.

### **Health Sciences Center Procedure**

In the event of a tornado watch, faculty and staff will monitor weather conditions and advise if a tornado warning is issued. All windows and blinds should be closed. If a warning for Osage County/ Linn is issued, all persons will move the Activity Center tornado shelter if time permits. If time does not allow then all HSC occupants will move to the PTA or PNT classrooms (HSC 126 and HSC 109). If caught in any other location in the building stay away from windows until the threat has ended. We will remain in the safe location until the all clear/ sirens are turned off.

### **Earthquake**

During an earthquake, the “solid” earth moves like the deck of a ship. The actual movement of the ground, however, is seldom the direct cause of death or injury. Most casualties result from falling objects and debris because the shocks can shake, damage, or demolish buildings. Earthquakes may also trigger secondary events such as landslides, fires, liquefaction, flooding, and release/spread of hazardous materials. Earthquake injuries are commonly caused by building collapse or damage, such as toppling chimneys, falling bricks from wall facings and roof parapets, collapsing walls, falling ceiling plaster/tile, light fixtures, file cabinets, bookcases, pictures, flying glass. Fires may break out as a result of broken gas and electrical lines. The danger may be increased by a lack of water as a result of broken water mains. There may be fallen power lines, which increases the risk of electrocution.

#### **1. Before an earthquake:**

Check your work area for potential hazards.

- a. Place large and heavy objects on lower shelves.
- b. Securely fasten shelves to walls.
- c. Brace or anchor high or top-heavy objects.
- d. Bottled goods, glass, and other breakables should be stored in low or closed cabinets.

#### **2. Earthquake Emergency Response Procedure:**

- a. Remain calm.
- b. Seek shelter in a doorway or under a heavy table.
- c. Do not use elevator(s), avoiding power lines.
- d. After shaking stops, evacuate the building, avoid power lines.
- e. Call 911 to report injury or damage.
- f. Offer to help those who need assistance.

**If outdoors**, stand away from the building, trees, and power lines. The greatest danger from falling objects is just outside doorways and close to outer walls. Get out to an open area, once in an open area; stay there until the shaking stops.

**After an earthquake:**

Be prepared for additional earthquake shocks called “aftershocks.” Although most of these are smaller than the main shock, some may be large enough to cause additional damage or bring weakened structures down. When you feel that the “aftershocks” have subsided, report to your department director or supervisor. If neither is available, stay calm and wait for others.

**Bomb Threat / Bomb Contacts:**

Whether the threat is made by phone, text, social media, email, or a note, immediately call 911 and Facilities Director (573) 897-5323 or (573) 619-3844.

1. Remain calm.
2. Keep the caller on the line as long as possible.
3. Listen carefully.
4. Fill out bomb threat checklist.

Ask them to repeat the message and write down everything the caller says. If you have caller ID, write down the number that appears on your phone.

5. Immediately notify a supervisor.
6. Call 911 from non-wireless device. Do not use cell phones, radios, or other wireless devices.
7. Notify Facilities Director at (573) 897-5323 or (573) 619-3844.

**Suspicious Object Emergency Response Procedure**

1. Remain calm.
2. Move away and do not disturb the object.
3. Notify others to move away.
4. Call 911 from non-wireless device. Do not use cell phones, radios, or other wireless devices.
5. Notify Facilities Director at (573) 897-5323 or (573) 619-3844.
6. If you or others have direct contact with the object wash exposed skin with soap and water after reaching a place of safety.

The procedure outlined herein is to be instituted in the event a bomb is found and/or a bomb threat is received. When such a threat is received, there is little or no time to determine the resources available. Professional assistance should be put in complete authority upon arrival. Cooperation with the police and others involved is most important. Tight security should be maintained on each area searched until the entire search is completed.

Notify law enforcement that what appears to be a bomb has been found, giving the exact location, and description of the object. Personnel must remain calm and alert. Routines should be disrupted as little as possible.

**Evacuation**

If it is deemed necessary by Administration that a partial or complete evacuation is necessary, standard evacuation procedures should be followed. Designated meeting sites for congregating are identified at each location. At the Health Sciences Center the meeting location is in the open field to the north of the building (toward the Multipurpose Building).

## **Cardiac Arrest/Medical Emergency**

1. Remain calm.
2. Push Panic Button – Medical or Call 911 and report your name, incident type, and incident location.
3. For injury/illness – keep victim still, check breathing, and control bleeding.
4. Use pressure to stop bleeding and provide life support CPR and AED, if needed. AED is located in the hallway between the faculty hallway and the anatomy/chemistry classroom (across from the vending machines).
5. Be aware of hazards associated with blood borne pathogens. Wear proper personnel protective equipment. If exposed to suspected infection material, wash the exposed area thoroughly with soap and water, and seek medical attention.
6. Comfort the patient and reassure that medical assistance is on the way.
7. Provide first aid, consider the following:
  - a. Is immediate action needed in order to save a life?
  - b. Will I place myself in harm or jeopardy?
  - c. Notify Facilities Director at (573) 897-5323 or (573) 619-3844.
  - d. Designate a person to direct/escort EMS directly to emergency site.
  - e. When police arrive and emergency personnel arrive, give them additional information.

## **Accidents/Incidents**

Any accident that occurs on the State Technical College campus or while on a program/college event should be reported to the College administration. An Accident Report form is available to faculty and students on the College web page, Ready To Report link,

[https://cm.maxient.com/reportingform.php?StateTechMO&layout\\_id=40](https://cm.maxient.com/reportingform.php?StateTechMO&layout_id=40) .

## **First Aid Kit**

First Aid kit locations can be found on the evacuation maps located in each office or near the entrance/exit of the building. HSC first aid kit is located in faculty kitchen/copier room. An AED is located in the main entry hall past the faculty office entry door.

## **Hazardous Spill**

Information on what is classified as a hazardous material as well as storage, handling and disposal guidelines can be found in State Tech Emergency Operation Plan Annex H – Hazardous Materials. SDS for Physical Therapist Assistant is located in the PTA Lab. If a hazardous materials spill occurs, the following guidelines should be followed:

1. If hazardous chemicals come into contact with your skin immediately and continuously flush the affected area with clear water.
  - a. Eye Contact: If a chemical has been splashed into the eyes, immediately wash the eye and inner surface of the eyelid with copious amounts of water for 15 minutes. Check for and remove any contact lenses at once. Seek medical attention.
  - b. Ingestion: Consult the Safety Data Sheet (SDS), a chemical first aid manual or call the Poison Control Information Center at 1-800-222-1222. Follow directions and seek medical attention.
  - c. Minor Skin Contact: Promptly flush the affected area with water and remove any contaminated clothing. If symptoms persist after washing, seek medical attention.
  - d. Major Skin Contact: If chemicals have been spilled over a large area of the body, quickly remove all contaminated clothing while using the shower. Wash off chemicals by using a mild detergent or soap and water. Do not neutralize chemicals or apply salves. Repeat shower if discomfort occurs or continues. Seek medical attention.
2. Remove contaminated clothing.
3. Push Panic Button - 911 or dial 911
4. Warn fellow workers and supervisors.
5. Take action to contain the spill if possible, without jeopardizing personal well-being.
6. Evacuate the area and pull building fire alarm if evacuation is required.

7. Notify Facilities Director at (573) 897-5323 or (573) 619-3844.
8. DO NOT RE-ENTER THE BUILDING until the “ALL CLEAR” has been given via Rave Alert System.

### **Spill Kit Location:**

Spill kit locations can be found on the evacuation maps located in each office or near the entrance/exit of the building.

### **Active Shooter/Lockdown**

1. Run
  - a. Have an escape plan.
  - b. Leave your belongings behind.
  - c. Keep your hands visible.
  - d. Evacuate. Help others escape. Do not attempt to move the wounded.
  - e. Prevent others from entering into an area where the active shooter may be.
2. Hide
  - a. Hide in an area out of the active shooter’s view.
  - b. Block entry to your hiding place, lock the doors.
  - c. Lights should be turned off and blinds closed.
  - d. Silence your cell phone
3. Fight
  - a. As a last resort and only when your life is in imminent danger.
  - b. Attempt to incapacitate the active shooter.
  - c. Act with physical aggression and throw items at the active shooter.
4. Push Panic Button – 911 or call 911 when safe to do so
5. Expect the first officers that arrive on scene to not stop to help the injured.
6. Expect rescue teams to follow initial officers. The rescue teams will treat and remove injured.
7. Once you have reached a safe location, you will likely be held in that area by law enforcement until the situation is under control and all witnesses have been identified and questioned.
8. Do not leave the area until law enforcement authorities have instructed you to do so or you have received the “ALL CLEAR” message via the Rave Alert System.

### **Lockdown:**

1. During lockdown, buildings will be locked so no entry can take place.
2. Directions will be sent out via Rave Alert System.

### **Medical Facility Contacts**

Capital Region Medical Center.....	573-632-5000
St. Mary's Health Center.....	573-761-7000
Osage County Health Department.....	573-751-4122

### **Threats/Workplace Violence/Stalking**

1. Be familiar with Workplace Violence Procedures.
2. Immediately report any workplace violence, threats, and stalking, to appropriate campus authority.
3. Any individual who is the victim of domestic violence, or who believes he or she may be the victim of violence, is encouraged to promptly notify an appropriate administrator and the Police Department.
4. All employees share the responsibility to report threats or acts of violence on campus.

### Telephone Threats Emergency Response Procedure:

The person receiving the call should:

1. Try to engage the caller in order to gather as much information as possible following the checklist below.
2. Try to listen for familiar background noises such as cars or trains driving by or familiar sounds on campus.
3. Try to identify the caller's voice.
4. Note the exact time of the call. Both when the call began and when it was terminated.
5. If possible, determine which phone line the call came in on.
6. If the phone has "caller ID", write down the number that appears.

### **Student In Distress/Attempted or Threatened Suicide**

Student in Distress Emergency Response Procedure:

1. Recognize symptoms
  - a. Significant change in academic performance or classroom conduct
  - b. Unusual behavior or appearance
  - c. Traumatic event or change in relationship
2. Speak privately with student
3. Directly and candidly discuss your observations and concerns
4. Offer support and assistance
5. Never leave the person in distress until counselor or law enforcement arrives.

Threaten Suicide Emergency Response Procedure:

If someone threatens suicide, the threat should be taken seriously and campus counseling services should be notified immediately as well as 911.

1. Do not leave the person alone.
2. Try to remove the person calmly but firmly from any immediate means of hurting him or herself.
3. If the person has a weapon, do not try to take it. Alert emergency responders.
4. Keep the area off limits and isolated until campus counseling (573) 897-5110 and (573) 897-5228, Associate Dean of Student Affairs (573) 897-5193 and/or emergency responders arrive.

Attempted Suicide Emergency Response Procedure - If an individual attempts suicide:

1. Immediately call 911.
2. Do not leave the person alone.
3. Keep other people away from the scene.
4. Do not handle weapons, containers or other possible evidence.
5. Render first aid if qualified and/or necessary.
6. Witnesses should be directed to stay in the area to answer questions.

### **Utility or Facility Failure**

1. Remain Calm.
2. Notify Facilities Director at (573) 897-5323 or (573) 619-3844 and give your name, telephone number, location, and nature of the emergency.
  - a. Do not attempt to correct the problem unless you are authorized and qualified to do so.
  - b. Provide appropriate assistance to others in your immediate area that may be unfamiliar with the building/workplace.
  - c. Turn off equipment such as computers and monitors to avoid potential serious damage once the power is restored.
  - d. If you are in a dark area, proceed with caution to an area that has emergency lights.
  - e. If you are in an elevator, stay calm. Use the emergency button to alert authorities. Do not attempt to open the elevator car door or in any way shake or jar the car to move unless directed to do so by emergency personnel.

3. Director of Facilities will determine if the area needs to be evacuated.
4. Faculty and staff will direct people to a safe building or location.

### **Aircraft Down on Campus**

1. If an aircraft crashes on or near the campus, contact 911, Facilities Director (573) 897-5323 or (573) 619-3844. If you are unable to reach Facilities Director call (573) 897-5000.
2. If the aircraft and/or fire pose an immediate threat, evacuate the building using the evacuation routes posted and seek safety at an appropriate distance.
3. Await further instructions from emergency responders or school administration.
4. Be aware that all aircraft debris and wreckage should not be disturbed unless necessary to save lives or suppress fire.

# CLINICAL EDUCATION

## **Philosophy and Purpose of Clinical Education**

The clinical education portion of the curriculum is a vital component of the Physical Therapist Assistant Program. It is in the clinical setting that the student learns by doing, and is able to apply knowledge within context. The Program strives to provide a framework for the development of highly competent professionals who are able to deliver services in a variety of clinical settings.

The Program incorporates didactic and clinical learning experiences designed to promote the development of strong fundamental concepts. Through clinical experiences in a variety of settings, the student develops professional behaviors, critical thinking skills, recognizes the individuality in patient care and learns to problem-solve based on the patient's needs. Each clinical experience is planned to correspond with the academic preparation of the student.

Throughout the clinical education program, strong emphasis is placed on behaviors that relate to professionalism as well as clinical skills. A course syllabus with specific information related to each course will be provided prior to the start of the experience and may be modified at the discretion of the instructor. (See individual course syllabi for additional information on the clinical education component of the curriculum).

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## **Clinical Education Course Objectives**

I. PROFESSIONALISM - Demonstrates professional behavior in all situations.

II. COMMUNICATION/DOCUMENTATION SKILLS - Demonstrates effective communication and education skills with patients/clients and healthcare providers.

III. TIME AND RESOURCES - Demonstrates efficient utilization of time and resources for patient care and other duties related to patient care.

IV. POLICIES and PROCEDURES - Demonstrates adherence to legal practice standards, and facility/department policies and procedures.

V. CRITICAL THINKING AND PROBLEM SOLVING - Exhibits the ability to identify problems, develop solutions, and implement appropriate solutions.

VI. ACADEMICS - Demonstrates knowledge from course content and learning experiences related to body systems and health conditions typically seen across the lifespan.

VII. TEAMWORK/INTERPERSONAL SKILLS - Participates as a member of the interprofessional healthcare team.

VIII. COMMITMENT TO LEARNING - Demonstrates a commitment to learning and professional development through active learning and goal directed activities.

IX. CLINICAL SKILLS - Demonstrates appropriate, effective, safe and competent clinical skills related to patient care.

## **Clinical Education Requirements**

Each student is required to complete 3 clinical rotations and a minimum of one placement each in an out-patient facility and an in-patient facility. Outpatient sites include clinics, schools, and Home Health. In-patient facilities include hospitals, rehab facilities, and nursing home/SNF facilities.

**Clinical I is 4 weeks (152 hours) in January.** This is a four-week (40 hours per week) clinical experience that provides the student with the first opportunity for hands-on patient care. The student will apply basic skills learned in the classroom to the clinical setting. The student begins to make the connection between theory and practice. The student will work under the direct supervision of a licensed physical therapy professional in an assigned/approved facility. This clinical provides opportunities for development of appropriate professional behaviors related to the role of the physical therapist assistant. **Beginning level performance of skills is the expectation by the completion of this clinical experience.** The student would be expected to still need supervision with complex patients or relatively “basic” patients that have a diagnosis that they have not previously encountered.

**Clinical II is 6 weeks (232-240 hours) and Clinical III is 6 weeks (232-240 hours) during the summer.** These are six-week (40 hours per week) clinical experiences that provides the student with opportunities to provide patient care under the supervision of a licensed physical therapy professional in an assigned/approved facility. The student will apply concepts and skills learned in the classroom to the clinical setting, strengthening the connection between theoretical and foundational knowledge. The student will work with a variety of patients to develop competence in clinical skills and exhibit appropriate professional behaviors related to the role of the physical therapist assistant as part of the health care team. This clinical also facilitates development of cultural competence, quality assurance, and billing practices. Student will have the opportunity to present an education in-service to the health care team.

## CLINICAL EDUCATION PROCEDURES

### Student Orientation to Clinical Education and Clinical Experiences

The Director of Clinical Education (DCE) will meet with the students throughout the year to ensure students are aware of procedures, requirements, expectations, assignments, objectives, goals related to clinical education and experiences. These meetings will take place prior to their clinical experiences and will occur in both a group and individual basis as needed. As part of the orientation process, students will sign a “Release of Information to Clinical Sites” form to be placed in student’s clinical education file. This form allows students to grant a clinical center access to necessary records maintained by the PTA program. The student will also sign an “Informed Consent for Clinical Practice” form. This form verifies that the student understands the health risks involved in participating in clinical practice and is responsible for notifying the DCE concerning as serious injury or illness during clinical experiences concerning health risks. (See Appendices J and K)

### Assigning Clinical Education Sites

The DCE, with student input, determines student clinical placements. Students may be required to drive up to 60 miles or more than 1 hour from their residence for clinical placement. Students are also responsible for all costs associated with clinical experiences including student vetting requirements, health insurance, immunizations/health physical exam, gas/transportation, food, lodging, and appropriate clothing.

### Clinical Absences and Tardiness

The student is expected to be present in the clinic 40 hours per week. Students will work the hours/days of their clinical instructor, and the work schedule may be modified at the discretion of the CI based on holidays, clinic closure for weather, or other circumstances related to the student, CI or clinic. Vacation time or days off will not be granted during the clinical rotation unless approved by the DCE. When absent or tardy, the student should contact the DCE and the CI as soon as possible, and missed time will be made up. Absences and tardiness are monitored by the CI and DCE. Students are encouraged to be safe and use caution when there is inclement

weather. The decision to drive to clinical remains with the student. Weather conditions may require students to arrive late or leave early. If the student judges it unsafe to travel, they are to notify the DCE of their absence as soon as possible. Time and days missed due to inclement weather will be made up at the discretion of the CI/site and the DCE.

### **Appropriate Behavior for Clinical Experiences**

As stated throughout the handbook, the Professional Behaviors (Generic Abilities) are the guidelines for appropriate behavior in the clinical setting. Orientation to the site provided by the CI should assist in understanding clinical site policies/procedures. It is the student's responsibility to comply with site policies and procedures. It may be necessary to ask for additional information or seek clarification, i.e. policies involving emergency procedures, smoking regulations, dress code, departmental hours and holidays, time management, etc. Students will follow the APTA Standards of Ethical Conduct for the Physical Therapist Assistant, and the APTA Guide for Conduct for the Physical Therapist Assistant. (See Appendices C and B)

### **Assessment of the Student's Clinical Experience**

Evaluation of the student's performance during the clinical experience is based on the completion of specific objectives and criteria for each clinical practice course as outlined in the syllabi. The student's performance during the clinical experiences is assessed by the CI and the DCE using PTA Program developed evaluation tools including the Student Performance Evaluation, Comprehensive Clinical Competency Checklist, and course assignments. The clinical instructor, according to established criteria, evaluates clinical performance as it relates to both clinical skills as well as professional behaviors. A comprehensive clinical competency checklist is initiated for each student at the beginning of the clinical education curriculum. This enables clinical and academic faculty to track student performance of clinical skills and ensure that adequate opportunities for skill development are available. Students must demonstrate acceptable performance of essential competencies over the course of their clinical work.

The DCE holds the primary responsibility for assigning grades for all clinical practice courses.

The student will be given the opportunity for remediation to repeat one clinical practice course if a course is interrupted due to the student being at risk of failing a clinical practice course, or the student fails a clinical practice course. Students may fail a clinical rotation if he/she fails to meet expectations in either clinical skills or professional behaviors. Poor attendance or failure to report absence may be cause for termination of a clinical education placement. The DCE will work with the student on a remediation plan and assigning another clinical site. If the student is successful in completing the remediation clinical experience, the student will receive a grade of 75% or a "C" for the clinical practice course. If the student fails the remediation clinical practice course, the student will be dismissed from the PTA program, and not permitted to move on with future courses and clinical practice courses. (See PTA Program Clinical Education Policy: Interrupting and/or Failing a Clinical Practice Course in the Policy Manual)

### **Clinical Site Visits and Phone Calls**

The DCE or faculty will perform clinical site visits and phone calls during student clinical experiences in order to assess the student's clinical experience so far. Each student will receive at least one visit (if site is within 120 miles of the faculty) during one of their three clinical practice rotations. Students will receive a phone call during each clinical practice rotation if they are not visited. The DCE is available via phone or email to clinical faculty (CI/SCCE) and students to discuss questions, issues or concerns; and are encouraged to call.

# Standards of Practice for Physical Therapy



**HOD S06-20-35-29** [Amended: HOD S06-19-29-50; HOD S06-13-22-15; HOD S06-10-09-06; HOD S06-03-09-10; HOD 06-03-09-10; HOD 06-99-18-22; HOD 06-96-16-31; HOD 06-91-21-25; HOD 06-85-30-56; Initial: HOD 06-80-04-04; HOD 06-80-03-03] [Standard]

## Preamble

The physical therapy profession is committed to transforming society by optimizing movement to improve the human experience. Physical therapists pursue excellence in a professional scope of practice that includes optimizing physical function, health, quality of life, and well-being across the lifespan, and they work to improve population health in the communities where they practice. The American Physical Therapy Association (APTA) attests to this commitment by adopting and promoting the following *Standards of Practice for Physical Therapy*. These standards are the profession's statement of conditions and performances that are essential for provision of high-quality professional service to society, and they provide a foundation for assessment of physical therapist practice.

## I. Ethical/Legal Considerations

### A. Ethical Considerations

The physical therapist practices according to the APTA *Code of Ethics for the Physical Therapist*.

The physical therapist assistant complies with the APTA *Standards of Ethical Conduct for the Physical Therapist Assistant*.

### B. Legal Considerations

The physical therapist complies with all the legal requirements of jurisdictions regulating the practice of physical therapy.

The physical therapist assistant complies with all the legal requirements of jurisdictions regulating the work of the physical therapist assistant.

## II. Administration of the Physical Therapy Service

### A. Statement of Mission, Purposes, Goals, Objectives, and Scope of Services

The physical therapy service has a statement of mission, purposes, goals, objectives, and scope of services that is reviewed annually and reflects the needs and interests of the patients and clients served, the physical therapy personnel affiliated with the service, and the community.

### B. Organizational Plan

The physical therapy service has a written organizational plan.

The organizational plan:

- Describes relationships among components within the physical therapy service and, where the service is part of a larger organization, between the service and the other components of that organization;
- Ensures that a physical therapist provides the clinical direction of physical therapist services;
- Defines supervisory structures within the service; and
- Reflects current personnel functions.

### C. Policies and Procedures

The physical therapy service has written policies and procedures that are reviewed regularly and revised as necessary; reflect the operation, mission, purposes, goals, objectives, and scope of the

service; are legally compliant with federal and state law; and are guided by the association's positions, standards, guidelines, policies, and procedures.

**D. Administration**

Guided and informed by APTA positions, standards, guidelines, policies, and procedures, the physical therapist responsible for the clinical direction of physical therapist services ensures:

- Compliance with local, state, and federal requirements;
- Services are provided in accordance with established policies and procedures;
- The process for assignment and reassignment of physical therapist staff (handoff communication) supports individual physical therapist responsibility to their patients and clients and meets the needs of the patients and clients; and
- Continuing competence of physical therapists and physical therapist assistants by providing training consistent with their respective roles.

**E. Fiscal Management**

The physical therapist responsible for physical therapist services, in consultation with physical therapy staff and appropriate administrative personnel, participates in the planning for and allocation of resources. Fiscal planning and management of the service is based on sound accounting principles.

The fiscal management plan:

- Includes a budget that provides for optimal use of resources;
- Ensures accurate recording and reporting of financial information;
- Allows for cost-effective utilization of resources;
- Follows billing processes that are consistent with federal regulations and payer policies, charge reasonable fees for physical therapist services, and encourage physical therapists to be knowledgeable of service fee schedules, contractual relationships, and payment methodologies; and
- Considers options for providing *pro bono* services.

**F. Improvement of Quality of Care and Performance**

The physical therapy service has a written plan for continuous improvement of quality of care and performance of services.

The improvement plan:

- Provides evidence of ongoing review and evaluation of services; and
- Provides a mechanism for documenting improvement in quality of care and performance and is consistent with requirements of external agencies, as applicable.

**G. Staffing**

The physical therapy personnel affiliated with the physical therapy service have demonstrated competence, and are sufficient to achieve the mission, purposes, goals, objectives, and scope of the service.

The physical therapy service:

- Ensures that the level of expertise within the service is appropriate to the needs of the patients and clients served, and consistent with the scope of the services provided; and
- Provides appropriate professional and support personnel to meet the needs of the patient and client population.

**H. Staff Development**

The physical therapy service has a written plan that provides for appropriate and ongoing staff development.

The staff development plan:

- Includes strategies for lifelong learning and professional and career development that include self-assessment, individual goal setting, and organizational needs;
- Includes mechanisms to foster mentorship activities;
- Includes information regarding evidence-based practice and relevant clinical practice guidelines; and
- Includes education regarding use of clinical practice guidelines, reflective reasoning, clinical reasoning, metacognition, and the value of mentoring.

I. Physical Setting

The physical setting, where applicable, is designed to provide a safe and accessible environment that facilitates fulfillment of the mission, purposes, goals, objectives, and scope of the physical therapy service. It is appropriate for the number and type of patients and clients served. The equipment is safe and sufficient to achieve the purposes and goals of the physical therapy service.

J. Coordination

Physical therapy personnel collaborate with all health services providers and with patients, clients, caregivers, and others as appropriate; and use a team and person-centered approach in coordinating and providing physical therapist services.

**III. Patient and Client Management**

Physical therapist practice incorporates all components of evidence-based practice, integrating best available research evidence, clinical expertise, and an individual's values and circumstances to make decisions regarding services for patients and clients, practice management, and health policy.

A. Physical Therapist of Record

All patients and clients receiving physical therapist services shall have a physical therapist of record who is responsible for patient and client management.

B. Patient and Client Collaboration

Within the patient and client management process, the physical therapist, the individual, and their caregiver(s) establish and maintain an ongoing collaborative process of decision-making that exists throughout the provision of services and can extend over the lifespan.

C. Initial Examination/Evaluation/Diagnosis/Prognosis

The physical therapist performs an initial examination and evaluation to establish a diagnosis and prognosis prior to intervention. Wellness and prevention encounters may occur without the presence of disease, illness, impairments, activity limitations, or participation restrictions. Physical therapist services include the use of assessments to identify the presence of risk factors, and cognitive and environmental barriers and opportunities that may be targets for health promotion activities.

The physical therapist examination:

- Is documented and dated by the physical therapist who performed it;
- Identifies the physical therapy and as indicated other health needs of the patient or client;
- Performs or orders appropriate diagnostic and or physiologic procedures, tests, and measures;
- Produces data that are sufficient to allow evaluation, diagnosis, prognosis, and the establishment of a plan of care;
- Refers for additional services to meet the needs of the patient or client; and
- Includes, when appropriate and available, results from diagnostic and physiologic testing.

D. Management Plan and Plan of Care

The management plan is the framework of physical therapist services provided to patients or clients, groups, or populations. The management plan is based on best available evidence and may include recommendations and goals developed by other entities. When indicated, the management plan describes the need for additional testing or other information to inform decision-making regarding the

need for ongoing physical therapist services. A management plan is indicated when prevention, health promotion, and wellness services are provided in groups or populations.

The management plan includes a plan of care when physical therapist services are indicated to address a health condition. The plan of care is based on the best available evidence and consists of statements that specify the goals of the plan, predicted level of optimal improvement, interventions to be used, proposed duration and frequency of the interventions that are required to reach the goals and outcomes, and plans as appropriate for referral, consultation, or co-management with other providers.

A plan of care is not needed when the physical therapist is being consulted for expert opinion or advice, or for diagnostic or physiologic testing. In such situations the physical therapist documents the reason(s) that the plan of care was not created.

The physical therapist involves the patient or client and appropriate others in the development of the management plan and plan of care.

**E. Intervention**

The physical therapist provides or directs and supervises intervention consistent with results of the examination, evaluation, diagnosis, prognosis, and plan of care. Intervention is focused on meeting the goals of the plan of care and optimizing functional performance, emphasizes patient or client education, and promotes proactive, wellness-oriented lifestyles. It may be provided in an episode of care, in a single encounter such as for wellness and/or prevention, in specialty consultation, or as follow-up after an episode of care. Services also may be provided intermittently over longer periods of time in cases of managing patients or clients with chronic conditions, creating a lifelong patient or client relationship with the physical therapist.

An *episode of care* is the managed care provided for a specific health condition or conditions during a set time period. The episode can be for a short period, or on a continual basis, or it may consist of a series of intervals of service.

The intervention:

- Is provided at a level that is consistent with best available evidence and current physical therapist practice;
- Is in direct alignment with the patient's or client's desired outcomes and goals;
- Is altered in accordance with changes in response or status; and
- Is provided in such a way that directed and supervised responsibilities are commensurate with the qualifications and legal limitations of the physical therapist assistant.

**F. Lifelong and Long-Term Patient and Client Relationships**

Physical therapists foster and encourage lifelong and long-term patient and client relationships. Where feasible, physical therapists, as entry-point providers, provide services within the community that are available to patients or clients over a lifetime. Efforts are made to address movement system disorders and to maintain optimal health and wellness through physical therapist intervention as needed.

Lifelong and long-term patient and client relationships:

- Foster continuity of service over patients' and clients' lifespans by addressing changes in the movement system, health status, or disabilities as they arise;
- Empower patients and clients to advocate for their own health;
- Empower the physical therapist to advocate on behalf of patients and clients within the health services system; and
- Foster identification by patients and clients that they have their own physical therapist among various health professionals.

**G. Reexamination**

The physical therapist reexamines the patient or client as necessary to evaluate progress or change in status. Reexamination may occur during an episode of care, during follow-up encounters after an

episode of care, or periodically in the case of the management of patients and clients with chronic conditions. During reexamination the physical therapist modifies the management plan accordingly and refers the patient or client to another health services provider for consultation as necessary.

**H. Conclusion of an Episode of Care**

The physical therapist concludes an episode of care when the goals and outcomes for the patient or client have been achieved, when the patient or client is unable to further progress toward goals, or when the physical therapist determines that the patient or client will no longer benefit from physical therapy. Conclusion of a single episode of care may not, in many settings or circumstances, signal the end of a patient or client provider relationship.

**I. Communication/Coordination/Documentation**

The physical therapist communicates, coordinates, and documents all aspects of patient and client management including the results of the initial examination and evaluation, diagnosis, prognosis, plan of care, intervention, responses to intervention, changes in patient or client status relative to the intervention, reexamination, and episode of care summary. The physical therapist of record is responsible for "handoff" communication and follows "handoff" procedures developed by the physical therapy service to the next physical therapist of record. When possible, patient records and data are recorded using a method that allows for collective analysis. The physical therapist ensures that protected health information is maintained and transmitted following legally required practices.

**J. Co-management/Consultation/Referral**

At any point in an episode of care, or in a long-term or lifelong physical therapist-patient or client relationship, a physical therapist may engage in 1 or more of the following actions related to involvement of other clinicians. Other clinicians may be those in other professions and also may be physical therapist colleagues, some with advanced practice credentials or board certification in a clinical specialty.

- Co-management: The physical therapist shares management responsibility for the individual with another clinician(s).
- Consultation: Upon the request of another clinician(s), the physical therapist renders professional expert opinion or advice by applying highly specialized knowledge and skills to aid in the management of an individual's health condition. The physical therapist documents the findings and any recommendations of the consultation as part of the management plan. When a physical therapist is consulted for the purposes of diagnostic or physiologic testing, the physical therapist determines the need for and performs the testing in accordance with best available evidence. The results of the testing are documented and communicated to the referring clinician(s). Unless indicated, the consultant physical therapist does not assume management responsibility of the individual. The physical therapist also seeks consultative services from other clinicians when situations exist that are beyond the expertise or available resources of the physical therapist. In these cases, the physical therapist shares responsibility for the individual with the consultant.
- Referral: The physical therapist may:
  - Refer an individual to another provider and either conclude care or not develop a plan of care;
  - Refer an individual to another provider and continue the management plan at the same time;
  - Receive an individual referred from another provider who chooses not to continue services for the individual;
  - Receive an individual from another provider who continues to provide services to the individual (if the physical therapy episode of care is ongoing, the physical therapist shares responsibility for the individual); or
  - Receive an individual from another provider for diagnostic and or physiologic testing.

**IV. Education**

The physical therapist is responsible for individual professional development. The physical therapist assistant is responsible for individual career development.

- The physical therapist and the physical therapist assistant, under the direction and supervision of the physical therapist, participate in the education of peers, other health services providers, and students.

- The physical therapist educates and provides consultation to consumers and the general public regarding the purposes and benefits of physical therapy.
- The physical therapist educates and provides consultation to consumers and the general public regarding the roles of the physical therapist and the physical therapist assistant.

## **V. Advocacy**

The physical therapist and the physical therapist assistant will participate in advocacy for patients' and clients' rights with respect to:

- Physical therapy being an entry-point for patients into the health services system;
- Physical therapists serving in primary care roles;
- Appropriate access to needed health services including physical therapist services; and
- Communities creating safe and accessible built environments, where population health is a priority.

## **VI. Research**

The physical therapist applies research findings to practice and encourages, participates in, and promotes activities that establish the outcomes of patient and client management provided by the physical therapist.

The physical therapist:

- Remains current in their knowledge of literature related to practice;
- Protects the rights of research subjects and maintains the integrity of research;
- Participates in research as appropriate to individual education, experience, and expertise;
- Educates physical therapists, physical therapist assistants, students, other health professionals, and the general public about new evidence from research and the outcomes of physical therapist practice; and
- Accesses and translates knowledge in support of clinical decisions, and uses literature based on its quality and appropriateness.

## **VII. Community Responsibility**

The physical therapist demonstrates community responsibility by participating in community and community agency activities, educating the public, formulating public policy, and providing *pro bono* physical therapist services.

### **Explanation of Reference Numbers:**

HOD P00-00-00-00 stands for House of Delegates/month/year/page/vote in the House of Delegates minutes; the "P" indicates that it is a position (see below). For example, HOD P06-17-05-04 means that this position can be found in the June 2017 House of Delegates minutes on Page 5 and that it was Vote 4.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure

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# APTA Guide for Conduct of the Physical Therapist Assistant



## Purpose

The APTA Guide for Conduct of the Physical Therapist Assistant (Guide) is intended to serve physical therapist assistants in interpreting the Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) of the American Physical Therapy Association (APTA). The APTA House of Delegates in June of 2009 adopted the revised Standards of Ethical Conduct, which became effective July 1, 2010.

The Guide provides a framework by which physical therapist assistants may determine the propriety of their conduct. It also is intended to guide the development of physical therapist assistant students. The Standards of Ethical Conduct and the Guide apply to all physical therapist assistants. These guidelines are subject to change as the dynamics of the profession change and as new patterns of health care delivery are developed and accepted by the professional community and the public.

## Interpreting the Standards of Ethical Conduct

The interpretations expressed in this Guide reflect the opinions, decisions, and advice of the Ethics and Judicial Committee (EJC). The interpretations are set forth according to topic. These interpretations are intended to assist a physical therapist assistant in applying general ethical standards to specific situations. They address some but not all topics addressed in the Standards of Ethical Conduct and should not be considered inclusive of all situations that could evolve.

This Guide is subject to change, and the Ethics and Judicial Committee will monitor and revise the Guide to address additional topics and standards when and as needed.

## Preamble to the Standards of Ethical Conduct

### **The Preamble states as follows:**

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life. No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

**Interpretation:** Upon the Standards of Ethical Conduct for the Physical Therapist Assistant being amended effective July 1, 2010, all the lettered standards contain the word "shall" and are mandatory ethical obligations. The language contained in the Standards of Ethical Conduct is intended to better explain and further clarify existing ethical obligations. These ethical obligations predate the revised Standards of Ethical Conduct. Although various words have changed, many of the obligations are the same. Consequently, the addition of the word "shall" serves to reinforce and clarify existing ethical obligations. A significant reason that the Standards of Ethical Conduct were revised was to provide physical therapist assistants with a document that was clear enough to be read on its own without the need to seek extensive additional interpretation.

The Preamble states that “[n]o document that delineates ethical standards can address every situation.” The Preamble also states that physical therapist assistants “are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.” Potential sources for advice or counsel include third parties and the myriad resources available on the APTA website. Inherent in a physical therapist assistant’s ethical decision-making process is the examination of his or her unique set of facts relative to the Standards of Ethical Conduct.

## Topics

### Respect

#### Standard 1A states as follows:

- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

**Interpretation:** Standard 1A addresses the display of respect toward others. Unfortunately, there is no universal consensus about what respect looks like in every situation. For example, direct eye contact is viewed as respectful and courteous in some cultures and inappropriate in others. It is up to the individual to assess the appropriateness of behavior in various situations.

### Altruism

#### Standard 2A states as follows:

- 2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.

Interpretation: Standard 2A addresses acting in the best interest of patients and clients over the interests of the physical therapist assistant. Often this is done without thought, but, sometimes, especially at the end of the day when the clinician is fatigued and ready to go home, it is a conscious decision. For example, the physical therapist assistant may need to make a decision between leaving on time and staying at work longer to see a patient who was 15 minutes late for an appointment.

### Sound Decisions

#### Standard 3C states as follows:

- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.

**Interpretation:** To fulfill 3C, the physical therapist assistant must be knowledgeable about his or her legal scope of work as well as level of competence. As a physical therapist assistant gains experience and additional knowledge, there may be areas of physical therapy interventions in which he or she displays advanced skills. At the same time, other previously gained knowledge and skill may be lost due to lack of use. To make sound decisions, the physical therapist assistant must be able to self-reflect on his or her current level of competence.

## Supervision

### Standard 3E states as follows:

3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

**Interpretation:** Standard 3E goes beyond simply stating that the physical therapist assistant operates under the supervision of the physical therapist. Although a physical therapist retains responsibility for the patient or client throughout the episode of care, this standard requires the physical therapist assistant to take action by communicating with the supervising physical therapist when changes in the individual's status indicate that modifications to the plan of care may be needed. Further information on supervision via APTA policies and resources is available on the APTA website.

## Integrity in Relationships

### Standard 4 states as follows:

4. Physical therapist assistants shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, other health care providers, employers, payers, and the public.

**Interpretation:** Standard 4 addresses the need for integrity in relationships. This is not limited to relationships with patients and clients but includes everyone physical therapist assistants come into contact with in the normal provision of physical therapist services. For example, demonstrating integrity could encompass working collaboratively with the health care team and taking responsibility for one's role as a member of that team.

## Reporting

### Standard 4C states as follows:

4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

**Interpretation:** Physical therapist assistants shall seek to discourage misconduct by health care professionals. Discouraging misconduct can be accomplished through a number of mechanisms. The following is not an exhaustive list:

- Do not engage in misconduct; instead, set a good example for health care professionals and others working in their immediate environment.
- Encourage or recommend to the appropriate individuals that health care and other professionals, such as legal counsel, conduct regular (such as annual) training that addresses federal and state law requirements, such as billing, best practices, harassment, and security and privacy; as such training can educate health care professionals on what to do and not to do.
- Encourage or recommend to the appropriate individuals other types of training that are not law based, such as bystander training.
- Assist in creating a culture that is positive and civil to all.
- If in a management position, consider how promotion and hiring decisions can impact the organization.

- Access professional association resources when considering best practices.
- Revisit policies and procedures each year to remain current.

Many other mechanisms may exist to discourage misconduct. The physical therapist assistant should be creative, open-minded, fair, and impartial in considering how to best meet this ethical obligation. Doing so can actively foster an environment in which misconduct does not occur. The main focus when thinking about misconduct is creating an action plan on prevention. Consider that reporting may never make the alleged victim whole or undo the misconduct.

If misconduct has not been prevented, then reporting issues must be considered. This ethical obligation states that the physical therapist assistant reports to the “relevant authority, when appropriate.” Before examining the meaning of these words it is important to note that reporting intersects with corporate policies and legal obligations. It is beyond the scope of this interpretation to provide legal advice regarding laws and policies; however, an analysis of reporting cannot end with understanding one’s ethical obligations. One may need to seek advice of legal counsel who will take into consideration laws and policies and seek to discover the facts and circumstances.

With respect to ethical obligations, the term “when appropriate” is a fact-based decision and will be impacted by requirements of the law. If a law requires the physical therapist assistant to take an action, then, of course, it is appropriate to do so. If there is no legal requirement and no corporate policy, then the physical therapist assistant must consider what is appropriate given the facts and situation. It may not be appropriate if the physical therapist does not know what occurred, or because there is no legal requirement to act and the physical therapist assistant does not want to assume legal responsibility, or because the matter is being resolved internally. There are many different reasons that something may or may not be appropriate.

If the physical therapist assistant has determined that it is appropriate to report, the ethical obligation requires him or her to consider what entity or person is the “relevant authority.” Relevant authority can be a supervisor, human resources, an attorney, the Equal Employment Opportunities Commission, the licensing board, the Better Business Bureau, Office of the Insurance Commissioner, the Medicare hotline, the Office of the Inspector General hotline, the US Department of Health and Human Services, an institution using their internal grievance procedures, the Office of Civil Rights, or another federal, state, city, or local agency, or a state or federal court, among others.

Once the physical therapist assistant has decided to report, he or she must be mindful that reporting does not end his or her involvement, which can include office, regulatory, and/or legal proceedings. In this context, the physical therapist assistant may be asked to be a witness, to testify, or to provide written information.

## **Sexual Harassment**

### **Standard 4F states as follows:**

4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

**Interpretation:** As noted in the House of Delegates policy titled “Sexual Harassment,” “[m]embers of the association have an obligation to comply with applicable legal prohibitions against sexual harassment....” This statement is in line with Standard 4F that prohibits physical therapist assistants from harassing anyone verbally, physically, emotionally, or sexually. While the standard is clear, it is important for APTA to restate this point, namely that physical therapist assistants shall not harass anyone, period. The association has zero tolerance for any form of harassment, specifically including sexual harassment.

## Exploitation

### Standard 4E states as follows:

4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

**Interpretation:** The statement is clear—sexual relationships with their patients or clients, supervisees, or students are prohibited. This component of Standard 4 is consistent with Standard 4B, which states:

4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative, or other authority (eg, patients and clients, students, supervisees, research participants, or employees).

Consider this excerpt from the EJC Opinion titled Topic: Sexual Relationships With Patients or Former Patients (modified for physical therapist assistants):

A physical therapist [assistant] stands in a relationship of trust to each patient and has an ethical obligation to act in the patient's best interest and to avoid any exploitation or abuse of the patient. Thus, if a physical therapist [assistant] has natural feelings of attraction toward a patient, he or she must sublimate those feelings in order to avoid sexual exploitation of the patient.

One's ethical decision making process should focus on whether the patient or client, supervisee, or student is being exploited. In this context, questions have been asked about whether one can have a sexual relationship once the patient or client relationship ends. To this question, the EJC has opined as follows:

The Committee does not believe it feasible to establish any bright-line rule for when, if ever, initiation of a romantic/sexual relationship with a former patient would be ethically permissible.

The Committee imagines that in some cases a romantic/sexual relationship would not offend ... if initiated with a former patient soon after the termination of treatment, while in others such a relationship might never be appropriate.

## Colleague Impairment

### Standard 5D and 5E state as follows:

5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Interpretation:** The central tenet of Standard 5D and 5E is that inaction is not an option for a physical therapist assistant when faced with the circumstances described. Standard 5D states that a physical therapist assistant shall encourage colleagues to seek assistance or counsel while Standard 5E addresses reporting information to the appropriate authority.

5D and 5E both require a factual determination on the physical therapist assistant's part. This may be challenging in the sense that the physical therapist assistant might not know or easily be able to determine whether someone in fact has a physical, psychological, or substance-related impairment. In addition, it might be difficult to determine whether such impairment may be adversely affecting someone's work responsibilities.

Moreover, once the physical therapist assistant does make these determinations, the obligation under 5D centers not on reporting, but on encouraging the colleague to seek assistance, while the obligation under 5E does focus on reporting. But note that 5E discusses reporting when a colleague is unable to perform; whereas, 5D discusses encouraging colleagues to seek assistance when the impairment may adversely affect their professional responsibilities. So, 5D discusses something that may be affecting performance, whereas 5E addresses a situation in which someone clearly is unable to perform. The 2 situations are distinct. In addition, it is important to note that 5E does not mandate to whom the physical therapist assistant reports; it provides discretion to determine the appropriate authority.

The EJC Opinion titled Topic: Topic: Preserving Confidences; Physical Therapist's Reporting Obligation With Respect to Unethical, Incompetent, or Illegal Acts provides further information on the complexities of reporting.

### Clinical Competence

#### Standard 6A states as follows:

6A. Physical therapist assistants shall achieve and maintain clinical competence.

**Interpretation:** 6A should cause physical therapist assistants to reflect on their current level of clinical competence, to identify and address gaps in clinical competence, and to commit to the maintenance of clinical competence throughout their career. The supervising physical therapist can be a valuable partner in identifying areas of knowledge and skill that the physical therapist assistant needs for clinical competence and to meet the needs of the individual physical therapist, which may vary according to areas of interest and expertise. Further, the physical therapist assistant may request that the physical therapist serve as a mentor to assist him or her in acquiring the needed knowledge and skills. Additional resources on Continuing Competence are available on the APTA website.

### Lifelong Learning

#### Standard 6C states as follows:

6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

**Interpretation:** 6C points out the physical therapist assistant's obligation to support an environment conducive to career development and learning. The essential idea here is that the physical therapist assistant encourages and contributes to his or her career development and lifelong learning, whether or not the employer provides support.

### Organizational and Business Practices

#### Standard 7 states as follows:

7. Physical therapist assistants shall support organizational behaviors and business practices that benefit patients/clients and society.

**Interpretation:** Standard 7 reflects a shift in the Standards of Ethical Conduct. One criticism of the former version was that it addressed primarily face-to-face clinical practice settings. Accordingly, Standard 7 addresses ethical obligations in organizational and business practices on both patient and client and societal levels.

**Documenting Interventions Standard 7D states as follows:**

7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.

**Interpretation:** 7D addresses the need for physical therapist assistants to make sure that they thoroughly and accurately document the interventions they provide to patients and clients and document related data collected from the patient or client. The focus of this Standard is on ensuring documentation of the services rendered, including the nature and extent of such services.

**Support - Health Needs Standard 8A states as follows:**

8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

**Interpretation:** 8A addresses the issue of support for those least likely to be able to afford physical therapist services. The standard does not specify the type of support that is required. Physical therapist assistants may express support through volunteerism, financial contributions, advocacy, education, or simply promoting their work in conversations with colleagues. When providing such services, including pro bono services, physical therapist assistants must comply with applicable laws, and as such work under the direction and supervision of a physical therapist. Additional resources on pro bono services are available on the APTA website.

Issued by the Ethics and Judicial Committee  
American Physical Therapy Association October 1981

**Last Amended:** March 2019  
**Contact:** [ejc@apta.org](mailto:ejc@apta.org)

# Standards of Ethical Conduct for the Physical Therapist Assistant



**HOD S06-20-31-26** [Amended HOD S06-19-47-68; HOD S06-09-20-18; HOD S06-00-13-24; HOD 06-91-06-07; Initial HOD 06-82-04-08] [Standard]

## Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Physical therapist assistants are guided by a set of core values (accountability, altruism, collaboration, compassion and caring, duty, excellence, integrity, and social responsibility). Throughout the document the primary core values that support specific principles are indicated in parentheses. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients and clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive. The APTA Guide for Conduct of the Physical Therapist Assistant and Core Values for the Physical Therapist and Physical Therapist Assistant provide additional guidance.

## Standards

### **Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.**

(Core Values: Compassion and Caring, Integrity)

- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapist services.

### **Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients and clients.**

(Core Values: Altruism, Collaboration, Compassion and Caring, Duty)

- 2A. Physical therapist assistants shall act in the best interests of patients and clients over the interests of the physical therapist assistant.
- 2B. Physical therapist assistants shall provide physical therapist interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients and clients.
- 2C. Physical therapist assistants shall provide patients and clients with information regarding the interventions they provide.
- 2D. Physical therapist assistants shall protect confidential patient and client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

### **Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.**

(Core Values: Collaboration, Duty, Excellence, Integrity)

- 3A. Physical therapist assistants shall make objective decisions in the patient's or client's best interest in all practice settings.
- 3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapist interventions.

- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient and client values.
- 3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.
- 3E. Physical therapist assistants shall provide physical therapist services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient or client status requires modifications to the established plan of care.

**Standard #4: Physical therapist assistants shall demonstrate integrity in their relationships with patients and clients, families, colleagues, students, research participants other health care providers, employers, payers, and the public.**

(Core Value: Integrity)

- 4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients and clients, students, supervisees, research participants, or employees).
- 4C. Physical therapist assistants shall not engage in any sexual relationship with any of their patients and clients, supervisees, or students.
- 4D. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.
- 4E. Physical therapist assistants shall discourage misconduct by physical therapists, physical therapist assistants, and other health care professionals and, when appropriate, report illegal or unethical acts, including verbal, physical, emotional, or sexual harassment, to an appropriate authority with jurisdiction over the conduct.
- 4F. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

**Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.**

(Core Values: Accountability, Duty, Social Responsibility)

- 5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient and client safety.
- 5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.**

(Core Value: Excellence)

- 6A. Physical therapist assistants shall achieve and maintain clinical competence.
- 6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.
- 6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

**Standard #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients and clients and society.**

(Core Values: Integrity, Accountability)

- 7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.
- 7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.

- 7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients and clients.
- 7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.
- 7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients and clients

**Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.**

(Core Value: Social Responsibility)

- 8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.
- 8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapist services.
- 8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

**Explanation of Reference Numbers:**

HOD P00-00-00-00 stands for House of Delegates/month/year/page/vote in the House of Delegates minutes; the "P" indicates that it is a position (see below). For example, HOD P06-17-05-04 means that this position can be found in the June 2017 House of Delegates minutes on Page 5 and that it was Vote 4.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure

**Last Updated:** 8/12/2020

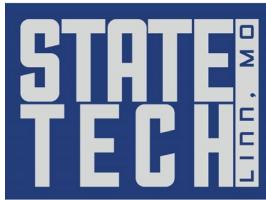
**Contact:** [nationalgovernance@apta.org](mailto:nationalgovernance@apta.org)

## GENERIC ABILITIES

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the profession's core of knowledge and technical skills, but are nevertheless required for success in the profession. Ten generic abilities were identified through a study conducted at UW-Madison in 1991-92. They have been further developed to include 3 levels of achievement. It is the goal that each student will achieve entry-level performance in each category by the completion of the program. These behaviors have been incorporated into Clinical Performance Evaluations and are an integral part of classroom expectations and are used to determine the job readiness score. Students experiencing difficulties will work with their advisor and program faculty to develop a plan of action to meet identified deficit(s). The job readiness score will be reduced **if he/she fails to meet the expectations related to these behaviors either in the classroom or the clinical setting, or fails to comply with any plan of action.** The ten abilities and definitions developed are as follows:

Generic Ability	Definition
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 and Resources	The ability to obtain the maximum benefit from a minimum 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 to distinguish the relevant from the irrelevant.
10. Stress Management	The ability to identify sources of stress and to develop effective coping behaviors.

\*\*Developed by the Physical Therapy Program, University of Wisconsin-Madison  
May et al., Journal of Physical Therapy Education. 9:1, Spring 1995



## State Technical College of Missouri

One Technology Drive, Linn, MO (573) 897-5000, Fax: (573) 897-9981

### PTA PROGRAM CONFIDENTIALITY STATEMENT

I understand that in this course of study I will spend time in medical facilities and may have access to and acquire information that is confidential. I understand that I am obliged to maintain confidentiality at all times, both at school and away from school.

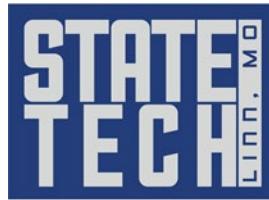
Confidentiality statement from the PTA Student Handbook:

When a patient enters a medical facility, all persons involved in the health care process assume an obligation to keep all information regarding the patient's identification and/or care in confidence. Reasons for admission/care, diagnosis, treatment, and all information obtained by virtue of your enrollment or clinical assignment should be held in the strictest confidence. Students are not to discuss any of this information outside the facility. Any disclosure of information is strictly on a "need to know" basis. Casual conversation with others may be overheard and thereby violate the right of privacy of others. Be particularly careful about conversation in eating places and other places of public gathering within the institution. Discussion of confidential information is not only a breach of ethics, but could involve you and the facility in legal proceedings. It may also result in termination of a clinical assignment.

I understand that a violation of confidentiality considerations may result in disciplinary action and/or legal action.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_



# **State Technical College of Missouri**

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## **Informed Consent to Serve as Laboratory Subject**

As a student associated with the Physical Therapist Assistant program, I, \_\_\_\_\_, understand that in the course of my education I will be asked to serve as a subject during laboratory activities. This may include:

1. Portraying the part of a patient/client for the purposes of assessment and/or treatment performed by faculty or a classmate under instructor supervision
2. Wearing special attire or being partially disrobed with attention to modesty

It is my responsibility to notify the PTA faculty and classmates if

1. Treatment during lab is causing any discomfort or pain
2. A current or pre-existing condition exists that may be compromised by participation.
3. Any contraindication for interventions.

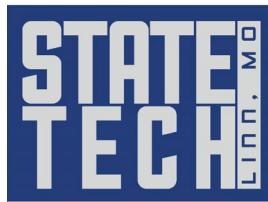
I have the right to refuse to participate in any of the above activities. I am aware that participation in all lab experiences is an important part of my grade. I understand that refusal may detract from the breadth and depth of my learning experience and the ability to matriculate through the program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **Acknowledgement of lab safety rules**

I understand that I must follow the lab policies, procedures, and rules outlined in the PTA student handbook regarding safe and appropriate skill practice during lab and open lab times.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## State Technical College of Missouri

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### INFORMED CONSENT FOR MEDIA/TECHNOLOGY PRODUCTION

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Name of Student (please print)

The undersigned hereby authorizes the taking of photographs or movies of myself, a student at State Technical College of Missouri.

I understand that the film or photograph may be used by the yearbook staff for publication in the College Yearbook, news media or the College's public relations/marketing department for marketing purposes and the student will or will not be identified at the discretion of the yearbook staff, news media or public relations/marketing department.

I understand that I may be photographed, videotaped or audiotaped for instructional purposes.

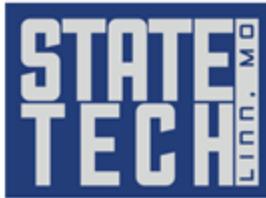
This consent is expressly intended to release from liability all personnel of State Technical College of Missouri.

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Student Signature

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Date



## State Technical College of Missouri

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### Orientation and Student Handbook Signature Form

\_\_\_\_\_  
Name of Student (Please Print)

\_\_\_\_\_  
Date

1. I attended orientation at the Physical Therapist Assistant Program and understand the policies, rules and regulations of the program as presented.

\_\_\_\_\_  
Student Signature

2. I received instructions to access the Physical Therapist Assistant Student Handbook and agree to abide by the policies and procedures provided.

\_\_\_\_\_  
Student Signature

**Note:** This document will be retained in the Program student file.

# Core Values for the Physical Therapist and Physical Therapist Assistant



**HOD P09-21-21-09** [Amended: HOD P06-19-48-55; HOD P06-18-25-33; Initial HOD P05-07-19-19] [Previously Titled: Core Values: for the Physical Therapist] [Position]

The core values guide the behaviors of physical therapists and physical therapist assistants to provide the highest quality of physical therapist services. These values imbue the scope of physical therapist and physical therapist assistant activities. The core values retain the physical therapist as the person ultimately responsible for providing safe, accessible, cost-effective, and evidence-based services; and the physical therapist assistant as the only individual who assists the physical therapist in practice, working under the direction and supervision of the physical therapist. The core values are defined as follows:

- **Accountability**

Accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant including self-regulation and other behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.

- **Altruism**

Altruism is the primary regard for or devotion to the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist's or physical therapist assistant's self-interest.

- **Collaboration**

Collaboration is working together with patients and clients, families, communities, and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner's respective role, to achieve optimal physical therapist services and outcomes for patients and clients.

- **Compassion and Caring**

Compassion is the desire to identify with or sense something of another's experience, a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.

- **Duty**

Duty is the commitment to meeting one's obligations to provide effective physical therapist services to patients and clients, to serve the profession, and to positively influence the health of society.

- **Excellence**

Excellence in the provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embrace advancement, and challenge mediocrity.

- **Inclusion**

Inclusion occurs when the physical therapist and physical therapist assistant create a welcoming and equitable environment for all. Physical therapists and physical therapist assistants are inclusive when they commit to providing a safe space, elevating diverse and minority voices, acknowledging personal biases that may impact patient care, and taking a position of anti-discrimination.

- **Integrity**

Integrity is steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions.

- **Social Responsibility**

Social responsibility is the promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.

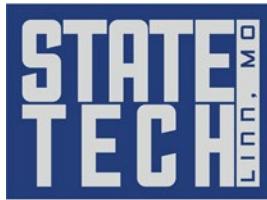
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P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure

**Last Updated:** 12/14/2021

**Contact:** governancehouse@apta.org



## **State Technical College of Missouri**

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### **Informed Consent Regarding Potential Risks during Clinical Practice**

As a student associated with the State Technical College Physical Therapist Assistant program, I, \_\_\_\_\_, understand that in the course of my clinical education I may be exposed to potential health risks including but not limited to exposure to bloodborne and airborne pathogens (e.g. TB, Hepatitis B, HIV, influenza, COVID), and other health risks which may include accidental injuries: sharps injuries, musculoskeletal injuries, and chemical exposures.

I understand and assume the risks involved in participating in clinical practice and agree to follow the policies and procedures of the clinical site regarding these potential health risks.

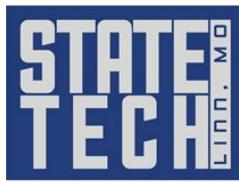
I am expected to demonstrate behaviors to reduce the risk of infection transmission and accidental injury by following infection control/standard precautions and all safety practices and guidelines of the clinical site.

I understand that clinical sites have the right to require me to complete additional infection control and safety training specific to the site prior to starting my clinical experience. (The Director of Clinical Education or the site will notify the student concerning the completion of additional training.)

It is my responsibility to notify my clinical instructor and the Director of Clinical Education concerning any serious injury or illness during clinical experiences involving health risks.

Signature \_\_\_\_\_

Date \_\_\_\_\_



# **State Technical College of Missouri**

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## **RELEASE OF INFORMATION TO CLINICAL SITES**

This form allows students to grant a clinical site access to their records maintained by the Physical Therapist Assistant Program of State Technical College of Missouri.

The purpose of this disclosure is to be in compliance with applicable federal, state and local governmental law and regulations relevant to the Joint Commission of Accreditation of Healthcare Organizations (JCAHO) standards. These standards require that facilities provide the same screening requirements for students of healthcare programs as apply to employed staff. These screenings must be performed prior to the student participating in patient care activities. Provided that the student remains continuously enrolled, the criminal background check will only be required once prior to the student beginning the initial clinical rotation.

The information required for compliance is:

1. Criminal Background Checks (Federal, National, State, County)
2. Social Security number verification/trace, OIG and ELD checks
3. Immunization/Health Exam information
4. CPR Certification
5. Drug Screen
6. COVID vaccine
7. Health insurance
8. Bloodborne and Airborne Pathogen training
9. HIPAA training

All permissions granted will stay in effect until the student has graduated or otherwise left the educational program.

I give permission to the Physical Therapist Assistant Program to supply information related to the above records to the clinical site selected for my clinical education by the Director of Clinical Education while enrolled in the Physical Therapist Assistant Program at State Technical College of Missouri. The required information will be supplied to the responsible office/party designated by the clinical site.

Signature \_\_\_\_\_

Date \_\_\_\_\_