

College of Health Sciences Department of Physical Therapy

STUDENT HANDBOOK 2016 – 2017

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INTRODUCTION

Purpose

This student handbook provides necessary information regarding policies, procedures and regulations for all students in the Department of Physical Therapy at Tennessee State University. The policies of the department supersede the policies of the graduate school or university. Students are accountable and responsible for all information contained in this student handbook.

In addition to the policies and procedures contained in this student handbook, students are responsible for the policies and procedures outlined in the *Tennessee State University Student Handbook*.

Accreditation

Tennessee State University is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the Associate, Bachelor's, Master's, Specialist in Education, and Doctoral degrees. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, Georgia 30033-4097 or call 404-679-4500 for questions about the accreditation of Tennessee State University.

The Doctor of Physical Therapy program at Tennessee State University 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; website: http://www.capteonline.org

Notice of Change

The Department of Physical Therapy reserves the right to make changes in the policies, procedures and regulations subsequent to the publication of this student handbook. Notice of any changes or revisions will be provided to the students in writing. Each student is responsible for attaching the addendum to his or her handbook.

DESCRIPTION OF PROGRAM

Philosophy

The DPT program at Tennessee State University recognizes the reciprocal and responsive nature of professional education, where both the student and the educator collaborate as partners in the learning process. Inherent in the relationship is the primacy of the student and the facilitative role of the educator as together they embark on a process of professional education.

Statement of Principles

Integral to the educational partnership is the recognition and acknowledgement of the roles, rights, and responsibilities unique to and common between the student and the educator. The student is expected to develop and exhibit characteristics of adult learners including, but not limited to, being problem-centered, willing to learn, and being self-directed. The student is also expected to be a change agent willing to challenge habituated thoughts and practices as physical therapy moves toward the doctoring profession. The educator is expected to uphold high academic standards, respect student diversity, be role models of professional behavior, and create an environment conducive for effective learning to occur.

Mission

The Mission of the Department of Physical Therapy is to graduate competent entry-level physical therapists who demonstrate cultural competence, apply research evidence to practice, uphold the code of ethics, value lifelong learning, and engage in professional/community service.

Goals and Outcomes

1. Program:

- a. To maintain accreditation as an educational program preparing physical therapists who embody the mission statement
- b. To promote diversity in the physical therapy profession by increasing the number of physical therapists from underrepresented populations
- c. To foster a community of scholar-practitioners between and among the academic faculty, clinical faculty, and students who serve the community

2. Faculty:

- a. To engage in a continual process of improvement in teaching
- b. To exercise professional and social responsibility by participating in institutional, professional, and community service
- c. To engage in scholarly endeavors that contribute to the body of knowledge of the profession

3. Students

- a. pass the National Physical Therapy Examination
- b. use the principles of evidence-based practice
- c. communicate and collaborate effectively and confidently in the health care community

- d. provide therapy to a diverse population with respect for patient differences
- e. practice in a safe, legal, and ethical manner
- f. practice autonomously within the scope of practice
- g. demonstrate competence as a generalist entry-level physical therapist
- h. make decisions related to patient care using reflective critical thinking
- i. serve as compassionate practitioners and patient advocates
- j. display leadership and professionalism
- k. engage in lifelong learning
- 1. provide community service

Summary of Student Goals and Outcomes

Goal 1: Graduates will possess entry-level competence to practice as physical therapists.

Outcomes: 3a, 3c, 3e, 3f, 3g

Goal 2: Graduates will demonstrate cultural competence.

Outcomes: 3c, 3d, 3e

Goal 3: Graduates will apply research evidence to practice.

Outcomes: 3b, 3h, 3k

Goal 4: Graduates will uphold the Code of Ethics.

Outcomes: 3e, 3f, 3i

Goal 5: Graduates will value lifelong learning.

Outcomes: 3h, 3k

Goal 6: Graduates will actively participate in professional/community service.

Outcomes: 3c, 3d, 3i, 3j, 3l

Curriculum Model

The curriculum is built around the Traditional Model, which begins with the basic sciences, followed by clinical courses, and culminating with clinical education experiences. The curriculum is outlined in Appendix A.

FACULTY

Ronald De Vera Barredo, PT, EdD, DPT, GCS, CCRP

Office Number 615-963-5932

Professor & Department Chair

Areas of Interest: Geriatrics, Cardiopulmonary, Educational Theory and Practice, Administration

Email: rbarredo@tnstate.edu

Derek Charles, PT, DPT, PhD(c), OCS, CMT

Office Number 615-963-5943

Assistant Professor

Areas of Interest: Orthopedics, Patient Care Principles, Therapeutic Exercise, Orthopedic Manual Therapy

Email: dcharles@tnstate.edu

Richard Clark, PT, DSc, SCS

Office Number 615-963-5944

Assistant Professor

Areas of Interest: orthopedics and sports physical therapy, management, professional issues

Email: rclark20@tnstate.edu

Karen Coker, PT, DPT, C/NDT, CWS, FACCWS

Office Number 615-963-2168

Assistant Professor

Areas of Interest: Adult Neuro, Pediatrics, Prosthetics/Orthotics, Acute Care, Integumentary

Email: kcoker@tnstate.edu

Deborah Edmondson, PT, EdD

Office Number 615-963-5945

Professor & Academic Coordinator of Clinical Education

Areas of Interest: Orthopedics, Industrial Rehabilitation, Clinical Education

Email: dedmondson@tnstate.edu

Kevin J. Lawrence, PT, DHS, OCS

Office Number 615-963-1388

Associate Professor

Areas of interest: Orthopedics, Biomechanics, Gross Anatomy, Manual Therapy, Hand Therapy

Email: kalwren2@tnstate.edu

David Lehman, PT, PhD

Office Number 615-963-5946

Associate Professor

Areas of interest: Neuroscience, Movement Science Neurologic Physical Therapy, Research, Parkinson Disease

Email: dlehman@tnstate.edu

Edilberto A. Raynes, MD, PhD

Office Number 615-963-2190

Associate Professor

Areas of Interest: Public Health, General Pediatrics, Anatomy, Physiology, Pathophysiology, Pharmacology

Email: eraynes@tnstate.edu

Office Staff

Brittany Price

Office Number 615-963-5881

Department Secretary

GENERAL INFORMATION

Department of Physical Therapy

 Telephone:
 615-963-5881

 Fax:
 615-963-5935

 Website:
 www.tnstate.edu/pt

The department telephone lines are reserved for business use only. Student use of department phones is discouraged except in the case of an emergency. Public telephones for students use are located in the library and the Student Center. Students are encouraged to use these pay phones or use their personal cell phones. Emergency calls and messages are relayed to students as quickly as possible.

Faculty should not be called at home, except in the case of an emergency or if directed to do so by the faculty member.

The department is aware that job recruiters are frequently overzealous in contacting physical therapists or physical therapy students. It is departmental policy not to release student names, telephone numbers, addresses, clinical affiliation assignments or other information. Students are expected to follow this policy in regard to releasing information about classmates. If you choose, you may release information about yourself to recruiters or prospective employers, but be prepared for numerous disruptions in your life when they contact you.

Class/Office Location

Physical therapy classes are held in the Frank G. Clement Hall. Clement Hall is located on Alameda Street, on the main campus of Tennessee State University.

The office of the Department of Physical Therapy is located on the third floor of the Clement Hall building, Room 366. Faculty and staff offices are also located on the third floor of the Clement Hall building. The room numbers and office extensions are listed below:

Ronald De Vera Barredo, PT, DPT, EdD, GCS, CCRP Room 368; Extension 5932 Derek Charles, PT, DPT, PhD(c), OCS, CMT Room 359; Extension 5943 Richard Clark, PT, DSc, SCS Room 365B; Extension 5944 Karen Coker, PT, DPT, C/NDT, CWS, FACCWS Room 355; Extension 2168 Deborah Edmondson, PT, EdD Room 361; Extension 5945 Kevin J. Lawrence, PT, DHS, OCS Room 365A; Extension 1388 Room 357; Extension 5946 David Lehman, PT, PhD Room 365; Extension 2190 Edilberto A. Raynes, MD, PhD

Advising of and Appointments with Faculty Members

Faculty office hours are posted on the faculty members' office doors. Students should schedule appointments with faculty members during these hours. Additional information regarding appointments with faculty members are also included in the course syllabi.

Each student is assigned a faculty advisor at the beginning of the semester of the first year. Faculty advisors are available to assist students with problems involving the academic process, adjustment to the classroom and campus,

etc. Appointments may be initiated either by the student or the faculty advisor. However, each student is strongly encouraged to schedule an appointment with the faculty advisor immediately after the release of mid-term grades each semester to discuss academic progress.

Departmental Communication To and Among Students

General information is posted on the bulletin boards located in the hallway adjacent to the Physical Therapy office on the third floor and across from the Common Room on the second floor, Room 255. Each student is also given a student mailbox for either individual or group communication specific to these individuals. Students may leave messages for each other in these mailboxes or by email.

Each class has a group email address that faculty use to communicate with students. Additional lines of communication include individual email and the use of designated class representatives.

Meetings between faculty and students may be scheduled to discuss departmental concerns or issues of mutual interest. Attendance to such meetings is required.

Changes in Contact Information

Students should report any changes in address and telephone number during their tenure in the program to the Department Secretary as soon as the changes are in effect. Students are required to review and update their contact information during their final week in the program prior to graduation. Following graduation, students are asked to maintain a current address and telephone number with the Department for future correspondence.

Attire During Didactic and Laboratory Sessions

Students should be appropriately dressed for the classroom and for the particular lab activity planned for the day. Long hair must be pinned back and jewelry removed (i.e. dangling earrings, sharp rings, long chains, multiple ballets). Caps are not allowed during class time.

Appropriate Lab Attire:

- 1. Loose shorts
- 2. Top of two-piece swimsuit (or halter top or sports bra) and a t-shirt for women, t-shirts for men
- 3. Low-heeled, close-toe shoes
- 4. Long hair tied back so that it does not interfere with lab activities
- 5. Fingernails must be clean and trimmed to conservative length.

Bare shoulders, midriffs and extremities are necessary for practicing many physical therapy procedures in the lab setting. Students practice these techniques on each other and with both male and female students in order to develop the skill level necessary for actual clinical practice. Additionally, as part of the instructional process, instructors of both genders may practice and demonstrate these techniques on any of the students. Students having objections to this should communicate with the instructor at the start of the semester.

Anatomy Lab Attire:

- 1. White lab coat and scrubs
- 2. Washable scrub suits with long slacks to protect skin; shorts are not permitted.

3. Closed toe shoes. No high heels (tennis shoes are fine).

Clinical Education Attire

1. Please refer to the "Dress Code" section of the *Clinical Education Manual* for the appropriate attire for clinical education experiences.

Safety and Security Services

The full scope of responsibilities of the TSU Police Department is described in the *Tennessee State University Police Department Campus Handbook*. The extension number for the TSU Police Department is 615-963-5171. Students are encouraged to report to the TSU Police Department any suspicious persons, potentially unsafe or hazardous conditions encountered in the building or on campus.

Students should closely guard all personal items of value. Tennessee State University and the Department of Physical Therapy accept no responsibility or liability for the loss or theft of personal items from these premises.

Individuals are discouraged from using these facilities during time periods when the building is sparsely occupied. The study areas should be used by groups of students.

The Department Secretary is the designated person in the program to be responsible for receiving and communicating university-wide information relative to campus emergencies. Additionally, students can avail of emergency alerts from Campus Police by signing up for text alerts at the following link: http://www.tnstate.edu/pr/notifications.aspx

Program Costs

In addition to tuition, room, and board, students can expect to incur costs for the following items:

- Transportation and uniform costs associated with clinical education
- Books and other supplemental readings and materials
- Dissection kit, gloves for anatomy lab
- Lab coat and scrubs for anatomy
- Liability Insurance
- Health Insurance (policy available through the University)
 - O Immunizations and tests: TB test, MMR, Hepatitis, varicella, and seasonal flu shots. Additional immunizations or titers may be required for specific clinical sites
- Nametag
- Lock for locker
- Deposit for access to the Vanderbilt Medical Libraries (allows a student to use books)
- APTA dues
- Criminal background checks
- Lab coat for clinical education experiences
- Goniometer, reflex hammer, stethoscope, sphygmomanometer, and gait belt
- Wrist watch with second hand or digital feature to read seconds
- Laptop

Note: Students need to consider buying the clinical items as a group so that they can get bulk discounts.

Expect to go beyond the Metropolitan Nashville area for at least two, possibly three clinical education experiences. Additional costs for housing and travel may be incurred during this and other clinical education experiences.

Graduate Assistantships and Scholarships

Traditionally, the program has two graduate assistantships, one for a first year student and another one for the second year student. Graduate assistantships begin in the $\underline{\text{fall}}$, not the summer. More information will be provided closer to the end of June or the beginning of July.

The program also offers the Rhonda Hodge Memorial Scholarship Fund. Information about this scholarship is in Appendix B.

Student Relationship with the American Physical Therapy Association

Students are strongly encouraged to join the American Physical Therapy Association (APTA). Members receive a monthly magazine, journal, and numerous other publications. In addition, students can receive discounts on items purchased from APTA, and discounts on car and life insurance, credit cards, etc.

In lieu of a textbook, students are required to be APTA members as a course requirement for the following courses:

- Year 1 (Summer): PHTH 5380 Introduction to Physical Therapy.
- Year 2 (Summer): PHTH 6390 Research II
- Year 3 (Fall): PHTH 7410 Clinical Integration and PHTH 7490 Research V

The Tennessee Physical Therapy Association (TPTA), a chapter of the APTA, holds a student election yearly to provide a student liaison to the TPTA Board of Directors. The elected student is responsible for communicating with the students at other schools in Tennessee.

The TPTA publishes a newsletter entitled the *Volunteer Voice*. Each issue includes an article on the current happenings among physical therapy education programs in the state, including DPT program at TSU. The article is written by a member of the graduating class.

Employment and Participation in TSU Extracurricular Activities

Students are free to engage in employment and extracurricular activities. However, students are responsible for the impact and consequences of these activities in their professional education. Toward this end, students are expected to attend all scheduled classes (including occasional evening sessions, any scheduled classes whose meeting times have been changed to accommodate adjunct faculty or guest lecturers) and other scheduled meetings and meet all program and course deadlines

Departmental Committees

<u>The Physical Therapy Admissions Committee</u>: Implements established policies and procedures in the selection of applicants for the incoming class. *Composition*: Members of this committee include academic faculty and/or clinical faculty. The committee is chaired by a physical therapist core faculty member.

The Physical Therapy Disciplinary Action Committee[§]: Upon referral from the Department Head, [1] reviews allegations of student misconduct, including but not limited to: unprofessional behavior; tardiness and excessive absences; misuse of equipment and supplies in the classroom or laboratory; and non-compliance with departmental policies and procedures; and [2] levies consequences appropriate for the action, including but not limited to: dismissal of the allegations; faculty counseling; inclusion of a permanent report in the student file; counseling by the Department Head and/or referral to other campus resources. *Composition*: Representative from the Dean's office (Assistant /Associate Dean); two full time faculty members from the program; one faculty from another program in the College of Health Sciences; and 1 or 2 third year students. The committee will be chaired by the Department Head.

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[§]Formerly the Physical Therapy Non-Academic Action Committee

ACADEMIC POLICIES

Essential Functions

In order to be successful in the program, students are expected to perform the following essential functions with or without reasonable accommodation:

- Critical thinking ability sufficient for clinical judgment;
- Interpersonal abilities sufficient to interact with individuals, families, and groups from a variety of social, emotional, cultural, and intellectual backgrounds;
- Coordination to move from room to room and maneuver in small spaces;
- Gross and fine motor abilities sufficient to provide safe and effective physical therapy care;
- Auditory abilities sufficient to monitor and assess health needs;
- Visual ability sufficient for observation and assessment necessary in physical therapy care;
- Tactile ability sufficient for physical assessment and treatment;
- Physical ability to assist moving, transferring and ambulating patients who have physical impairment or dysfunction.

If a student is unable to perform the aforementioned essential technical functions, they have the right to request reasonable accommodations in accordance with the University's disability policy as described in the *TSU Student Handbook*. Disability services may be found at: http://www.tnstate.edu/disabilityservices/

Grading Scale

93 to 100%	Excellent . Work of exceptional quality which indicates the highest level
	of attainment in a course
84 to 92%	Good. Work above average quality representing substantial fulfillment of
	the minimum essentials of a course
75 to 83%	Average. Work of average quality representing substantial fulfillment of
	the minimum essentials of a course.
< 75%	Failure. Representing unacceptable performance.
	Incomplete . Represents incomplete work of passing quality and is given
	when the student has missed an examination or some part of the required
	coursework.
	84 to 92% 75 to 83%

<u>Note</u>: Since the DPT program is a lockstep program, a student receiving a failing grade in any course will be suspended from the program, resulting in an inability to progress in the program. The student will have to appeal to be readmitted following suspension. Reapplication does not guarantee acceptance.

Retention Policy

Students are required to have a cumulative GPA of 3.0 or higher to graduate from the program. If a student's cumulative GPA falls below a 3.0 during his or her tenure in the program, the student will be placed on academic probation.

- 1. In order to remove the probationary status, the student must attain a GPA requirement of 3.0 or higher each subsequent semester until the cumulative GPA reaches 3.0 or better.
- 2. If a student's GPA falls below a 3.0 while the student is on probation, the student will be dismissed

Students who withdraw from the program will be allowed to reapply for admission to a subsequent class if they wish to continue to pursue physical therapy studies. Readmission is subject to the approval of the Graduate School and the Department of Physical Therapy.

In order to progress in the program, students are required to pass the OSCE (Objective Structured Clinical Evaluation) at the end of the spring semesters of their first and second years in the program. Successfully passing the OSCE is required for students to proceed with their summer clinical internships.

The *Code of Ethics* by the APTA has been adopted by the Tennessee Board of Physical Therapy Examiners as the standard to which all physical therapists are subject under Rule 1150-11-.14. Students in the physical therapy program are required to abide by the same standard. Students who violate the *Code of Ethics* (Appendix C) and its interpretive document, the *Guide to Professional Conduct*, will be referred to the Physical Therapy Disciplinary Action Committee for disciplinary sanctions.

The program also ascribes to the *APTA Position on Social Media*. Refer to Appendix D for appropriate guidance on professional expectations on the utilization of social media.

Timeliness of Assignments

Students are required to submit papers, projects and clinical education materials on time, unless the faculty member has approved an extension. The faculty member has the discretion to lower grades for papers, projects and other assignments turned in late, as detailed in the course syllabus.

Exam Administration

For all exams, bags and personal items should be placed in the back of the room. The only allowable item that the student can bring to the exam is a writing implement. Cell phones and other electronic devices should be placed in the back of the room; the instructor may allow other items on an as needed basis.

Return of Written Examination

Interim and final exams may be reviewed during a class session or a scheduled review session. Unless otherwise notified by the instructor, students must return all examinations to the instructor prior to leaving the class. Keeping, duplicating or recreating examinations constitutes academic dishonesty and will result in disciplinary action.

Class Attendance and Requirements

Class attendance and punctuality requirements are contracted between the faculty and the students, through specific expectations for attendance and punctuality and specific consequences that are outlined by individual faculty members in the printed syllabus for each course.

Students are expected to attend classes regularly and on time. Instructors will keep an accurate record of class attendance. "Excessive" absence is defined as no less than one more than the number of times a class meets per week. It is the student's responsibility to withdraw from a course in which excessive absences have been incurred. A student with excessive absences may only be readmitted to class by the instructor. A student who has not been readmitted to a class by the official withdrawal date, may not be readmitted to that class and will receive a mandatory grade of "F."

Students should expect in-class and out-of-class requirements during the conduct of the course. These may include exams scheduled outside regular class time and individual and group work whose deadlines may fall outside to the class schedule.

Major Illness, Surgery, Injury or Exceptional Situations

After any major illness, surgery, injury or exceptional situations, a student must submit a physician's statement which gives medical clearance for the student to perform the essential functions of a student in the program with or without reasonable accommodation.

A student who misses all required courses in the program for six consecutive days due to any major illness, surgery or exceptional situation is not allowed to progress in the program. The student will need to reapply to the program. Reapplication does not guarantee acceptance.

Student Responsibilities in Classrooms and Laboratories

Laboratory practice and experience of designated patient care situations are prerequisite to the performance of these techniques in actual clinical settings. Students are expected to participate in <u>all</u> lab sessions, including but are not limited to, assuming the role of patient, the therapist, family member, etc. Students are expected to observe standard precautions during simulated or actual patient care situations.

Appropriate lab attire for each session is described in this handbook and in the course syllabus. Students are expected to be dressed appropriately at the announced beginning time for each session.

Students are expected to exhibit responsibility in maintaining a clean and pleasant classroom atmosphere. Food or beverages are discouraged; however, exceptions may be allowed by the instructor. No food or beverages are permitted in the computer laboratories. Teams of students may be assigned laboratory, laundry, and classroom clean-up duties for one or more weeks throughout the year.

The plinths in the laboratories are for student use during laboratory practice/demonstration sessions. They are not intended to be replacements for desks or extensions of students' lockers. Extra books, clothing, lunches, etc., should be stored elsewhere, not on the plinths. When using the plinths for laboratory practice, care should be taken to prevent sharp objects or pieces of equipment, etc., from tearing holes in the top covering of the plinth. Shoes are not permitted on the furniture, plinths or exercise mats. Laboratory equipment and supplies are not available for checkout by students outside the laboratory. "Open labs" can be arranged with a faculty member for students who wish additional lab practice. A faculty member needs to be present and available during open labs.

Hand washing and/or use of sanitizer is required for all patient or simulated patient encounters. Plinths and laboratory equipment need to be wiped down and disinfected after every lab session that requires their use. This responsibility is to be determined by the course instructor.

Exercise equipment in the laboratories is reserved for classroom use and is not available for recreational exercise or the treatment of students. The hot and cold pack equipment are not used to warm up or cool down food items. The washing machine and dryer are for laboratory use only, and is never used for personal items. Towels and linens are for laboratory use and should be given the same care and regard as other laboratory equipment. They should not be used to wipe spills from the floor. In the case of spills, use a rag or ask the custodial staff for assistance.

Responsibility for the inventory and care of laboratory equipment and supplies is shared among students and faculty. Classrooms and laboratories should be readied for subsequent classes, prior to the departure of students.

Except by approval of the course instructor, observers and guests are not permitted in classrooms and laboratories. Also, some courses are hybrid courses using the Desire2Learn (D2L) learning platform.

Individual and group study areas are provided in the Common Room on the 2nd floor of Clement Hall, the Floyd-Payne Student Center, and the Library.

Laboratory Check-offs and Laboratory Examinations

Each laboratory check-off or examination utilizes a rubric outlining performance expectations and grading guidelines. The rubric is made available to students prior to the examination. Faculty members keep these rubrics until the end of the course.

It is the policy of the Department of Physical Therapy that any student who fails a portion of a laboratory examination on the grounds of safety will receive an "F" for the entire examination. Students who receive a grade less than "C" on a laboratory examination for any other reason may retake that exam to bring the grade up to a "C." A student may not receive a grade higher than a "C" for a laboratory examination which is being retaken because of a failure on the first attempt. The retake must be scheduled prior to the next regularly scheduled laboratory examination. Only one retake is allowed per failed laboratory examination.

Risk Management

During their tenure in the program, students are at risk for occupational injury from working with, lifting and moving patients and equipment. These include, but are not limited to, the following: low back and neck pain, sprain, strain, fall related injuries, etc. Good body mechanics and a solid foundation on the safe and appropriate application and use of equipment and other treatment interventions can minimize these risks. The Department has a *Waiver*, *Release*, and *Authorization Form* (Appendix E) for use by students and/or faculty when engaging in physical therapy related procedures and activities.

Students may also be exposed to supplies that may be hazardous to health, such as gels, lotions, sprays, and pads. Material safety data sheets (MSDS) for these and other supplies used by the program are found in the secretary's office.

Students should expect to work with persons with infectious diseases (including but not limited to hepatitis B and HIV). Students are expected to observe standard precautions during simulated or actual patient care situations to minimize the risk of infection or transmission. Student health service is available on campus at the following location:

Tennessee State University Health Services Kean Hall Room 304 3rd Floor Main Campus Phone: (615) 963-5291

Fax: (615) 963-5084

Website: http://www.tnstate.edu/campus_life/healthservices.aspx

Academic Misconduct

Prior to enrollment in the first professional year's course of study, students are required to read the *Physical Therapy Student Handbook* and sign a declaration acknowledging their agreement to abide by the rules and regulations of the program.

Violations of academic rules and regulations are automatically referred by the faculty member who observed the infraction to the Department Head. The Department Head is responsible for the initial investigation of the infraction, utilizing information supplied by the faculty member and the student(s) involved. If the severity of the infraction is such that dismissal from the program is a consideration, the Department Head will refer the matter to the Physical Therapy Disciplinary Action Committee. The committee reviews the case and makes the final decision regarding the appropriate sanction for the offense.

The decision of the committee may be appealed by the student(s), according to the procedures outlined in the *Tennessee State University Student Handbook*. Examples of academic misconduct include, but are not limited to, the following:

- 1. Cheating on any oral, written or practical examination given as part of any course;
- 2. Knowingly allowing another student (or students) unauthorized access to any written, oral or practical examination in any course;
- 3. Plagiarism on any written work assigned in the classroom, laboratory, or clinic.
- 4. Lack of professionalism (when outlined in the syllabus as a course expectation subject to evaluation from the course instructor), including:
 - Excessive tardiness and absences;
 - Disruptive behavior (i.e., angry, hostile, or obnoxious behavior; personal use of electronic devices not related to class; sleeping in class; or any behavior unbecoming of a professional;
 - Misuse (which may or may not involve negligence on the part of the student) of facilities, equipment, supplies or teaching/learning materials;
 - Disregard for the safety of self and others.
- 5. A positive drug screen while at affiliated clinical sites. (Students must comply with Principle 4c. of the APTA Code of Ethics)

Penalties for Academic Misconduct

If the Physical Therapy Disciplinary Action Committee determines that academic misconduct has occurred, the committee shall issue a written decision to the student and the Department Head. A copy of the decision is included in the student's file. On the other hand, if the committee determines that no infraction has occurred, then no written document shall be placed in the student's file.

Cheating and plagiarism warrant a penalty of no less than a written warning placed in the student's file on the first offense and an automatic zero for the work. Beyond the first offense, cheating and plagiarism warrant dismissal from the program.

A positive drug screen warrants discontinuance of the clinical education experience and may result in the student's dismissal from the Physical Therapy Program.

Appeals and Complaints

Academic decisions may be appealed in the following order:

- 1. Written appeal to the faculty member
- 2. Written appeal to the Department Head

- 3. Written appeal to the Physical Therapy Disciplinary Action Committee
- 4. Written appeal to the Dean of the College of Health Sciences

The particulars of the appeal process, including appeals beyond the level of the Dean of the College of Health Sciences are detailed in the *Tennessee State University Student Handbook*.

Complaints that fall outside the realm of due process (i.e., from clinical sites, employers, and the public) should be reported to the Department Head

Comprehensive Examination

Students are required to take a comprehensive examination during their final year in the program. The comprehensive exam covers materials from previous and current semesters.

The comprehensive exam is given during the fall semester of the student's final year in the program, and is included in the calculation of the course grade for PHTH 7410 Clinical Integration Seminar. The comprehensive exam is worth 40% of the course grade.

Progression to Clinical Education

In order to ensure safety and competence, the program faculty reviews the performance of each student prior to allowing that student to progress to clinical education experiences. Materials used for assessment of student performance include the academic record, input from prior clinical instructors, faculty evaluation of the student's academic performance during the previous and current semesters, and student performance in the OSCE and check-offs.

Prior to clinical education in the summer, the program shall be conducting an objective structured clinical examination.

Year 1 Students

Objective Structured Clinical Examination (OSCE)

- Conducted during the finals week at the end of the spring semester
- Tied to the course grades of the following courses: [1] Physical Agents, [2] Therapeutic Exercise, and
 [3] Differential Diagnosis
- Comprised of case-based stations that assess various aspects of clinical skills
 - O Station Tied to Physical Agents: physical agents
 - O Stations Tied to Therapeutic Exercise: [1] bed mobility & transfers, [2] ROM & MMT, [3] assistive device, [4] therapeutic exercise, and [5] documentation
 - Station Tied to Differential Diagnosis: vital signs & pharmacology
- For OSCE specific questions: ask the instructors of Physical Agents, Differential Diagnosis and/or Therapeutic Exercises

Year 2 Students

Objective Structured Clinical Examination (OSCE)

- Conducted during the period between midterms and finals during the spring semester
- Pass/Fail exam tied to progression to Clinical Education II
- Comprised of complex cases that include neurologic, cardiopulmonary, pediatric, geriatric, integumentary and orthopedic co-morbidities
 - Problem solving and critical thinking in the context of physical therapy patient/client management are evaluated during the exam

In no case shall a student who is determined by the program faculty to be incompetent or unsafe be allowed to go on clinical affiliation or graduate from the program. Students deemed not ready for clinical education are informed in writing of this decision, along with steps that need to be taken toward remediation.

Assessment of Competence

Use of Clinical Instructor and Student Feedback

PHTH 6360 Clinical Education I and PHTH 7350 Clinical Education II – the ACCE monitors feedback from clinical instructors about strengths and weaknesses of students and shares this information with the faculty. Feedback from students is also reported to the faculty. This information is used to revise the curriculum as necessary.

Assessment of Entry-Level Competence

In order to identify areas of weakness and ensure that a remediation plan is in place prior to and after graduation, students are required to take the Practice Exam Assessment Tool (PEAT) of the Federation of State Boards of Physical Therapy twice during their final semester in the program. As part of the course requirements for PHTH 7480 Professional Issues, students will be:

PEAT and Re-PEAT

- 1. Taking the twice PEAT during their final semester in the program.
- 2. Bringing to the course instructor the analyses of performance
- 3. Developing a remediation plan for identified areas of weakness, which will be implemented during their clinical education experiences

NPTE Review Course

1. After taking the NPTE review course, developing a study and review plan to be implemented prior to taking the licensing exam.

CLINICAL EDUCATION POLICIES

Definitions

- <u>Clinical Education</u> the portion of a physical therapy education program during which the student has the
 opportunity to apply didactic information in a clinical setting and to develop clinical skills under the supervision
 of a Clinical Instructor.
- <u>Academic Coordinator of Clinical Education (ACCE)</u> the faculty member in the Physical Therapy Department
 who is responsible for developing, coordinating, and implementing the clinical education portion of the
 professional curriculum. The Assistant ACCE (AACCE) assists the ACCE with clinical coordination.
- <u>Center Coordinator of Clinical Education (CCCE)</u> the clinical education facility staff member who is responsible for coordinating clinical education with the ACCE.
- <u>Clinical Instructor</u> the physical therapist that is responsible for direct instruction and supervision of the student during the clinical education experiences.
- <u>Physical Therapist Clinical Performance Instrument Web (PT CPI Web)</u> the competency-based evaluation tool
 that will be used for all clinical education experiences.

Clinical Assignments

- 1. The ACCE/AACCE is responsible for assigning students to a facility for each clinical education experience.
- 2. Students are not ordinarily assigned to facilities in which they have worked or volunteered or with which they have contractual arrangements for financing or employment.
- 3. There are five clinical education experiences. Students must attend clinical education experiences that are representative of the continuum of care between healthcare settings. During the last four clinical education experiences the following are required:
 - an acute care facility (pediatric or adult)*
 - a skilled nursing facility or a rehabilitation hospital (in or outpatient)
 - an outpatient orthopedic clinic (can be hospital-based)
 - a specialty or your choice of a clinical setting, i.e. pediatrics, home health, sports, women's health, industrial, etc. Variety in clinical affiliation choices is expected.

Note: Because of a critical shortage of acute care settings nationally and internationally, a skilled nursing facility or a subacute experience may be substituted for the acute or rehabilitation hospital requirement, but not both. In addition, if a student attends a small rural hospital where he/she attains a combined clinical experience including acute care, outpatient and/or rehabilitation, etc. during any of the five clinical education experiences, this will be counted as meeting the acute care facility requirement. The following are examples of meeting the continuum of care requirement for clinical education:

Example A

- Acute care facility (pediatric or adult)
- Skilled nursing facility or a rehabilitation hospital (in or outpatient)

- Outpatient orthopedics
- Specialty or choice

Example B

- Skilled nursing facility
- Rehabilitation Hospital (in or outpatient)
- Outpatient orthopedics
- Specialty or choice

Example C

- Combination experience at a small rural hospital (attendance for 1st clinical experience will meet the requirement)
- Skilled nursing facility or rehabilitation hospital (in or outpatient)
- Outpatient orthopedics
- Specialty or choice
- 4. There are a limited number of clinical sites in Middle Tennessee and nationally; therefore, students must be flexible and, if necessary, go outside of the Middle Tennessee area (more than one hour driving distance from the campus) or outside of the state of Tennessee for clinical education experiences. This may entail driving over a one hour driving distance from the TSU campus for some clinical education experiences or finding housing as needed. Clinical sites are available in all 50 states. Students in preceding classes will be given preference in assigning clinical education slots.
- 5. In order to avoid conflict of interest and assure students receive a variety of clinical education experiences, students **will not** be assigned to facilities or clinical instructors with whom they have volunteered for over 30 hours or with which they have worked in any capacity or with which they have contractual arrangements for financing of school fees or tuition or present and/or future employment arrangements.

If the facility has multiple locations the student can be assigned to a facility but the following restrictions will apply:

- The student will not be assigned to a clinical instructor with whom they have volunteered for over 30 hours or with whom they have worked in any capacity.
- The student will not be assigned to the facility if they have a contractual arrangement for financing of school fees or tuition or present and/or future employment arrangements with the facility in any capacity.

If the facility is a large hospital/institution, the student can be assigned to the facility, but all the following restrictions will apply:

- The student will not be assigned to a clinical instructor with whom they have worked in any capacity or volunteered for more than 30 hours.
- The student will not be assigned to the facility if they have a contractual arrangement for financing of school fees or tuition or present and /or future employment in any capacity.
- The student will not be assigned to the same department/area where they have worked in any capacity or volunteered for more than 30 hours.
- 6. A list of clinical education facilities will be sent to the students yearly. The list will be periodically updated and sent to the students prior to making placements for each clinical education experience. From the list of available

sites, a drawing will be held during a class session. Drawings will first be held for the available Nashville sites, followed by available Middle Tennessee sites, followed by all other available sites. For sites not listed as available, students will work with the ACCE/AACCE to find a suitable placement. No guarantees can be made for specific locations or types of facilities. **Note**: Past students' comments on clinical facilities are located in binders on the shelves of Room 252

Clinical Education Stipulations

Clinical Education is an integral component of the Doctor of Physical Therapy curriculum at Tennessee State University and a necessary requirement for graduation. Students must complete a minimum of 36 weeks or 1440 hours of clinical education to meet the requirements of graduation. There are a limited number of clinical education sites in Middle Tennessee, and most clinical education sites do not provide housing or any financial assistance for a student completing clinical education at their facilities.

- Clinical sites in Nashville/Middle Tennessee take PT students from across the U.S. Most clinical sites will accept only one student at a time. Therefore, students will most likely have to go outside of Nashville/Middle Tennessee for some or all of their clinical education experiences. The ACCE/ AACCE will assist students in this process but cannot guarantee that students will be able to stay in the Nashville/Middle Tennessee area for any clinical education experience.
- The initial placement at a clinical site is no guarantee that the clinical facility will hold the clinical slot for the student. The facility may cancel the reservation at any point. In case of a cancellation, the ACCE and/or AACCE will locate a substitute placement. A substitute placement may require additional travel and expenses that was not anticipated.
- The student should work closely with and cooperate with the ACCE and/or AACCE in arranging clinical education placements.
- The student may not contact the clinical education sites or the CI and/or CCCEs without the permission of the ACCE.

Students are required to complete the Clinical Education Stipulations form in Appendix F.

Grading

In order to receive a passing grade for each Clinical Education Experience, the student must not have any **Significant Concerns** box checked at the end of the clinical experience and have, at a minimum, all the performance indicators rated by the CI(s) using the *Physical Therapy Clinical Performance Instrument Web* (PT CPI Web) at:

- Beginner to Advanced Beginner for Clinical Education I
- Advanced Beginner to Intermediate for Clinical Education II
- Intermediate to Advanced Intermediate for Clinical Education III
- Advanced Intermediate to Entry-Level for Clinical Education IV
- Entry-Level or Beyond Entry-Level for Clinical Education V

In areas where the student's final performance indicator ratings are not at the minimally required level, the ACCE will determine the student's final grade by consulting with the CI(s) and/or referring to the CI(s)' written/verbal

comments or recommendations. If the student has any Significant Concerns boxes checked at the end of the clinical education experience, and/or if the student is not passing the clinical experience, the student will be given a grade of Unsatisfactory (U) or Incomplete (I) as determined by the ACCE in consultation with the CI(s)." Because the program is lockstep, a grade of Unsatisfactory may necessitate suspension from the program. If the student is passing the clinical experience but has minor performance deficiencies, the student may be given a grade of Incomplete (I) and the clinical experience will be extended for no longer than one week. If the student does not attain a grade of Satisfactory by the end of the extended week, the student will receive a grade of Unsatisfactory for the course. Because the program is lockstep, a grade of Unsatisfactory (U) may necessitate suspension from the program.

Policy on Withdrawal from Clinical Education Experiences

A student who withdraws from any clinical education course will not be able to progress in the program. If the student withdraws from a clinical education course and his or her performance is deemed passing at the time of the withdrawal, the student may, with the permission of the instructor, re-register for the course the next time it is offered.

If the student withdraws from the clinical education course and his or her performance is deemed not passing at the time of the withdrawal, the student must undergo remediation to address any weaknesses identified during the clinical education experience being withdrawn from. Upon successful remediation and with permission of the instructor, the student may then repeat the course the next time it is offered.

Student Responsibilities

<u>Before Clinical Education Experiences</u> – Students are required to:

- 1. Obtain professional liability insurance prior to the first Clinical Education experience and to carry it through the remainder of the program. The policy that students are required to have is on an occurrence basis and is for a minimum of \$1,000,000 per incident and \$3,000,000 per year. Details are available through the ACCE/AACCE office.
- 2. Comply with drug screening if required by the clinical site.
- 3. Provide written results of Measles, Mumps, and Rubella (MMR) immunity titer or vaccine, Hepatitis-B vaccine, and yearly TB test. Some clinical sites require a varicella titer and bi-annual TB test and recommend a tetanus shot.
- 4. Obtain a seasonal flu shot during the fall of each year Students are required to receive a seasonal flu shot vaccination between the months of October and March. This must be documented and placed in the immunization tracker. As an alternative, students may sign a waiver of refusal for the seasonal flu shot and must agree to wear a mask while treating patients during the clinical education experience. In addition, if a fitted mask is required to treat patients in high risk or other related areas of the clinical setting, the student must agree to be fitted for the mask, wear the mask as dictated, and pay all associated costs for the fitted mask. The clinical sites also have the right to refuse admittance for students who refuse the seasonal flu shot.
- 5. Complete a Student Information Form for each clinical education experience.
- 6. Obtain and maintain health insurance coverage throughout each clinical education experience.
- 7. Provide proof of current Basic Life Support certification at the Health Care Provider level prior to the first

clinical and maintain throughout the program.

- 8. Make arrangements for room, board, and transportation for out-of-town clinical education experiences. Most facilities **do not** provide assistance in making these arrangements.
- 9. Complete a criminal background check.
- 10. Provide results of the criminal background check to the clinical site, if requested.
- 11. Consent to a drug screen and provide results of the drug screen to the clinical site, if requested.
- 12. Purchase a subscription to Certified Background's Immunization Tracker to store and maintain all immunization records, required documents, and certifications electronically. The cost of the yearly subscription is approximately \$35.00. Additional information can be found at http://www.certifiedbackground.com or 888-666-7788 or from the ACCE.

<u>During Clinical Education Experiences</u> – Students are required to:

- 1. Follow the policies and procedures of the clinical facility including work hours, clinic procedures/protocols/practices, dress code, confidentiality, patient rights, and observance of holidays.
- 2. Work with a variety of patients including, but not limited to: gender, cultures/ethnicities, ages, etc.
- 3. Present an in-service to the facility staff during one of the last three clinical education experiences and provide an outline of the in-service to the ACCE/AACCE
- 4. Actively cooperate with the clinical instructor in planning the clinical education experience.
- 5. Complete a self-evaluation at the midpoint and end of the clinical experience using the PT CPI Web
- 6. Complete the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction Form* at the midpoint and end of the clinical experience and share the comments with the CI.

<u>After the Clinical Education Experience</u> – Students must turn in the *Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction Form* and any other written assignments to the ACCE/AACCE within specified time period.

At the end of the final clinical education experience, the student is required to evaluate the effectiveness of ACCE in fulfilling her responsibilities. The evaluation forms are provided during the exit interviews.

Responsibilities of the CCCE and CI

- 1. Notify the ACCE of probable availability or commitment to clinical education dates and of changes in terms of affiliation (such as immunizations required, etc.)
- 2. Update affiliation contracts and forms needed for accreditation when requested.
- 3. Contact ACCE/AACCE immediately if problems occur with a student during a clinical education experience.

- 4. Provide for the affiliating student:
 - orientation to facility
 - appropriate level of clinical experiences
 - instruction and supervision
 - feedback regarding performance
 - completed evaluation using the Clinical Performance Instrument
- 5. Assure that the supervising clinical instructor has a minimal of one year of clinical experience.

Responsibilities of the ACCE/AACCE

- 1. Establish and maintain contractual agreements between the University and the clinical education facilities.
- 2. Notify the CCCE in writing of clinical education dates during the calendar year prior to their occurrence.
- 3. Provide the CCCE and/or CI the clinical instructor manual, information on the student, and the clinical affiliation goals and objectives to the clinical site.
- 4. Monitor the student's progress electronically using the PT CPI Web. The ACCE/AACCE or faculty member will contact the student in person or by phone only as necessary to resolve problems, or monitor the student's progress. When problems arise during the clinical education experience, the ACCE/AACCE will make every reasonable effort to visit the student and the CCCE/CI.

Attendance

- 1. Any absence during any clinical education experience must be reported to the student's CI, CCCE, and ACCE/AACCE as soon as possible.
- Students are required to make up all unexcused absences that occur during Clinical Education. The
 ACCE/AACCE and the CCCE/CI must approve all arrangements prior to making up the absences. Students
 are allowed no more than one excused absence during each clinical education experience with approval of
 the CI.
- 3. Students will not receive a fall or spring break when engaged in clinical education. However, students do not have to attend clinical education on the Friday after Thanksgiving Day.

Conduct

- 1. Students are expected at all times to exhibit professional behavior as outlined in the APTA document *Professionalism in Physical Therapy* (Appendix G).
- 2. Students are expected to abide by the APTA Code of Ethics (Appendix C), and the Tennessee Practice Act for Physical Therapists.
- 3. Students are expected to treat patients and other health care practitioners with respect.
- 4. Students are expected to maintain patient confidentiality.

Dress Code

Students are expected to maintain a professional appearance at all times. Dress codes vary considerably from one clinical education facility to another. The clinical site and the CCCE will determine appropriate student attire.

If the clinical facility does not have a dress code, the basic requirements of appropriate dress include appearance, safety, and allowance for movement. The attire accepted by the Department of Physical Therapy for clinical education is:

- 1. Dress slacks conservative in color and style, and not tight-fitting.
- 2. White lab jacket of fingertip length (no long, below-knee lab coats.) Sleeves must be loose enough to adjust to elbow length.
- 3. Dress blouse or shirt that is conservative and non-revealing, and not tight-fitting
- 4. Name tag worn at all times.
- 5. Watch with capability to count seconds (sweep hand or digital). No dangling watch guard permitted.
- 6. Jeans or denim pants in any color and sweat pants are not acceptable.
- 7. Shoes must be polished and clean. Shoes must have low heels, non-skid soles, and closed toe and heel. Sandals, clogs, and open weave shoes are not acceptable. Athletic/tennis shoes are permitted only in the specific facilities which allow them. Socks or hose must be worn at all times.
- 8. Underwear and tattoos must not be visible through clothing or otherwise.
- 9. Neckties for men are optional but may be required by the clinical facility.
- Hair must be clean and neat. Long hair must be tied back so that it does not interfere with patient care.
 Mustaches and beards must be neatly trimmed.
- 11. Jewelry must be conservative and must not interfere with patient care. Professional association insignia, school pin, and ACLS/BCLS/Red Cross pins are acceptable. Religious emblems, political symbols, union emblems, or other insignia are not acceptable.
- 12. Fingernails must be clean and trimmed to conservative length.
- 13. Tattoos and body and/or facial piercing other than earrings should not be visible.

Health Insurance Portability and Accountability Act (HIPAA)

Students will adhere to the confidentiality requirements of the HIPAA of 1996 and its regulations and the policies and procedures of each clinical facility. Students are required to complete the *Confidentiality Form* in Appendix H.

Criminal Background Checks/Drug Screens

Criminal background checks and/or drug screens may be requirements at some affiliated clinical sites for training in the Physical Therapy professional curriculum. Based on the results of these checks/screens, an affiliated clinical site

may not allow you to participate in clinical education activities at their facility which could result in your inability to successfully complete the requirements of the Physical Therapy program. A positive drug screen may result in dismissal from the Physical Therapy program.

Additionally, a criminal background or positive drug screen may preclude licensure or employment. If criminal background checks or drug screens are required, the student is required to cooperate fully with the process and pay all costs associated with such checks/screens, as requested. The student will not hold Tennessee State University or the Department of Physical Therapy liable if the results of a criminal background check or a drug screen indicate that you are unable to complete the requirements of the Physical Therapy program or if such results preclude you from obtaining licensure or employment.

More Information on Criminal Background Checks

- A. Purpose: The purpose of the criminal background check is to comply with the stated requirements of the clinical education sites with which the University has entered into a legal agreement.
- B. Applicability to Students in the professional DPT Program: All students enrolled in the professional DPT program at Tennessee State University are required to complete a criminal background check. Students who refuse to comply with the background check will be unable to fulfill the requirements of the professional DPT program related to clinical education and will not earn the DPT degree. Students are required to notify the ACCE of any convictions, arrests, detentions, charges, or investigations by any law enforcement authority that may occur after the criminal background check has been completed.
- C. Type of Check Required Hospital Corporation of America (HCA) facilities have more stringent standards/criteria for participation in clinical education at their facilities. Therefore, the Tennessee Board of Regents (TBR) attorney advises that you request your background check be run to conform to the HCA requirements. Otherwise, you may find yourself in a situation where a previously run background check, accepted at another facility will not suffice for HCA purposes.

HCA's background check standards as listed in their agreement include the following:

- (i) Social Security Number Verification
- (ii) Criminal Search (7 years or up to 5 criminal searches);
- (iii) Employment Verification to include reason for separation and eligibility for re-employment for each employment;
- (iv) Violent Sexual Offender and Predator Registry search;
- (v) HHS/OIG List of Excluded Individuals/Entities;
- (vi) GSA List of Parties Excluded from Federal Programs;
- (vii) U.S. Treasury, Office of Foreign Assets Control (OFAC), List of Specially Designated Nationals (SDN);
- (viii) Applicable State Exclusion List, if one.
- D. The following is a list of vendor resources and is offered as a courtesy. Tennessee Higher Education Association (THA) makes no representations as to the fitness of any vendor to provide the background check that you need.

The list is non-exclusive and does not preclude your responsibility to assure that your chosen vendor is capable to perform the background check that is required.

<u>Verified Credentials</u> * THA Preferred Vendor

Mary Jo Dreher, Sales Executive 901-248-7855/Office 952-985-2381 281-744-8238/Cell mjdreher@v-c-i.com

Link to student website: www.tha.com

PreCheck, Inc.

Stephanie Nolen, LPI
Sales Manager
PreCheck Inc.
1-888-372-5874
stephanienolen@precheck.com
www.precheck.com

Kroll Background Screening

Brian Lapidus 615-345-9874 Blapidus@krollworldwide.com

Certified Backgrounds

www.certifiedbackground.com 888-666-7788

Inquiries, Inc

Jennifer Craig
Director, Business Development
P.O. Box 67, Easton, MD
jcraig@inquiriesinc.com
www.inquiries.com
Phone:866-087-3767

MyBackgroundCheck.com

Contact: Deana Ext. 167 deana@mybackgroundcheck.com www.mybackgroundcheck.com

- E. Timeline for Compliance: The deadline for completing the background check is April 30 of the following year that the student is admitted into the professional DPT program. Criminal background checks are not infallible; therefore it is recommended that the student complete the background check sooner to address any potential vendor reporting errors.
- F. Frequency of Check: The background check is required only once while enrolled in the professional DPT program. Some clinical education sites will perform a criminal background check on the student at their own expense. This does not preclude the requirement of the student to undergo his/her own criminal background check. In most cases, if the clinical site performs a criminal background check on a student, the results of the background check remains the property of the clinical site and is not released to the student to use to meet a subsequent clinical site's background check requirement.

Graduation from the professional DPT program does not guarantee you will be able to obtain a physical therapist license upon graduation. Many state licensure boards of physical therapy including Tennessee require an additional criminal background check as part of the licensure application process. This background check may uncover new/additional information not revealed in previous checks which could preclude eligibility for licensure.

- G. Review Criteria: The student will send their criminal background check to the clinical education site, as requested. Each clinical education site will determine whether a student may participate in a clinical affiliation at the site based on the results of the check.
- H. Student's Rights: Students should carefully review the criminal background check report for accuracy. Students have a right to appeal the background check results by contacting the vendor who performed the background check.

- I. Access to/Confidentiality of Results: The student's criminal background check will be stored electronically in the student's Immunization Tracker which is accessible by the student, the ACCE, and the authorized person at the student's assigned clinical facilities. Other persons may have access to the background check on a need to know basis only i.e. Physical Therapy Department Head, AACCE, College of Health Sciences Dean, Campus Security Director, or Vice-President of Academic Affairs/Provost in compliance with the Family Educational Rights and Privacy Act (FERPA). Reports with criminal offenses will be held in the strictest confidence.
- J. Payment process: Students are expected to cooperate fully with the criminal background check process and pay all costs associated as requested. Students are also required to store the background check as well as all other required documents related to clinical education in Certified Backgrounds' Immunization Tracker. Students will be responsible for keeping their tracker up to date. No paper documents will be accepted by the ACCE. Certified Background's Immunization Tracker is approximately \$35.00. The ACCE will provide students with directions for setting up and storing their documents in the tracker. After graduation or severance from the professional DPT program, students will continue to have indefinite access to their tracker.

Students are required to complete the Criminal Background Check/Drug Screen Signature Form in Appendix I.

LIST OF APPENDICES

Appendix A Curriculum

Appendix B Rhonda Hodge Memorial Scholarship Fund

Appendix C Code of Ethics

Appendix D APTA Position on Social Media

Appendix E Waiver, Release and Authorization Form

Appendix F Clinical Education Stipulations

Appendix G Professionalism in Physical Therapy

Appendix H Confidentiality Form

Appendix I Criminal Background Check/Drug Screen Signature Form

Acknowledgement

APPENDIX A

TENNESSEE STATE UNIVERSITY Department of Physical Therapy Professional Curriculum

YEAR I

Summer Session - 9 credits

- PHTH 5360 Gross Anatomy (6)
- PHTH 5380 Introduction to Physical Therapy (1)
- PHTH 5330 Psychosocial Behavioral Issues (2)

Fall Semester - 15 credits

- PHTH 5421 Tests and Measurements (2)
- PHTH 5470 Applied Physiology (3)
- PHTH 5460 Biomechanics and Movement Science (5)
- PHTH 5440 Human Development Across the Life Span (2)
- PHTH 5450 Patient Care Principles (2)
- PHTH 5590 Research I (1)

Spring Semester - 15 credits

- PHTH 5490 Pathology (3)
- PHTH 5540 Clinical Medicine I (3)
- PHTH 5550 Therapeutic Exercise (3)
- PHTH 5570 Neuroscience/Neuropathology (3)
- PHTH 5580 Physical Agents (3)

YEAR II

Summer Semester - 9 credits

- PHTH 6340 Electrotherapeutics (2)
- PHTH 6350 Clinical Medicine II (3)
- PHTH 6360 Clinical Education I (Maymester) (3)
- PHTH 6390 Research II (1)

Fall Semester - 15 credits

- PHTH 6420 Principles of Education (2)
- PHTH 6440 Cardiopulmonary (3)
- PHTH 6460 Orthopedics I (4)
- PHTH 6470 Neurological PT I (4)
- PHTH 6490 Research III (2)

Spring Semester - 15 credits

- PHTH 6550 Cardiopulmonary II (1)
- PHTH 6540 Prosthetics and Orthotics (3)
- PHTH 6560 Orthopedics II (4)
- PHTH 6510 Neurological PT II (2)
- PHTH 6580 Pediatrics (3)
- PHTH 6590 Research IV (2)

YEAR III

Summer Semester - 9 credits

PHTH 7320 Administration & Management (2)

PHTH 7350 Clinical Education II (4)

PHTH 7360 Advanced Clinical Topics I (2)

PHTH 7370 Ethical Behavior and Moral Reasoning (1)

Fall Semester - 14 credits

PHTH 7410 Clinical Integration Seminar (2)

PHTH 7420 Seminar in Geriatrics (1)

PHTH 7430 Special Topics in Physical Therapy (1)

PHTH 7454 Clinical Education III (6)

PHTH 7460 Advanced Clinical Topics II (2)

PHTH 7480 Health and Wellness (1)

PHTH 7490 Research V (1)

Spring Semester - 13 credits

PHTH 7554 Clinical Education IV (5)

PHTH 7564 Clinical Education V (5)

PHTH 7570 DPT Clinical Case Conference (2)

PHTH 7580 DPT Professional Issues (1)

APPENDIX B

RHONDA HODGE MEMORIAL SCHOLARSHIP FUND AWARDS

The Rhonda Hodge Memorial Scholarship Fund (RHMSF) has been established for students in the professional portion of the Physical Therapy Program. Funds are limited and students must complete an application process to receive these monies. Funds are awarded once a year via the University's Foundation Office. Interested students must complete an online application which is available only in March of each year. The University notifies students each year in March of the application period and funds if awarded are posted to the students' account at the University for the following Fall and Spring Semesters.

Note: All awarded money from the RHMSF will be deposited into the student's University account. Any money owed to the University will be deducted from scholarship award.

Code of Ethics for the Physical Therapist



HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24] [Standard]

Preamble

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

- Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
- Provide standards of behavior and performance that form the basis of professional accountability to the public.
- 3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
- Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
- Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Principles

Principle #1: Physical therapists shall respect the inherent dignity and rights of all individuals. (Core Values: Compassion, Integrity)

 Physical therapists 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.

 Physical therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

Principle #2: Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

(Core Values: Altruism, Compassion, Professional Duty)

- 2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.
- 2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

- Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.
- Physical therapists shall protect confidential patient/ client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle #3: Physical therapists shall be accountable for making sound professional judgments.

(Core Values: Excellence, Integrity)

- 3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
- 3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
- 3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.
- Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.
- Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

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

(Core Value: Integrity)

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

Principle #5: Physical therapists shall fulfill their legal and professional obligations.

(Core Values: Professional Duty, Accountability)

- Physical therapists shall comply with applicable local, state, and federal laws and regulations.
- Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.
- Physical therapists involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapists shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapists 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.
- 5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

Principle #6: Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.

(Core Value: Excellence)

 Physical therapists shall achieve and maintain professional competence.

- 6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, health care delivery, and technology.
- 6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.
- 6D. Physical therapists shall cultivate practice environments that support professional development, lifelong learning, and excellence.

Principle #7: Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society.

(Core Values: Integrity, Accountability)

- Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.
- Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.
- Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.
- 7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.
- 7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/

Principle #8: Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally.

(Core Value: Social Responsibility)

- 8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.
- 8C. Physical therapists shall be responsible stewards of health care resources and shall avoid overutilization or underutilization of physical therapy services.
- Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.

APPENDIX D



Last Updated: 08/22/12 Contact: nationalgovernance@apta.org

STANDARDS OF CONDUCT IN THE USE OF SOCIAL MEDIA HOD P06-12-17-16 [Position]

Whereas, social media creates opportunities to communicate in a public forum;

Whereas, Physical therapists (PT), physical therapist assistants (PTA) and physical therapy students (students) must be knowledgeable and respectful of the principles of patient/client privacy and confidentiality in safeguarding identifiable patient/client information as it relates to social media;

Whereas, PTs, PTAs, and students who use social media should represent their own views and be professional and accurate in their communications;

Whereas, errors and omissions in communication, harassing statements, and unprofessional language presented via social media may have a long-lasting and possibly negative impact on the individual or the physical therapy profession;

Whereas, PTs, PTAs, and students shall consider when and how to separate their personal and professional lives on social media; and,

Whereas, PTs, PTAs, and students should be knowledgeable about employers', educational institutions', or clinical training sites' published policies on social media;

Resolved, Physical therapists (PT), physical therapist assistants (PTA) and physical therapy students (students) shall consider whether to interact with patients on social media or create separate personal and professional social media profiles;

Resolved, PTs, PTAs, and students shall not misrepresent when they are speaking for themselves or the American Physical Therapy Association (APTA), other organizations, educational institutions, clinical sites, or employers; and

Resolved, if an individual identifies content posted to social media by a colleague that appears unprofessional, s/he has a responsibility to bring that to the attention of the individual that has posted the content so that s/he can remove it or take other appropriate action;

Resolved, PTs, PTAs, and students engaging in social media activities shall demonstrate appropriate conduct in accordance with the Code of Ethics for the Physical Therapist and Standards of Ethical Conduct for the Physical Therapist Assistant.

Explanation of Reference Numbers:

BOD P00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.

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

APPENDIX E

TENNESSEE STATE UNIVERSITY College of Health Sciences Department of Physical Therapy

WAIVER, RELEASE AND AUTHORIZATION FORM

I, (Name of Participant or Volunteer), hereby give permission for the physical therapy students and/or instructors of the Department of Physical Therapy at Tennessee State University (TSU) to engage in physical therapy related procedures and activities, including, but not limited to:

- Demonstrate a procedure on me
- Practice a procedure on me
- Ask questions regarding my medical history
- Share my case study

I acknowledge that the physical therapy related procedures to be performed include, but are not limited to, exercise, joint mobilization, balance, modalities, functional assessments, and other physical related activities, treatments, assessments, evaluation or interventions.

The instructor has explained that my participation is for the educational purpose of the Physical Therapy students.

The instructor has explained my role as a volunteer participant, his/her role as the instructor, and the students' role.

I understand that there are inherent risks in participating in the physical the therapy procedures described above. The inherent risks of participating in said program and traveling to and from TSU's campus include injury, accident, and death. I am voluntarily participating in this program with knowledge of the risk(s) involved. I have reached the age of majority, and I am competent to make this decision for myself, or, if I am a minor, I have obtained the permission of a parent or legal guardian. I agree to assume and accept any and all risks, including injury or death. I understand and recognize that the benefits of participation will outweigh such risks.

I further understand and acknowledge that participating in this program is a privilege. While participating in this program, I agree to comport my conduct to the highest standards of ethics, honesty, and professionalism.

I am not suffering from any medical condition, impairment, or disease that would prevent my safe participation in any of the activities involved in this program. I will use care for my own safety and well-being and for the safety and well-being of others. I have not been advised by a physician or any other health care provider to limit my activities or travel. I have either had a physical examination and received my physician's permission to participate, or I have decided to participate in these activities without the approval of my physician. I assume all responsibility for my participation in the activities.

TSU, Tennessee Board of Regents, and the State of Tennessee assume no responsibility for personal injury or for conduct by any person, whether a program participant or not, or for any type of personal property loss.

I agree to **not** hold Tennessee State University, the State of Tennessee, the Tennessee Board of Regents (TBR), or their respective officers responsible for any loss or injury that occurs while I am participating in program or

related activities, including travel to and from physical locations where activities occur. I excuse, release and forever discharge the State of Tennessee, TSU, TBR, its officers, employees, and representatives (the "releasees") from any and all liability for injuries or damages resulting from my participation program activities or travel. I also release the releasees from any responsibility or liability for injury or damage to myself or injury or damage I cause to others, including that caused by the negligent act(s) or omission(s) of releasees or in any way arising out of or connected with my participation in any travel, program or program-related program, or the use of any vehicle or equipment, whether owned by myself or others. This release will also prevent my family from suing releasees and binds my spouse, if I have one, my estate, siblings, parents, heirs, and assigns. I acknowledge that TSU will not provide medical treatment or medical coverage if I am injured or if I injure someone else, and that TSU or its officers will be in no way responsible for any injury, loss or untoward event that occurs.

D	0: 10:
Print name	Signature and Date
Date of Birth	Signature of Parent or Guardian
	if less than 18 years of age

APPENDIX F

TENNESSEE STATE UNIVERSITY College of Health Sciences Department of Physical Therapy

CLINICAL EDUCATION STIPULATIONS

Stu	dent's Name
Ter of 3 a lit site faci	nderstand that Clinical Education is an integral component of the Doctor of Physical Therapy curriculum at messee State University and a necessary requirement for graduation. I understand that I must complete a minimal 86 weeks or 1440 hours of clinical education to meet the requirements of graduation. I understand that there are mitted number of clinical education sites in Davidson County. I further understand that most clinical education is do not provide housing or any financial assistance for students completing clinical education at their facilities. To litate the clinical education placement process while I am in the Physical Therapy Program, I agree to the owing:
•	I will go outside of a one (1) hour driving distance from the Tennessee State University main campus including out of the state of Tennessee, if necessary, for at least two (2), and if necessary three (3) of my five (5) clinical education experiences.
•	I realize that initial placement at a clinical site is no guarantee that the clinical facility will hold the clinical slot for me, and that the facility may cancel the reservation at any point. In case of a cancellation, the Academic Coordinator of Clinical Education (ACCE) and/or the Assistant ACCE will locate a substitute placement to meet my educational requirements. Accepting a substitute placement may require additional travel and expenses that I had not anticipated.
•	I agree to work closely with and cooperate with the ACCE and/or Assistant ACCE in arranging my clinical education placements.
•	I agree not to contact clinical education placement sites without the prior permission of the ACCE and/or Assistant ACCE.
Ву	affixing my signature below, I hereby accept and agree to abide by the above conditions.
Pri	nt Name Date
Sig	nature Date

Date

Witness

PROFESSIONALISM IN PHYSICAL THERAPY: CORE VALUES





Information about this APTA document may be accessed at the following web page link:

 $http://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/BOD/Judicial/ProfessionalisminPT.pdf$

APPENDIX H

TENNESSEE STATE UNIVERSITY College of Health Sciences Department of Physical Therapy

CONFIDENTIALITY STATEMENT

(print name), hereby give my word that I will adhere to the confidentiality requirements of HIPAA regulations, and the policies and procedures of each facility in which I participate for Clinical Education Experiences. All patient/client records will remain confidential at all times.		
By affixing my signature on this form, I indicate that I understa confidentiality requirements.	nd the above-stated request and agree to abide by the	
Student's Signature	_	
Date	-	
Witness' signature (Departmental Faculty or Staff)	-	
Date	_	

APPENDIX I

TENNESSEE STATE UNIVERSITY College of Health Sciences Department of Physical Therapy

CRIMINAL BACKGROUND CHECK AND DRUG SCREEN REQUIREMENT

Criminal background checks and/or drug screens may be requirements at some affiliated clinical sites for training in the Physical Therapy professional curriculum. Based on the results of these checks/screens, an affiliated clinical site may not allow me to participate in clinical education activities at their facility which could result in my inability to successfully complete the requirements of the Physical Therapy Program. Additionally, a criminal background or positive drug screen may preclude licensure or employment.

I have read the above statement and understand its implications. In addition, if criminal background checks or drug screens are required of me, I agree to cooperate fully with the process and to pay all costs associated with such checks/screens, as requested. I will not hold Tennessee State University or the Physical Therapy Department liable if the results of a criminal background check or a drug screen indicate that I am unable to complete the requirements of the Physical Therapy Program or if such results preclude me from obtaining licensure or employment.

Student Signature	Date	
Academic Coordinator of Clinical Education Signature	Date	

ACKNOWLEDGEMENT

Revisions to the T revisions to the ha	SU Physical Therapy Student Handbook will occur as needed. Students will be notified of any indbook.
Therapy Student I	(print name), acknowledge receipt of the TSU Physical Handbook. I have read and understand all items contained in the document. I will abide by the rules ontained therein, including any revisions.
Signature:	
Date:	



TSU Publication Statement

TSU-16-0247(A)-13b-13670 – Tennessee State University is an AA/EEO employer and does not discriminate on the basis of race, color, national origin, sex, disability or age in its program and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies: Ms. Tiffany Baker-Cox, Director of Equity, Diversity and Compliance, 3500 John A. Merritt Boulevard, Nashville, TN 37209, (615) 963-7435.