



# **Doctor of Physical Therapy Program Student Handbook**

**Table of Contents**

**SECTION I: GENERAL INFORMATION**..... 4

**1.1 Welcome to the Doctor of Physical Therapy Program**..... 4

**1.2 Simmons University** ..... 5

**1.2.1 History** ..... 5

**1.2.2 Mission**..... 5

**1.2.3 Vision** ..... 5

**1.2.4 Core Values** ..... 6

**1.2.5 University Academic Policies** ..... 6

**1.2.6 Student Rights and Responsibilities** ..... 6

**1.2.7 Essential University Resources**..... 6

**1.2.8 Maps & Directions to Simmons**..... 9

**1.3 College of Natural, Behavioral, and Health Sciences (CNBHS)**..... 10

**1.3.1 CNBHS Academic Calendar** ..... 10

**1.4 Doctor of Physical Therapy (DPT) Program** ..... 10

**1.4.1 History** ..... 10

**1.4.2 Mission**..... 10

**1.4.3 Vision** ..... 11

**1.4.4 Core Values** ..... 11

**1.4.5 Program Goals** ..... 12

**1.4.6 DPT Program Philosophy** ..... 14

**1.4.7 Learning Environment**..... 15

**1.4.8 Clinical Education & Integrated Learning Experiences**..... 15

**1.4.9 Service Learning & the Scott Ross Center for Community Service** ..... 16

**1.4.10 Commission on Accreditation of Physical Therapy Education**..... 16

**1.4.11 Graduation Requirements** ..... 16

**SECTION II: DPT ACADEMIC REQUIREMENTS**..... 17

**2.1 Program Requirements** ..... 17

**2.2 Technical Standards/Essential Functions of Physical Therapy** ..... 17

**2.3 Student Accommodations Policy & Procedures** ..... 19

**2.4 Professional Standards of Behavior** ..... 20

**2.5 Academic Honesty** ..... 22

2.5.1	Honor Code of Responsibility.....	22
2.5.2	Faculty/Administrative Responsibility .....	22
2.5.3	Statement on Cheating and Plagiarism .....	23
2.6	Grading Policy .....	24
2.7	Practical Examination Policy.....	25
2.8	Academic Progression .....	25
2.8.1	Extension of Time to Complete a Course (Incomplete) .....	26
2.8.2	Course Withdrawal .....	26
2.8.3	Repeating a Course.....	27
2.8.4	Extension of Time for Degree Completion .....	27
2.8.5	Probation.....	27
2.8.6	Removal from Probation .....	27
2.8.7	Unable to Progress with Cohort to Clinical .....	27
2.8.8	Exclusion .....	28
2.9	Complaints and Appeal Process.....	28
2.9.1	Professional Pathway for Resolving Academic Complaints .....	28
2.9.2	Appeal of Student Status .....	29
2.10	Changes to DPT Student Handbook.....	30
SECTION III:	APPENDICES.....	31
Appendix A.	Student Consent Form for Lab/Classroom Demonstrations .....	31
Appendix B.	Essential Functions for Physical Therapy Students.....	33
Appendix C.	Clinical Education Manual .....	39
	Introduction to Clinical Education .....	39
	General Policies and Procedures.....	45
	Clinical Placement Policies and Process.....	49
	Clinical Education Forms .....	58
Appendix D.	Acknowledgement of Student Handbook .....	92
Appendix E.	Log of Student Handbook Distribution & Edits.....	93

## **SECTION I: GENERAL INFORMATION**

### **1.1 Welcome to the Doctor of Physical Therapy Program**

The Faculty would like to welcome you to the Simmons University Doctor of Physical Therapy program – a long standing and respected physical therapy program, one of the first in the United States.

You were selected into this program by the physical therapy faculty members who, based on your performance in prerequisite coursework and your enthusiasm for our profession, determined that you had the academic strength and drive to successfully complete this rigorous academic program. You come from diverse areas and have your own reasons for pursuing this academic and professional path. Now that you are at Simmons, you must come together and form a learning community – one that will enhance your classroom learning experiences and support you as you face the challenges of your academic experience.

Here are some tips that you may find helpful:

- The practice of physical therapy occurs in collaborative, collegial, and professional environments; you will be prepared to thrive in this culture by graduation.
- Your success in the program is an indication of both your ability and the success of the Faculty; the Faculty are here to mentor you through your academic and professional behavior development. Seek their guidance.
- Remember you are learning to provide the best quality physical therapy to your patients; the same quality of care that you would expect for your family and friends.
- The DPT program is designed to eliminate competition among the students in the program, this encourages a collegial atmosphere. If you sense any competition, you are experiencing the drive that comes from within you – be kind to yourself and learn to balance your drive while maintaining a healthy lifestyle.
- To succeed in the DPT program you must...
  - Work hard and wisely, Keep perspective
  - Seek balance in your life
  - Stay healthy
  - Focus on becoming the physical therapist of the future

All the best on your journey to become a Doctor of Physical Therapy,  
-The Faculty and Staff of the Simmons University Doctor of Physical Therapy program

## **1.2 Simmons University**

### **1.2.1 History**

[\(Click Here\)](#)

Decades before women in America gained the right to vote, Boston businessman John Simmons had a revolutionary idea — that women should be able to earn independent livelihoods and lead meaningful lives. It was this same spirit of inclusion and empowerment that produced the first African-American Simmons graduate in 1914, and made Simmons one of the only private colleges that did not impose admission quotas on Jewish students during the first half of the 1900s.

Since 1899, Simmons has offered a pioneering liberal arts education for undergraduate women integrated with professional work experience. Today, Simmons also encompasses the many benefits of a small university, including renowned coeducational graduate programs in health studies, education, liberal arts, library and information science, management, and social work. We also offer an MBA program designed specifically for women.

For more than 100 years, a Simmons education has integrated professional preparation, intellectual exploration, and community orientation, because all three approaches are necessary for success. At Simmons, we value the many dimensions of identity – including race, class, ethnicity, and sexual identity – and reflect that in our curriculum, affiliated organizations, and community partnerships.

Simmons consistently ranks among the nation’s top schools in its category in the US News & World Report annual survey, and is included in the Princeton Review “Best 361 Colleges.” That’s no surprise. Simmons educates people who share a passion for learning, a commitment to community, and the determination to make a difference.

### **1.2.2 Mission**

[\(Click Here\)](#)

To provide transformative learning that links passion with lifelong purpose.

### **1.2.3 Vision**

[\(Click Here\)](#)

Simmons will become a beacon of leadership in the world of higher education; a resource to our nation and world; known for our expertise in fields which improve the human condition; sought out for the findings of our highly reputable research and seen as the global expert in educating women for their own empowerment and for leadership.

#### **1.2.4 Core Values**

[\(Click Here\)](#)

- We are at our best when students are first.
- We prepare students for life's work.
- We cross boundaries to create opportunities.
- We make a collective investment in community.

#### **1.2.5 University Policies**

[\(Click Here\)](#)

Including:     General Policies  
                  Graduate Policies  
                  Undergraduate Policies

#### **1.2.6 Student Rights and Responsibilities**

[\(Click Here\)](#)

Including:     Honor System  
                  Non-Discrimination  
                  Gender-Based Misconduct  
                  Hazing Policy  
                  Technology Policies  
                  Student Records  
                  Valuing Diversity  
                  Bias Response Protocol  
                  Conduct System  
                  Alcohol and Illegal Drugs  
                  Protest and Demonstration  
                  Missing Student Policy

#### **1.2.7 Essential College Resources**

##### *1.2.7.1 Library*

Location: Lefavour Building

The Simmons University Library fully supports the educational needs of all members of the Simmons Community. Housed in Lefavour Hall on Simmons' main campus, the Library offers a comfortable and productive environment for learning, including an array of group study rooms, meeting rooms, event spaces, and quiet study areas. The Library's collections of print and electronic books, journals, and other media, have been developed to enhance the curriculum, and library staff are available to assist users with accessing and using these resources. The Simmons University Archives is located in the Library and houses a collection of University records, publications, manuscripts, photographs, and rare books that document the history of Simmons University.

#### 1.2.6.1.1 *The Writing Center*

Location: Ground Floor, Lefavour Hall

The mission of the Writing Center at Simmons University is to foster academic excellence by providing resources and support that meet the needs of graduate and undergraduate students. The Writing Center offers one-on-one tutoring, workshops and presentations designed to strengthen students' academic reading, writing, critical thinking, and research skills. The Center works with faculty across schools and programs to address students' academic and discipline-specific writing needs.

#### 1.2.7.2 *Career Education Center*

Location: Center for Student Success

Preparing our students to build successful careers and lead meaningful lives has been Simmons's mission for over 100 years. The Career Education Center (CEC) supports this mission by providing career education for lifelong career development. We help undergraduate students, graduate students and alumnae/i develop the skills and knowledge they need to make informed decisions about their careers in preparation for life's work. Our philosophy of career development is based on our 5 Step Career Development Model which guides our programs and work with all the Simmons populations we serve. Whether you are about to begin your undergraduate studies, have just graduated with a master's degree, or are an alum approaching a career or life transition, the Career Education Center can make a difference.

#### 1.2.7.3 *Holmes Sports Center*

Location: Residence Campus

Athletic activity at Simmons centers around the William J. Holmes Sports and Fitness Center, a \$10 million, 60,000 square foot facility located just steps from Simmons' nine residence halls and Bartol Dining Hall. Opened in 1989, the Center houses state-of-the-art training equipment, plus hardwood courts, an indoor running area, swimming pool, and much more. In 1992, the Holmes Sports Center received the Athletic Business Architectural Award.

#### 1.2.7.4 *Accessibility Services*

[\(Click here\)](#)

Location: Center for Student Success

At Simmons University, we are committed to the full participation of all students in our programs and activities. Simmons University is mandated by Section 504 of the Rehabilitation Act of 1973 and the *Americans with Disabilities Act* of 1990 to provide equal access to facilities, educational and co-curricular programs, campus activities and employment opportunities to qualified individuals with disabilities.

The Office of Accessibility Services (OAS) is a strategy-based service that supports students in their academic endeavors both on the ground and online. Students registered with OAS are expected to adhere to the same academic and behavioral standards as the rest of the University. A student's initial connection and ongoing interaction with OAS is self-propelled.

#### 1.2.7.5 *Off-Campus Housing*

[\(Click Here\)](#)

The listing of rental units on this site is a service to local rental property owners and Simmons students, faculty, and staff. Rental property owners are responsible for reporting information fairly and accurately, and Simmons and Off Campus Partners cannot guarantee the completeness or accuracy of such information. Inclusion of any property or rental unit on this website does not constitute, and shall not be construed or reported as (1) an endorsement or approval by Simmons or Off Campus Partners of the landlord, its properties, or its business practices, or (2) a warranty or representation by Simmons or Off Campus Partners as to the quality, safety or other features of such property and/or its owners or management agent(s). Simmons and Off Campus Partners expressly disclaim any and all responsibility for any problems that may arise with regard to such property or rental units or with regard to disputes between landlords and tenants concerning such property or rental units. All prospective tenants are encouraged to exercise their own good judgment when evaluating a prospective rental unit or landlord.

#### 1.2.7.6 *Bookstore*

Location: Basement of MCB

The Simmons University Bookstore is located on lower level off of the Fens Lobby in the MCB. In addition to all course related books and materials, we carry a wide variety of merchandise — like gifts, cards, candy and snacks — and offer many services.

#### 1.2.7.7 *Counseling Center*

Location: One Palace Road, P-305

Welcome to the Simmons University Counseling Center's website. This site is designed to help you understand our services, introduce our staff, and answer frequently asked questions. A unique feature of this site is to introduce you to the other websites for health information. If you have any additional questions or concerns or would like to talk to a member of our staff, please call 617-521-2455.

#### 1.2.7.8 *Health Center*

Location: Residence Campus

The Health Center, which is located on the Simmons Residence Campus, offers health care to Simmons undergraduate and graduate students, and is a provider of health services to students at other area colleges as well. Services are available 7 days a week, 24 hours a day during the academic year either at the Center, or when the Center is closed, by telephone contact with the provider on call. Some services are also available in the summer.

The Simmons Health Center is staffed by registered nurses, nurse practitioners and physicians. All physicians are Board Certified and have appointments at Harvard Medical School and at the Beth Israel Deaconess Medical Center, which is directly across the street from the Simmons residence campus.



*1.2.7.9 Violence Prevention and Education (Betsy's Friends)*

Location: MCB, W-003

The Simmons University Violence Prevention and Educational Outreach Program works to educate and spread awareness around forms of gender-based violence (e.g. sexual harassment, sexual assault, intimate partner violence, stalking etc.), to prevent the occurrence of violence on our campus or impacting our community, familiarizing community members with Simmons policy and protocol to address and respond to these issues if they arise, and to support and advocate for student survivors of violence.

*1.2.7.10 Technology Support*

Location: Lefavour Building 3<sup>rd</sup> Floor ([Click Here](#))

Simmons Technology is committed to providing reliable services, innovative solutions, and excellent support to the Simmons community. Looking for self-service or technology support? Please visit [servicedesk.simmons.edu](http://servicedesk.simmons.edu) to find answers to common questions, make service requests, and more!

*1.2.7.11 Office of Student Financial Services*

Location: MCB, W105

Limited grant aid is available based on academic excellence and/or financial need depending upon funding levels of the individual graduate programs. Graduate students may qualify for a combination of Federal loans, institutional loans, and part-time student employment. Changes in enrollment affect financial aid eligibility. If the number of enrolled credits is reduced there may be a reduction in the financial aid award, since costs will be less. Graduate students must maintain at least halftime enrollment status (five credits) to qualify for any financial aid.

*1.2.7.12 Registrar*

Location: MCB

The general functions of the Office of the Registrar are to maintain student records and to report data based on this information to the Simmons community and to specific outside agencies. Services to students include class registration; grade and official transcript reports; evaluation of transfer credit and fulfillment of all-college degree requirements; coordination of information pertaining to planned educational leaves of absence; final examination schedules; and Colleges of the Fenway cross-registration. Requests for transcripts must be in writing and take three to five working days to process. The office works with the faculty to schedule class times and room assignments and distributes class lists, grade rosters, and records for student advising purposes.

**1.2.8 Maps & Directions to Simmons**

For maps of the University, please visit [HERE](#) For directions, please visit [HERE](#)

### **1.3 College of Natural, Behavioral, and Health Sciences (CNBHS)**

In the College of Natural, Behavioral, and Health Sciences, you'll find inspiration at the intersection of life and science — cultivating innovative practices and procedures required to advance our scientific future and save lives.

Our faculty are leaders in their fields and pride themselves on being personal mentors. You'll work with them to master the fundamentals and put that knowledge into practice through hands-on learning in our state-of-the-art labs. Our students consider the natural world from every angle, blending social, mathematical, and life science to address intriguing issues related to behavior and experience.

Situated in the heart of Boston, the Simmons campus is surrounded by world-renowned teaching hospitals and research facilities — like Brigham and Women's Hospital, Beth Israel Deaconess Medical Center, Boston Children's Hospital Boston and Massachusetts General Hospital. Our students are sought after for clinical rotations, research, and employment opportunities with leading experts in the industry.

#### **1.3.1 CNBHS Academic Calendar**

[\(Click Here\)](#)

### **1.4 Doctor of Physical Therapy (DPT) Program**

The DPT program requires a full-time commitment of 36 months and culminates in the Doctor of Physical Therapy (DPT) degree. Students begin the program during the summer session and typically graduate in May.

The DPT curriculum is designed to educate students to serve patients in the areas of health promotion, disease prevention, and rehabilitation. The didactic and clinical course material in each semester is integrated within the semester and across the entire curriculum to allow students to synthesize and apply newly acquired knowledge and skills. Students in the professional curriculum attend classes on the Simmons campus and at Harvard Medical School (DPT 621 Human Anatomy). More than 300 clinical sites, located across the country, are affiliated with Simmons University and provide students with the opportunity to participate in the practice of physical therapy under the mentorship of skilled clinicians. The DPT program is accredited by the Commission on Accreditation in Physical Therapy Education of the American Physical Therapy Association.

#### **1.4.1 History**

Small classes, engaged faculty, a long history of preparing students for professional careers, and its presence adjacent to internationally known research and teaching hospitals makes Simmons University DPT unique. The physical therapy program has a history dating back to the early 1900's, when the program began at Harvard Medical School, as one of the first physical therapy programs in the United States. Through its further collaboration with the equally prestigious Children's Hospital of Boston, the program moved to the current Simmons campus in the late 1940s.

#### **1.4.2 Mission**

The DPT program educates future healthcare professionals who promote effective,

accessible, and efficient health care for all individuals and communities. Through discovery in research and evidence based practice students are prepared for evolving, contemporary clinical practice. The program cultivates a commitment to active life-long learning, leadership, advocacy, and service to others, across cultural and socio-economic diverse populations.

### **1.4.3 Vision**

A national leader in innovative, interdisciplinary education that integrates academic excellence with rigorous career preparation, including outstanding internships, clinical placements, and research opportunities.

A vibrant educational community that prepares graduate students for lifelong career success. A community that is career-focused, student-centered and inclusive, and engages students in their communities is committed to making a difference.

A DPT program that educates and prepares future practitioners to provide their patients and clients “direct access for the diagnosis of, interventions for, and prevention of impairments, functional limitations, and disabilities related to movement, function, and health.”

### **1.4.4 Core Values**

The Simmons University DPT program guides each student to evolve from the student role to that of a practicing professional throughout the curriculum. It focuses on exceptional, student centered learning and experiences that promote the Core Values of the American Physical Therapy Association:

- o **Accountability**

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

- o **Altruism**

- primary regard for or devotion to the interest of patients/clients, thus assuming the fiduciary responsibility of placing the needs of the patient/client ahead of the physical therapist’s self-interest.

- o **Compassion/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.

- o **Excellence**

- physical therapy practice that consistently uses current knowledge and theory while understanding personal limits, integrates judgment and the patient/client perspective, embraces advancement, challenges mediocrity, and works toward development of new knowledge.

- o **Integrity**

- steadfast adherence to high ethical principles or professional standards; truthfulness, fairness, doing what you say you will do, and “speaking forth” about why you do what you do.

- o **Professional Duty**

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

o **Social Responsibility**

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

Additionally the Faculty of the Simmons University DPT program are committed to the follow tenets:

- o Higher education for leadership in the profession
- o Excellence in teaching, applied research and practice
- o Commitment to a diverse and inclusive community
- o Tradition of community and civic engagement

### 1.4.5 Program Goals

#### 1) STUDENT GOAL

Graduates of the Simmons University Doctor of Physical Therapy program will be prepared to be leaders in providing legal and ethical, informed, effective, contemporary, and comprehensive physical therapy services across the continuum of care and patient/client lifespan within the dynamic health care environment.

**OUTCOME #1:** Students will practice as entry-level physical therapists upon completion of the program.

**OUTCOME #2:** Students will seek out and critically utilize professional literature and educational opportunities to inform practice.

**OUTCOME #3:** Students will be prepared to contribute to the body of knowledge in the profession as well as participate in the clinical research process.

#### 2) STUDENT GOAL

Graduates of the Simmons University Doctor of Physical Therapy program will be prepared to be leaders in recognizing and respecting the socioeconomic, psychosocial, and cultural context of patient/client-centered care and be able to adapt professional responsibilities and service delivery models within diverse communities.

**OUTCOME #1:** Students will use skills in self-assessment, teamwork, and inter- and intra-professional collaboration to foster professional development to optimize patient care.

**OUTCOME #2:** Students will contribute to the profession, patient/clients, and/or communities of interest through service, advocacy, and leadership.

### **3) FACULTY GOAL**

Faculty of the Simmons University Doctor of Physical Therapy program will excel in teaching in order to create an effective learning environment for students and clinical partners.

**OUTCOME #1** Faculty will contribute to student success by being accessible to and inclusive of all students.

**OUTCOME #2** Faculty will demonstrate effective teaching practices by maintaining a portfolio of peer-review and reflective teaching assessments.

### **4) FACULTY GOAL**

Faculty of the Simmons University Doctor of Physical Therapy program will actively engage in scholarship by contributing to and utilizing current literature to support the profession and inform educational practices.

**OUTCOME #1:** Faculty will seek and critically utilize professional literature and educational opportunities to inform current practice.

**OUTCOME #2:** Faculty will produce scholarship in areas of scholarly interest.

### **5) FACULTY GOAL**

Faculty of the Simmons University Doctor of Physical Therapy program will demonstrate leadership by pursuing their own professional development, actively participating in professional organizations, and contributing to communities of interest through service and advocacy.

**OUTCOME #1:** Faculty will use skills in self-assessment, inter and intra-professional collaboration, and teamwork to foster professional development to optimize patient care.

**OUTCOME #2:** Faculty will contribute to the profession, patient/clients, and/or communities of interest through service, advocacy, and leadership.

## **6) PROGRAM GOAL**

The Simmons University Doctor of Physical Therapy program will demonstrate commitment to educating future physical therapists by ensuring regular assessment of the appropriate resources, both capital and human, upon which informed decisions will be made towards setting and achieving the highest standards.

**OUTCOME #1:** Implement a regularly scheduled assessment program that seeks input from stakeholders and triangulates data points to ensure a thorough review.

**OUTCOME #2:** Implement and utilize a feedback loop which would allow for objective changes in the DPT program based on current assessment.

### **1.4.6 DPT Program Philosophy**

The Doctor of Physical Therapy program at Simmons University is guided by the principle that excellence is achieved through challenge and exploration in a collaborative learning community. This learning environment supports dynamic interaction among students and faculty and is responsive to multiple stakeholders. Teaching and learning experiences reflect our beliefs about the values and attributes required of physical therapists to meet the needs of today's society.

The program embraces the premise that optimal patient-centered care is delivered by those who can integrate the foundational sciences with clinical reasoning and physical therapist skills to meet the diverse needs of patients and clients. The curriculum supports this premise through components of problem-based learning, extensive clinical experiences and service opportunities. The faculty and students continually seek best available evidence to direct their academic and clinical decision-making. The DPT faculty cultivates a research-oriented learning environment and disseminates contributions to the discovery of new knowledge to enhance best practice.

The Simmons DPT program utilizes small group experiences that foster an optimal learning environment, affords easy access to faculty, and promotes student self- assessment, collaboration and teamwork. In order to thrive in this collaborative learning environment, students learn to be active listeners, skillful communicators, interactive participants, and become passionate about learning and personal development. Faculty share with each other and students an enthusiasm for the physical therapy profession and a vision for excellence built on a foundation of contemporary knowledge, active clinical practice, and scholarly endeavors. The collaborative learning community at Simmons embodies a commitment to professionalism, advocacy, leadership, service to others, clinical excellence and life-long learning.

#### **1.4.7 Learning Environment**

In the Simmons University DPT program the traditional core curriculum is enhanced at the beginning of the first fall semester of the program by engaging students in small group case discussions, known as tutorial sessions. The ratio of faculty to students in these tutorial classes is approximately 1:6. Tutorial cases are based on the clinical material presented during the semester. Students are encouraged to incorporate the information they learn during their integrated clinical experiences into these sessions. This combination of classroom, seminar, and clinic experience enables our students to actively develop their clinical decision making skills early in their educational experience.

From the beginning of the program, students are taught to efficiently gather information from the scientific literature to assess clinical findings, determine a diagnosis and design an effective treatment program. The learning cycle continues as the student completes a 12-week clinical experience in the beginning of their second year.

Following this clinical experience, students return to the classroom in the spring eager to explore new course content in their classroom and seminar classes.

The last year of the program is made up of a semester of capstone courses that bring together the entire curriculum and concludes with two final 12-week clinical experiences. Learning in our program does not end with graduation. The emphasis throughout the program on self-assessment and self-directed learning prepare the students for lifelong learning throughout the duration of their careers.

#### **1.4.8 Clinical Education & Integrated Learning Experiences**

At Simmons the faculty recognizes that hands-on experience helps ensure skilled, confident graduates. Student learning takes place in our modern labs and classrooms, as well as at an array of health care facilities. Our close academic and clinical partnerships with Boston's world-renowned teaching hospitals and care facilities provide exceptional clinical training and employment opportunities. Simmons University contracts with more than 300 clinical sites, including Massachusetts General Hospital, Brigham and Women's Hospital, Children's Hospital Boston, Boston University Medical Center, and Beth Israel Deaconess Medical Center in the Boston area for clinical education. There is a high concentration of the possible clinical sites in New England and Mid-Atlantic areas with the remainder of the sites spread across the country.

Integrated Clinical Experiences (ICEs) are practice-based exposure to patient care in a variety of settings. Students have the opportunity to develop observation and patient care skills that augment their academic studies and full-time clinical experiences.

#### **1.4.9 Service Learning & the Scott Ross Center for Community Service**

Simmons University DPT program has always assumed an active role in helping those in our local and global communities to help those who are medically and socially underserved. We are fortunate at Simmons to be the home of the Scott Ross Center for Community Service whose mission is to facilitate and promote community service and service learning for Simmons University faculty, staff, and students. The Center serves the Greater Boston community by developing reciprocal partnerships while enriching and expanding students' educational and co-curricular experiences. Simmons University DPT students excel in Service Learning both locally and nationally.

#### **1.4.10 Commission on Accreditation of Physical Therapy Education**

[The] Doctor of Physical Therapy program at Simmons 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](mailto:accreditation@apta.org); website: <http://www.capteonline.org>.

CAPTE is the only accreditation agency recognized by the United States Department of Education and the Council for Higher Education Accreditation to accredit entry-level physical therapist and physical therapist assistant education programs. CAPTE's mission is to serve the public by establishing and applying standards that assure quality and continuous improvement in the entry-level preparation of physical therapists and physical therapist assistants and that reflect the evolving nature of education, research, and practice.

#### **1.4.11 Graduation Requirements**

Students who have completed all requirements for the DPT degree (99 credits) and are in good academic standing are required to complete a Petition For Graduation form.



## **SECTION II: DPT ACADEMIC REQUIREMENTS**

### **2.1 Program Requirements**

The DPT program requires a full-time commitment of 36 months and culminates with awarding the Doctor of Physical Therapy (DPT) degree. The program begins during summer session when students take DPT 621 Advanced Human Anatomy at Harvard Medical School and culminates in two 12-week clinical educational experiences at the end of the third year of the program. The academic curriculum is designed to educate men and women in the areas of health promotion, management, research, disease prevention, and rehabilitation.

Integrated Clinical Experiences (ICE) are included in the Professional Seminar course sequence; these experiences allow students to synthesize and apply newly-acquired knowledge and skills in the clinical setting.

The DPT program includes clinical science courses that require students to actively participate in lab sessions. Please refer to: Appendix A: Consent Form for participation in hands-on skills and safety in use of equipment.

The Doctor of Physical Therapy degree is awarded to students who have satisfactorily completed the DPT program, attaining a minimum of a B (3.0) average. As graduates of a physical therapy accredited program, students are eligible to take the National Physical Therapist Examination (NPTE.) Students graduate in May of the third year and can apply to take the examination at that time by contacting the Federation of State Boards Physical Therapy (FSBPT) to sit for the next fixed-date NPTE test. Additional information regarding the NPTE can be found at the Federation of State Boards of Physical Therapy website: <https://www.fsbpt.org>.

### **2.2 Technical Standards/Essential Functions of Physical Therapy**

All educational programs at Simmons University, including those of the College of Natural, Behavioral, and Health Sciences, are dedicated to principles of nondiscrimination. This includes a commitment to not discriminate against qualified disabled applicants and students.

As part of its effort to ensure that qualified disabled students are given the opportunity to participate fully in the DPT program, the DPT program has outlined the essential functions of students in the program. To be qualified to participate in and complete the DPT program, students must be able to perform these essential functions. The program will provide qualified disabled students with reasonable accommodations that are necessary to enable them to meet the technical standards required of them.

Students are also encouraged to visit the APTA website for more information on the Minimum Required Skills of Physical Therapy Graduates at Entry-Level ([Click Here](#)).

## Technical Standards/Essential Functions

### **Cognitive**

The student must be able to thoroughly, efficiently and reliably:

- Recall information from reading material, lecture, discussion, patient evaluation;
- Interpret and extrapolate information from reading material, lecture, discussion, patient evaluation;
- Apply information from reading material, lecture, discussion, patient evaluation;
- Analyze information from reading material, lecture, discussion, patient evaluation;
- Synthesize information from reading material, lecture, discussion, patient evaluation;
- Evaluate or form judgments about information from reading material, lecture, discussion, patient evaluation.

### **Affective**

The student must be able to:

- Establish professional, trusting, empathetic relationships with a variety of individuals;
- Demonstrate respect and engage in non-judgmental interactions regardless of individuals' life-styles and cultures;
- Accomplish work effectively in groups;
- Meet externally determined deadlines;
- Be present at required activities in classroom, lab and clinical settings;
- Attend to cognitive, communication and psychomotor tasks for as long as three hours at a time.

### **Communication**

Particularly in a laboratory or clinical course, the student must be able to:

- Hear the spoken word
- Attend selectively and in a controlled manner to various types of communication, including the spoken and written word and non-verbal communication
- Speak intelligibly in English
- Communicate in writing, intelligibly in English
- Relay information in oral and written forms reliably, thoroughly and intelligibly to individuals and groups
- Read English (typed and hand-written)

### **Psychomotor**

Particularly in a laboratory or clinical course, the student must be able to:

- Reliably inspect and observe the skin, facial expression, anatomical structures, posture, and movement of others, typically by sight;
- Assess blood pressure, lung and heart sounds, typically by listening with a stethoscope;
- Reliably read equipment dials and monitors, typically by sight;
- Feel pulses, skin condition, muscle and tendon activity, joint and limb movement, typically with hands and fingers;
- Negotiate level, ramps and stairs to assist patients/classmates appropriately, typically from an upright position;
- Lead patients/classmates through a variety of examinations and treatments typically requiring sitting, standing, squatting and kneeling on the floor or treatment table;

Move from one surface level to another (e.g. floor to stand, stand onto treatment table);  
Exert moderate resistance to limb and body movements of patients/classmates while maintaining own balance in a variety of positions, typically including standing, sitting, squatting and kneeling;  
React and effectively respond quickly to sudden or unexpected movements of patients/classmates;  
Manipulate dials, knobs, electrodes and other small to large parts and pieces of equipment typically with the hands/fingers;  
Lift at least 75 pounds in order to move dependent patients/classmates;  
Move continuously throughout an 8 to 10 hour work day;  
Transport self from one room to another, from one floor to another;  
Don and doff clothing, including gowns, masks, gloves.

Please also refer to: [Appendix B](#): Technical Standards and Request for Accommodation Forms

### **2.3 Student Accommodations Policy & Procedures**

If a student chooses to reveal an existing disability, develops a disability, has a worsening of an existing disability known to the Director of Accessibility Services, or is diagnosed with a disability once matriculated and requests accommodations, they must provide the Director of Accessibility Services with documentation of the condition from a recognized professional capable of identifying such a condition. (Note: A faculty member who believes that a student has an unrecognized disability may discuss the concern with the student, but is not obligated to do so.)

Based on the documentation, the student may request reasonable accommodations for the academic or clinical setting. Any student requesting accommodations will have them reviewed by a committee of the faculty (Assoc. Dean, Program Director, DCE or other relevant faculty) in consultation with the Director of Accessibility Services. Faculty may consult with appropriate professional evaluators or health care providers and/or the student's professional evaluators regarding the type and method of accommodations best suited to address the disability.

If the accommodations requested by the student are deemed unreasonable, but the committee determines that other accommodations are reasonable, those that are reasonable will be offered to the student. If the committee deems the requested accommodations unreasonable, and a compromise cannot be met, the College may deny the individual the right to participate in the program notwithstanding admission. Once accommodations have been agreed upon by the student and committee, the Director of Accessibility Services or the Program Director will notify, in writing, the faculty for whom the accommodation is relevant.

A student's specific disability will not be revealed to faculty unless communicated directly by the student.

If the accommodations are required in the clinical setting, the faculty responsible for the clinical course will make every attempt to find a placement site willing to make the requested accommodations. The student, however, is not guaranteed that a site will be available.

In addition, the student must adhere to the procedures for medical clearance required of all students participating in clinical education experiences.

## **2.4 Professional Standards of Behavior**

The education of a quality physical therapist involves more than teaching students the cognitive and psychomotor pieces of clinical sciences, clinical skills, clinical decision making, patient care management, and best business practice. It also includes the development of affective and professional behaviors. To this end, all components (affective, cognitive, and psychomotor) are considered part of the academic process and students will participate in professional seminars each semester they are on campus, one day integrated clinical experiences, and the application of professional behaviors in the program's didactic and clinical coursework.

Standards of affective and professional behaviors are critical for professional performance and are incorporated into evaluating student progression through the curriculum. In addition to a core of cognitive knowledge and psychomotor skills, it has been recognized by educators and practicing professionals that a repertoire of professional behaviors is required for success in any given profession. The professional behaviors described for physical therapists include:

### **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.

### **Interpersonal Skills**

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

### **Communication Skills**

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

### **Effective Use of Time and Resources**

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

### **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.

**Problem-Solving**

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

**Professionalism**

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

**Responsibility**

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

**Critical Thinking**

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

**Stress Management**

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

**Students MUST demonstrate acceptable professional behavior in all ten areas.**

Any unprofessional behavior determined by the faculty to be overt and egregious, illegal, and/or unethical may lead to automatic exclusion from the program.

In all other instances, if a student fails to demonstrate acceptable behavior while in classes, on campus, or during their clinical experiences, the student will receive a Professional Behavior Citation (PBC).

The PBC documentation will be completed by a faculty member and will be forwarded to the: Chair of the Physical Therapy Department, Chair of the Academic Review Board (ARB), the student, and the student's advisor. If the incident(s) occurs during a clinical experience the student's clinical instructor will contact the Director of Clinical Education who will work with the clinical instructor and the student in question to issue the citation. The PBC will be filed in the student's academic record. An initial PBC should serve as a warning to the student.

A second PBC may be issued for either additional unprofessional behaviors or for not demonstrating improvement in the professional behavior identified in the initial PBC. A second PBC will result in Professional Behavior Probation (See Section 2.8.6 and Section 2.8.8). A student who has been placed on Professional Behavior Probation will be discussed at the next scheduled faculty meeting to determine an appropriate course of action/ remediation for the student.

Additionally, student appearance and actions in the classroom, laboratory, and clinical settings must adhere to professional standards outlined in the American Physical Therapy Association's Code of Ethics: ([Click Here](#)), the Guide for Professional Conduct: ([Click Here](#)), as well as the Simmons' Honor Code (See Section 1.2.5 above).

## 2.5 Academic Honesty

A vital part of the collegiate experience at Simmons University, the Honor System, embodies values of personal integrity, responsibility, and trust. Fundamental to the Honor System is the Honor Code of Responsibility, and it is upon its principles that the College community has based the Simmons Standards of Conduct. The Simmons University Honor System has existed since 1907, making it one of the oldest continuing honor systems at any college in the country. Throughout the decades, the Honor System has been revised and amended; the most recent revisions were made in 1983. No changes, however, may be made without the endorsement of both faculty and students.

### 2.5.1 Honor Code of Responsibility

The students, faculty, and administrators of Simmons University agree to accept the following responsibilities:

- o Each member of the Simmons University community is responsible for maintaining a high level of integrity, honesty, and trust within the community.
- o Each student is responsible for presenting work of their own creation, and refraining from representing as their own work that which is not theirs.
- o Conduct in keeping with the policies outlined in this handbook and all other official College publications is expected of each member of the Simmons community.

The Honor Code of Responsibility is shared by the entire Simmons community. It implies that each segment has obligations based upon its specific function within the University. Each student is expected to read, understand, and observe the policies outlined in the Simmons University Statement on Cheating and Plagiarism below. Each student is expected to assume guardianship for the Honor System. To remind students of their personal responsibility under the Honor System, they must write the following pledge on all major examinations before testing begins:

SAMPLE Honor Pledge:

I shall neither give nor receive help during this examination.

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

Any student who violates the standards of the Honor System must accept the consequences of their behavior. Important to the integrity of this system is the pledge of each student not only to observe the Honor System, but also to try to ensure that others in the community also act honorably.

### 2.5.2 Faculty/Administrative Responsibility

At the beginning of every semester, each instructor is expected to clearly define and explain, the standards of conduct as they relate to cheating and plagiarism in their course. This should include, where appropriate, instruction in the proper use of footnotes, outside source material (including resources available on the Internet), quotations, etc. The instructor should also clarify their interpretation of individual work, and the extent to

which student collaboration and the use of outside assistance will be permitted on papers, laboratory reports, and in-class or take-home examinations. The instructor will use the Statement on Cheating and Plagiarism as a guide for constructing their definition.

Each instructor is asked to make conditions in class and examination rooms conducive to the best possible academic achievement of the students. To reinforce student responsibility under the Honor System, each instructor should remind students to write the Honor Pledge on all major examinations before testing begins. During an examination or quiz, the instructor should remain in the room at least long enough to answer questions regarding the examination. Instructors may remain in the room for the duration of the exam, and are especially encouraged to do so under the following conditions: at the request of the students, crowded classroom, or objective examinations (e.g., multiple-choice test items). Instructors should remind students that examinations may not be removed from the assigned examination classroom unless otherwise specified. Instructors should also indicate any time limits that apply and the procedure for returning the examination upon its completion. If an instructor decides not to remain in the classroom for the duration of the exam, the instructor should tell the class where they can be reached during the examination to answer questions.

Take-home examinations, when assigned, should not have a closed-book time format. The instructor should provide specific written instructions as to the use of source materials, time limitations, and the methods of returning the examination. The instructor should also indicate where and when they can be reached if further clarifications are necessary.

Each administrator is responsible for clarifying policies and procedures with respect to the function of their office in relation to the Honor System. Such clarification should appear in official University publications and on official forms distributed by the office.

### **2.5.3 Statement on Cheating and Plagiarism**

Cheating and plagiarism are major academic violations of the Honor Code of Responsibility. It is the responsibility of the instructor and students in a particular class to clarify specific applications of the Statement on Cheating and Plagiarism. Selling or distributing lecture notes, handouts, readers, or other information provided by an instructor, or using them for commercial purposes without the express permission of the instructor, is an academic violation and also violates the College's Honor Code.

Cheating is defined as the representation of someone else's work as another person's own. A partial list of examples follows:

- Copying another person's test, paper, or report.

- Collaborating, including

- a) working with another person or persons in execution of a test, report, or paper without authorization to do so; and
- b) discussing a test, report, or paper.

- Using crib notes, such as referring to notes brought into class for use during an examination without authorization to do so.

- Using books, class notes, or other source material during an examination

- without authorization to do so.
- Downloading information from the Internet and presenting it as one's own work and/or without proper attribution.
- Committing laboratory violations, except where collaboration is permitted or special regulations are made by the instructor, all work for which credit is sought must be performed by the individual student.
- The unauthorized use of old laboratory reports is a violation of the code. Where procedures are not clear, it is the responsibility of the student to confer with their instructor.
- Submitting the same paper, or substantial parts thereof, in more than one course, without the knowledge of the professor.
- Committing computer violations. Except where collaboration is permitted or special regulations are made by the instructor, all computer work for which credit is sought must be performed by the individual student.
- Tampering with, or unauthorized reading of, files belonging to other individuals are violations of the code. Where procedures are not clear, it is the responsibility of the student to confer with their instructor.
- Violating any other explicit regulation announced by the instructor and/or circulated in writing to each student at the beginning of the semester.

Plagiarizing is defined as intentionally or unintentionally using someone else's words or thoughts without giving proper credit. All work for which a source is not cited is assumed to be the sole product of the author, i.e., the student. This includes handing in as their own work a paper on which a student has received extensive aid with substance and/or structure, as well as using one paper for more than one course without authorization to do so. When using material from outside reading, reference material, etc., the student must indicate the source by using footnotes or citations. Direct quotations must be enclosed in quotation marks. The use of term papers or other work obtained from commercial or other services is a clear case of plagiarism and is specifically prohibited. Instructors are responsible for clarifying the specific application of the plagiarism definition within the context of their specific discipline.

## 2.6 Grading Policy

A student who achieves a grade of “B” or “Pass” in a Pass/Fail course in each course will be in good academic standing. In addition, the student must pass all safety items on practical examinations to achieve a passing grade on that exam and must achieve the passing grade on the practical, as identified in the course syllabus, to receive a passing grade for the course. Please refer to section 2.7 for information on practical examination policies and procedures.

When calculating the *final* course grade any numerical score 0.5 and above will be rounded to the next highest whole integer (example 82.5 will become an 83.)

Grading criteria used to establish your final grade for a course is as follows:  
Grades that maintain students' good academic standing:



A:	94-100	B+:	87-89
A-:	90-93	B:	83-86

Grades that put students' progression in the DPT program in jeopardy:

B-:	80-82	C:	73-76
C+:	77-79	C-:	70-72
F:	Below 70		

## 2.7 Practical Examination Policy

All practical exams will be graded according to a written grading rubric. The weight of the practical grade in the final course grade will be identified in the course syllabus. The passing grade of the practical will be identified in the course syllabus. Cognitive, psychomotor, and affective skills may be assessed on practical exams.

All practical examinations will include safety items that are graded as Pass/Fail. Safety items include but are not limited to: observing health and safety regulations, maintaining safe working environment; recognizing physiological and psychological changes in patients and adjusting treatment accordingly; demonstrating awareness of contraindications and precautions of treatment; requesting assistance when necessary; and using acceptable techniques for safe handling of patients, protecting welfare of self, patient, and others in emergency situations.

If a student fails any item related to safety (as identified on the practical grading form), the student automatically fails the practical exam.

At the conclusion of the practical examination, the student will be informed that they have failed to perform a safety item and must determine a plan to re-take the exam. In this case, a student may take a make-up practical exam scheduled at least 24 hours after the first exam and approved by the faculty member serving as course director.

If the lab practical safety items are performed appropriately in the second exam the student will earn no higher than the numerical score achieved on the first exam. If the lab practical safety items are not achieved in the second practical exam, the student will get a zero for the lab practical and cannot progress in the program (please see the section numbers 2.8. Academic Progression to understand the ramifications of this action.)

Students are responsible for understanding and complying with all aspects of each individual course syllabus regarding grading

## 2.8 Academic Progression

At the end of each semester, the faculty review academic, clinical, and professional performance of each student. Students who meet the following criteria will be considered in "good standing":

- Earn a grade of “B” or higher in all courses yielding a letter grade, or a “Pass” in Pass/Fail courses\*\*
- Demonstrate satisfactory professional behavior\*\*
- Achieve the required semester and cumulative GPA of 3.0.

\*\*If a student earns a “B-” or has incurred a Professional Behavior Citation in the semester prior to a full-time clinical education experience, the student will be considered in “good standing” and permitted to progress to the clinic if their semester and cumulative GPA is 3.0 or above.

### **2.8.1 Extension of Time to Complete a Course (Incomplete)**

A student may petition an instructor for an extension of time to complete a course. The final decision for extension of time to complete a course rests with the course instructor. The student must submit the extension of time form in compliance with the Simmons Office of the Registrar on or before the date grades are due each semester.

Students who become ill, have a medical emergency, a death in the immediate family, extreme hardship, or unusual circumstances may request an incomplete from the instructor. Students must be performing at a passing level to be considered. Forms must be filled out in consultation with the instructor and the Department Chair must review it. If approval is granted, the incomplete must be finished by the end of the following semester. If the course is not completed by this time frame the “I” grade will be converted to an “F” grade. International students must meet with the International Student Advisor in the Office of the Dean for Student Life to determine if such extensions will affect their visa status. A student who received merit funds (scholarship or assistantship) from CNBHS must contact the CNBHS Office of Admission since an “incomplete” course will impact funding.

### **2.8.2 Course Withdrawal**

A student may withdraw from a course with the permission of the course instructor and the Department Chair. Withdrawal from any course, however, will affect the student’s ability to progress with the student’s original cohort. The student will be placed on academic probation should the student be permitted to return to the program. Please refer to section 2.8.5. Academic Probation to understand the ramifications of this action.

To withdraw from the class after the official add/drop time period, the student must receive approval from their advisor and Department Chair. Students who perform poorly and are not making sufficient progress, and attempt to withdraw after the add/drop time period, will be given the grade that reflects their performance at the time of their withdrawal. Students who are receiving a passing grade at the time of the withdrawal will receive a Withdrawal (W) for the course.

Please refer to the Physical Therapy Clinical Education Manual for the withdrawal policy concerning clinical education experiences.

### 2.8.3 Repeating a Course

A matriculated student may be allowed to repeat one course, one time.

Repeating a course will affect the student's ability to progress with the student's original cohort. Repeating a course will likely affect the student's expected date of graduation. For courses that yield a letter grade, the student must achieve a grade of "B" or better for the repeated course and the two course grades (original and repeated grade) will be averaged in the calculation of the student's grade point average. For Pass/Fail courses, the student must achieve a grade of "pass." Students must pay for the repetition of the course at the full tuition rate.

### 2.8.4 Extension of Time for Degree Completion

Students may petition the Department Chair for an extension of degree completion - up to one year. Extensions beyond one year must be approved by the dean.

International students (those in possession of an F-1 visa) must provide confirmation that the extension is in compliance with U.S. immigration policy.

### 2.8.5 Probation

A student will be placed on Academic Probation if any one of the following applies:

- They earn a grade of "B-" in any course in the DPT curriculum requiring a grade of B or higher.
- Their grade point average (GPA) falls below a 3.0.
- Immediately following the issuance of a *second* Professional Behavior Citation (PBC)

At the end of each semester, when applicable, the Department Chair will provide written notification of probationary status to the student who has been placed on probation, as well as to the Dean of CNBHS, Office of the Registrar, Office of Student Financial Services, CNBHS Director of Admission, and the student's advisor. Notification will also be sent to the International Student Adviser for non-U.S. students, if applicable.

Probationary status will be noted on the student's transcript during the probation period and removed when the student is officially removed from probation.

### 2.8.6 Removal from Probation

A student will be removed from probation when they:

- Receive a grade of "B" or a "Pass" (in Pass/Fail course) in all courses during the semester in which the student was on probation **AND**
- Have a cumulative GPA greater than 3.0 at the end of the semester **OR**
- Complete the entire, following semester, after the issuance of a second PBC, without instance or cause for additional citation.

### 2.8.7 Unable to Progress with Cohort to Clinical

A student will **NOT** be able to progress to the Clinical Education component of the DPT program if they:

- Earn a B- in a course in a semester before a scheduled full-time clinical experience, such that the semester GPA falls below a 3.0 **AND/ OR**
- Have NOT successfully remediated a professional behavior citation.

If either of these situations occurs the student will *not* be considered in “good standing” and may not be able to progress to the clinical experience.

The student will need to re-take the course the next time it is offered and earn a grade of B or better or successfully remediate the probation in order to regain good academic standing and progress to the clinical experience.

### **2.8.8 Exclusion**

A student will be excluded from the program if any one of the following criteria applies:

- Earns a grade below a “B-” or a “Fail” (in a Pass/Fail course) in any course.
- Earns a grade of “B-” in more than one course in the same semester.
- Earns a grade below a “B” or a “Fail” (in a Pass/Fail course) in a repeated course
- GPA falls below a 3.0 for two consecutive semesters.
- Is on probation for two consecutive semesters.
- Is on probation for more than two semesters total.
- Is issued one Professional Behavior Citation that is determined by the faculty to be overt and egregious, illegal, and/or unethical.

## **2.9 Complaints and Appeal Process**

### **2.9.1 Professional Pathway for Resolving Academic Complaints**

It is important to have an understanding of how to professionally “deal with” issues that you will encounter in your everyday life. The following is the pathway that the DPT Faculty expects students will follow if they have a concern regarding didactic courses, professional behavior, clinical education, and all other aspects of the DPT program.

**Step 1:** Schedule a meeting with the faculty member who is most directly related to your specific issue; do NOT try to discuss your concern “on-the-fly”. This could be a Tutorial Leader, Lab Assistant, Course Instructor, Clinical Instructor, etc.

Come to the *scheduled* meeting prepared to thoroughly and objectively explain the concern. A plan will be developed or a decision will be made that will involve a satisfactory resolution, an unsatisfactory resolution, or determination that more information is required. Give the course instructor enough time to carry out the plan. If you are not satisfied with the answer or response, you would next meet with your Academic Advisor. Be sure to tell the course instructor that you plan to meet with your Academic Advisor as this is considered a professional courtesy.

**Step 2:** Schedule a meeting with your Academic Advisor; Follow the same guidelines as stated above.

Step 3: Schedule a meeting with your DPT program Chair; Follow the same guidelines as stated above.

Beyond these steps, the Simmons University policies should be followed. If you have any questions about this process, discuss questions with your academic advisor.

**NOTE:** The student should always be the person making these requests and following through with the process and pathway. Friends and family members may offer advice, guidance, and support and the student should direct the process as this is part of professional responsibility.

### 2.9.2 Appeal of Student Status

The student has the right to appeal any decision. The student should schedule a meeting with their advisor to discuss the appeal process. All appeals are heard by the CNBHS Appeals Committee of the college. All DPT student appeals will follow this process.

#### **CNBHS Appeals Committee**

The CNBHS Appeals Committee considers formal written requests from students who are seeking an exception to program or CNBHS policies. The appeal must be submitted to the Associate Dean for Student Affairs within the time frame for the particular appeal:

<b>Policy Being Appealed</b>	<b>Timeframe for Appeal</b>
Program Exclusion	30 days
Grade Appeals Denied by Chair	5 days
Other Appeals	14 days

A student may seek an exception to a policy or appeal a decision if:

- There is new information that could influence outcome
- The student views the original decision as a disproportionate response
- The student believes that the policies were administered unfairly

The CNBHS Appeals Committee is comprised of Program Chairs from each department (or their designee), Associate Dean for Student Affairs, the Director of the Dotson Bridge and Mentoring Program and an at-large-faculty member appointed by the Dean for a two year term. The Assistant Dean shall be an ex officio member of the committee. The Committee has regularly scheduled meetings throughout the academic year.

Process:

- Written request submitted by student to the Associate Dean of Student Affairs. Students are strongly encouraged to consult with their faculty advisor in preparing their appeal form and planning for their appearance in front of the CNBHS Appeals Committee.
- Associate Dean will place the students appeal for consideration at the next available CNBHS Appeals Committee meeting. The Committee will make reasonable effort to consider appeals in a timely manner.
- Prior to meeting with the student, committee may choose to consult with faculty or others involved in the case.
- Student will be invited to appear at CNBHS Appeals Committee meeting where their case is being heard. Students are allowed to have their faculty advisor only attend the meeting with them if they choose.
- Student will be notified in writing of the Committee's decision within 10 business days of the meeting at which their appeal is heard. Notification of the decision will also be sent to the CNBHS Dean and the Department Chair.
- In the event that the Appeals Committee grants an exception to a policy, the matter will be referred back to the department responsible for determining how to implement an appropriate plan for student progress.
- The CNBHS Dean will be the final arbiter.

## **2.10 Changes to DPT Student Handbook**

All substantive changes to the DPT Student Handbook are voted on by the Core Faculty of the DPT program. Edits are recorded on the final page and are generally performed by the Chair of the Physical Therapy Department.

The DPT Student Handbook is a working document. Students will be notified by email of any changes that are voted on by the faculty and therefore made to the Handbook. As a result, the most current version of the handbook will supersede all previous versions.

### **SECTION III: APPENDICES**

#### **Appendix A. Student Consent Form for Lab/Classroom Demonstrations**

As a Doctor of Physical Therapy (DPT) student, you must learn to treat a variety of conditions as well as participate in health promotion. Your learning in the Simmons University DPT program entails the dissection of donor cadaver bodies in addition to other largely 'hands-on' learning experiences that require using machinery and thermal agents. In order to ensure your learning, you will be asked to practice these various hands-on skills and safely use various pieces of equipment. These skills will be practiced on you by other students in your class who have varying levels of competency, as well as by you on other students.

These are examples of types of activities students may perform that have associated risks:

Manual techniques may involve palpation for anatomical structures, resistance to muscle contraction, stretching of anatomical structures, mobilization of joint structures, assistive exercises, positioning, mobility and transfer techniques, and other active body movements such as gait training, stair climbing and use of motorized treadmill.

Laboratory activities may include use of machinery and other thermal agents as well as mechanical traction, therapeutic electrical stimulation devices, hot packs, ice, ultrasound, infrared, ultraviolet light and others.

In human gross anatomy, you will use sharp scalpels and bone saws to complete the dissection.

The following potential risks are rare but possible:

In having the above manual techniques practiced on you, or in performing the techniques on other students, you may experience muscle soreness, strain, sprains, tearing of connective tissue, syncope, or falls and their sequelae.

In having electrical and thermal agents applied to you, you may experience slight electrical shocks, burns or frostbite.

In the dissection labs, you may cut yourself with the scalpel.

At times students may choose to practice lab techniques outside of scheduled class times and faculty will not be supervising the activities. This situation may increase the chance of the risks outlined above.

The following benefits are likely:

In practicing the skills required of a licensed physical therapist in a supportive and educational setting, you will be prepared to effectively, efficiently and safely treat patients before you actually encounter them on your clinical affiliations or in the employment setting.

In having the skills practiced on you, you will gain an appreciation of the experiences of actual patients. You will bring this experience to bear in making adjustments and modifications to your treatments.

Methods used to reduce the potential risks:

In all scheduled learning formats and environments you will have faculty members as

teachers and facilitators to instruct you and correct you in the required skills. Their instruction will include the precautions, contraindications and safe application of the techniques they will teach you.

In all cases, the environment of any lab will be controlled to minimize the harmful effects of chemical substances and faculty will indicate the appropriate use of any protective equipment, including gloves and eyewear. Faculty will be aware of and carry out any necessary emergency procedures.

You will be asked to refrain from practicing techniques on anyone who has an actual problem or condition for which physical therapy may be a recommended treatment.

You will be asked to communicate any conditions that you may have which may increase the risks described above or prevent you from fully participating as a provider or receiver of the activities that are part of your student experience during any point in your course work.

**Student's rights:**

You may refuse to be the subject or to practice in any situation in which you feel you will not be safe or which violates an important religious tenet. For example, you may know that you have a condition such as an excessively mobile or unstable joint, Raynaud's or spondylolisthesis that precludes being the subject for a certain technique.

It is critical that you report any known health conditions and/or past medical history to your faculty members in case you are unsure of potential risks.

If you feel the environment is unsafe, you may request that the faculty member make modifications that will improve the safety of the environment.

The student must be able to demonstrate competency in the area of the curriculum with reasonable accommodation and the student must be able to participate in some aspects of the course/lab to successfully complete the program.

I understand my responsibilities and the potential risks and agree to participate in learning experiences as outlined above. I also understand my right to refuse to participate in any situation in which I feel I am not safe, my health is jeopardized, or my religious beliefs are compromised. I have the following conditions which I believe may place me at increased risk for performing or receiving the various techniques performed during the student experience.

---

---

Signature: \_\_\_\_\_  
Name (Print): \_\_\_\_\_

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

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

Please return a signed copy of this form to the Physical Therapy Office to be placed in your file. If you have concerns or potential risks, please list them below.



**Appendix B. Essential Functions for Physical Therapy Students**

**SIMMONS UNIVERSITY DOCTOR OF PHYSICAL THERAPY PROGRAM**

**ABOUT THIS FORM:**

Simmons University physical therapy students who have experienced significant injury or illness are required to undergo a medical clearance process before returning to the clinical setting (including classroom/lab experiences). Because of safety concerns for students and their patients following any illness or injury, we request that the student review this form with their medical provider.

Student name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Health provider completing this form: \_\_\_\_\_

Provider's phone: \_\_\_\_\_ Date of most recent exam: \_\_\_\_\_

Please review this form in its entirety, sign each page in the bottom right, and complete the final page. Completed forms should be returned to Simmons University Office of Accessibility Services (fax: (617) 521-3079). For questions about this form, please call (617) 521-2474.

**ESSENTIAL FUNCTIONS DEFINITION:**

Essential functions refer to the responsibilities of a job that are of major importance and which, if eliminated, from the position would substantially change the nature of the job.

The purpose of this document is to describe, in detail, the specific expected essential functions that physical therapy students perform as they care for patients during clinical learning experiences. If a student cannot perform the essential functions, they must speak with Accessibility Services.

**ESSENTIAL FUNCTIONS SUMMARY:**

Students must demonstrate good judgment, complete all responsibilities related to coursework and the clinical care of patients and families. They must be respectful in all communications with patients, families, faculty, staff, peers and clinical staff and be able to maintain professional relationships that are mature, sensitive, and effective under highly stressful, unpredictable, and rapidly changing circumstances. Students must have the ability to communicate and exchange clinical information effectively, accurately, and in a timely manner. Student must be open to feedback and able to incorporate faculty and staff recommendations in the care of patients. Students must be able to offer care and communicate effectively in diverse settings with all patient populations and must be able to demonstrate empathy and caring for others and act with integrity in all situations.

Under the supervision of a licensed physical therapist, the student physical therapist has responsibility for direct patient care for those assigned individuals during a scheduled shift. A shift varies in duration from 4 to 12 hours and may be during the day, night or weekend. Student physical therapists are also responsible for communicating with families, caregivers, and other staff be it written, verbal electronic or other media in relation to their assignment. Duties may require sitting, standing, walking, lifting, bending, twisting, squatting, carrying, pushing, pulling, reaching, writing, typing, pinching, gripping, manual dexterity, visual acuity, hearing, and touch.

ESSENTIAL FUNCTIONS / STUDENTS MUST HAVE THE ABILITY TO:

**Cognitive**

The student must be able to thoroughly, efficiently and reliably:

- Recall information from reading material, lecture, discussion, patient evaluation;
- Interpret and extrapolate information from reading material, lecture, discussion, patient evaluation;
- Apply information from reading material, lecture, discussion, patient evaluation;
- Analyze information from reading material, lecture, discussion, patient evaluation;
- Synthesize information from reading material, lecture, discussion, patient evaluation;
- Evaluate or form judgments about information from reading material, lecture, discussion, patient evaluation.

**Affective**

The student must be able to:

- Establish professional, trusting, empathetic relationships with a variety of individuals;
- Demonstrate respect and engage in non-judgmental interactions regardless of individuals' life-styles and cultures;
- Accomplish work effectively in groups;
- Meet externally determined deadlines;
- Be present at required activities in classroom, lab and clinical settings;
- Attend to cognitive, communication and psychomotor tasks for as long as three hours at a time.

**Communication**

Particularly in a laboratory or clinical course, the student must be able to:

- Hear the spoken word
- Attend selectively and in a controlled manner to various types of communication, including the spoken and written word and non-verbal communication
- Speak intelligibly in English
- Communicate in writing, intelligibly in English
- Relay information in oral and written forms reliably, thoroughly and intelligibly to individuals and groups
- Read English (typed and hand-written)

## Psychomotor

Particularly in a laboratory or clinical course, the student must be able to:

- Reliably inspect and observe the skin, facial expression, anatomical structures, posture, and movement of others, typically by sight;
- Assess blood pressure, lung and heart sounds, typically by listening with a stethoscope;
- Reliably read equipment dials and monitors, typically by sight;
- Feel pulses, skin condition, muscle and tendon activity, joint and limb movement, typically with hands and fingers;
- Negotiate level, ramps and stairs to assist patients/classmates appropriately, typically from an upright position;
- Lead patients/classmates through a variety of examinations and treatments typically requiring sitting, standing, squatting and kneeling on the floor or treatment table;
- Move from one surface level to another (e.g. floor to stand, stand onto treatment table);
- Exert moderate resistance to limb and body movements of patients/classmates while maintaining own balance in a variety of positions, typically including standing, sitting, squatting and kneeling;
- React and effectively respond quickly to sudden or unexpected movements of patients/classmates;
- Manipulate dials, knobs, electrodes and other small to large parts and pieces of equipment typically with the hands/fingers;
- Lift at least 75 pounds in order to move dependent patients/classmates;
- Move continuously throughout an 8 to 10 hour work day;
- Transport self from one room to another, from one floor to another;

I have reviewed the Essential Functions for Simmons University Physical Therapy Students outlined above. Based on my recent exam and my knowledge of \_\_\_\_\_, I recommend:

- Clear student to return to clinical setting (including classroom/lab experiences), effective \_\_\_/\_\_\_/\_\_\_ without any restrictions
- Student not return to clinical setting (including classroom/lab experiences) at this time and be re- evaluated on \_\_\_/\_\_\_/\_\_\_
- Student return to clinical setting (including classroom/lab experiences), effective \_\_\_/\_\_\_/\_\_\_ with the following restrictions:

Please give specific details regarding limits and length of time (For Example: weight lifting restriction of 20 lbs until 6/30/14)
---

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

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

Provider Printed Name: \_\_\_\_\_

## **Appendix C. Clinical Education Manual**

### **Introduction to Clinical Education**

#### *Philosophy of Clinical Education*

We recognize that clinical education is an integral component of a student's physical therapy education and we value our relationships with clinical faculty. We are committed to continuous quality improvement and working collaboratively with clinical faculty to improve the quality of our program. It is only through the clinical education community that we are able to meet our goals of producing excellent practitioners, life-long learners, and leaders in the health care community.

Clinical education experiences are designed to provide students with opportunities for professional role modeling, observation, patient care, and teaching in a wide variety of settings. Clinical experiences are planned to coincide with coursework and the students' level of experience. Learning objectives for each experience address the practice expectations identified in the Normative Model for Physical Therapist Education: Version 2004.

As students progress through the clinical education program they will be expected to manage increasingly complex patients with an increased level of independence. Students completing the physical therapy program will be expected to practice at the entry-level.

## ***Clinical Education Terminology***

### **Director of Clinical Education (DCE)**

The physical therapy faculty member, who develop, organize, supervise, coordinate, and evaluate the clinical education component of the physical therapy curriculum.

### **Site Coordinator of Clinical Education (SCCE)**

The physical therapist employed and designated by the clinical education site to organize, direct, supervise, coordinate and evaluate the clinical education program in that facility.

### **Clinical Instructor (CI)**

The physical therapist employed by the clinical education facility who is designated by the CCCE to supervise and evaluate the performance of physical therapy students.

### **Clinical Education Facility (CEF)**

An accredited or approved health care facility that provides physical therapy students with learning experiences and patient access for the development of professional competencies.

### **Clinical Education Contract**

The written, legal document which defines the agreement developed between the academic facility and the clinical education facility. It outlines the rights and responsibilities of all parties.

### **Clinical Site Information Form (CSIF)**

An APTA document which is completed by the CCCE providing information about such things as patient service areas, number of beds, background of staff members, etc. as well as pertinent student information such as availability of housing, work hours etc.

### **Clinical Performance Instrument (CPI)**

The on-line evaluation tool developed but the APTA. It is completed by the student and the CI at mid-term and final of the full time clinical experiences.

### **Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction (PTSE)**

An APTA document completed by the student at the end of each full-time clinical experience. This provides valuable feedback to the academic program and future students about the quality of their clinical education experience.

## ***Rights and Responsibilities of Clinical Faculty***

### **Rights and Privileges of Clinical Faculty**

- The CCCE has the right to schedule student clinicals so that patient care is not adversely affected
- Clinical Instructors have the right to value the quality of patient management over student learning
- Clinical faculty should expect prompt and effective communication with the Director of Clinical Education (DCE)
- Clinical faculty may refuse to allow students who are unsafe or incompetent to participate in clinical education at their site
- Clinical faculty should expect that students assigned to their site have been adequately academically prepared to meet the expectations set for the experience
- Clinical faculty have the right to expect that students will demonstrate the qualities of adult learners and contribute in a positive way.

### **Responsibilities of the Site Coordinator of Clinical Education**

- Coordinating the assignments and activities of students in a way that is consistent with the PT Program's curriculum
- Demonstrating ethical and legal behavior
- Communicating with the CI, student and DCE in an effective manner
- Reading all materials relating to the PT program and seeking clarification where necessary
- Monitoring the performance of clinical instructors
- Distributing all forms and information sent by the DCE to the student and clinical instructor

### **Responsibilities of Clinical Instructors**

- Holding a valid PT license and having at least 12 months of clinical experience
- Valuing the use of evidence in practice and encouraging the student to use critical inquiry effectively
- Demonstrating clinical competence and legal and ethical behavior
- Communicating with the student and DCE in an effective manner
- Modeling behaviors that are consistent with the PT program's values and philosophy (Clinical Education Faculty Manual).
- Collaborating with students to plan learning experiences that fall within the student's scope of knowledge and skill
- Reading all materials provided relating to the PT Program and seeking clarification where necessary
- Providing effective direct supervision for assigned students
- Providing effective and timely feedback regarding student performance
- Correctly completing the CPI at midterm and the end of each full time clinical practicum
- Submitting all forms/evaluations requested by the program
- Encouraging the student to self-assess

### **Responsibilities of the DCE**

The DCE is the course instructor for all full time practicum courses and awards the course grade. The DCE is responsible for planning, coordinating, facilitating, administering, evaluating and monitoring each student's performance during the course. The DCE serves as a liaison between the physical therapy program and clinical education sites. In cooperation with other academic faculty, the DCE establishes clinical education standards, selects and evaluates clinical education sites, and maintains communication among all parties.

### **Responsibilities include but are not limited to the following:**

- Developing, conducting, coordinating, and evaluating the clinical education program.
- Communicating necessary information about the clinical education program to core faculty, clinical education sites, clinical education faculty, and students and facilitating communication about clinical education among these groups as needed.
- Determining if the academic regulations, policies and procedures related to clinical education are upheld by core faculty, student, and clinical education faculty and taking appropriate corrective actions, when necessary.
- Using information provided by the clinical education faculty and other information as needed to assess student learning in clinical education experiences and assign a course grade.
- Determining if the clinical education faculty and sites are meeting the needs of the program.
- Assessing the performance of clinical instructors who supervise students during full time clinical experiences
- Establishing new clinical education sites
- In cooperation with other core faculty, determining each student's readiness to engage in clinical education, including review of performance deficits and unsafe practices of the student.

### ***Preparing for Full-Time Clinical Education Experiences***

#### **Developing Professional Behaviors**

Assessment and development of professional behaviors begins with the student's first semester in the physical therapy program. Ongoing assessment of professional behaviors is accomplished by means of completion and review of the Professional Development Plan and Student Data Form. This process facilitates self-assessment by the student, faculty assessment, and development of individualized plans for student improvement. Tutorial assessments utilized in problem-based learning courses, and practical examinations utilized in clinical courses each include a component on professional behaviors, based upon the Abilities Based criteria.

#### **Integrated Clinical Experiences (ICEs)**

Integrated clinical experiences are planned to coincide with the clinical science coursework throughout the curriculum. The experiences are selected to provide

students with opportunities for clinical observation and developing skills in dealing with patients throughout the lifespan and in a variety of settings along the continuum of care.

Students begin their introduction and socialization to the clinical setting in their first fall semester with a focus on outpatient orthopedics or home care. During the spring semester, students will continue their focus on developing skills in management of patients with primarily musculoskeletal impairments. Students will then complete a twelve week full-time clinical experience in the summer of the second year at an outpatient musculoskeletal based clinic to build-off of their year one academic and clinical skills. Integrated clinical experiences resume in the fall of their second year and focus on medically acute patients. The student's final ICE experience will be in either the spring or summer of their second year with a focus on patients neuromuscular impairments, pediatrics or pelvic health.

### **Professional Seminar / Clinical Education Seminars**

Students participate in clinical education seminars beginning in the fall of their first year and continue throughout the curriculum. These classes are designed to be interactive, and to inform the student about the process of clinical education. A key concept is to prepare the student to be an active participant in their own clinical education program.

Discussions in Clinical Education Seminars examine the teaching and learning process in the clinical setting. Topics include introduction to the clinical setting, designing a plan for clinical education, the placement process, effective communication, effective use of feedback, introduction to the Clinical Performance Instrument (CPI), professional behaviors, and expectations for student performance. A panel of students who have completed a full-time clinical education course share their experiences and Center Coordinators of Clinical Education (CCCE) with those preparing to embark on clinical experiences, offering suggestions for preparation and success, as well as conducting a question/answer session.

Students are expected to assume responsibility for self-assessment, developing realistic goals and strategies for continuous professional learning and development. Students are introduced to the concept of developing behavioral objectives and strategies to improve performance. Case examples are utilized to assist students in recognizing and managing problem situations. Students apply the concepts of self-assessment and planning their learning during musculoskeletal ICEs.



### **Full Time Clinical Learning Experiences**

Students will complete three (3) twelve week full-time clinical learning experiences within the three years of study. Students will be evaluated utilizing the APTA's Online Clinical Performance Instrument (CPI) while on clinical learning experiences. Clinical Education course objectives were developed to match the Clinical Performance Instrument and the Normative Model for Physical Therapist Education.

The first full-time clinical experience (DPT 701) will take place in the summer of the second year after students have completed their clinical courses in musculoskeletal and cardiopulmonary care. The experience is 12 weeks in length and should provide an opportunity for students to effectively manage noncomplex patients, and increasingly more complex cases as the experience progresses.

Students return to campus to complete their final year of academic preparation, and then begin their terminal clinical education experiences (DPT 792 and 793). After the completion of DPT 793, students will return to Simmons for graduation. Students will participate in Simmons University Commencement ceremony and receive their diploma in May.

### ***Requirements for Clinical Education Experiences***

The student will be required to participate in three different clinical experiences (varying types of practice settings and types of diagnoses/impairments). The Commission on Accreditation in Physical Therapy Education (CAPTE), our accrediting agency, requires us to demonstrate that each student has practiced in a variety of settings. An individual may repeat a placement in outpatient (OP), but it would need to be with a totally different population of patients (i.e. General orthopedics/ pediatrics/ women's health/ day rehab). Note: sports medicine and orthopedics are not sufficiently different.

**The student will need to plan to travel for one or more clinical experiences, travel means, pick up your belongings and move, or drive out of state (NH, RI, etc.) or outside the 495 corridor.** In the end, not everyone will travel, but when engaged in final placements, if multiple individuals all want one facility in Boston, preference will be given to those individuals who have already traveled. In general, most students do travel once, whether they move or drive.

- Students are responsible for their own transportation and housing. You will not be reimbursed for expenses. A car may be necessary.
- Students may need to commute up to 75 miles one way and more than 90 min each way to a clinical education facility.
- Selection of your clinical site should be based on optimal education needs and experiences, not personal or recreational travel.

The student should plan for one of the clinical experiences to provide services to patients that require an inpatient level of care. This may be accomplished in a number of settings: acute care, transitional care, rehab, skilled nursing, home care and some pediatric settings.

One of the student's rotations must include an opportunity to work in a team-oriented environment. This may be accomplished in home care, rehab, occupational health, transitional care, skilled nursing, most pediatric and certain other specialized settings. The student's role in the inpatient setting will vary by facility, but in most instances will meet this requirement.

### ***Clinical Education Experience Descriptions***

Clinical education experiences are integrated with the didactic portion of the curriculum as an integral part of the Frameworks courses: DPT 672, DPT 673, DPT 772, DPT 783 and DPT 784. Each student will have (4) Integrated Clinical Experiences (ICEs) for 1 day per week for 4-5 weeks depending on the semester. During the professional program, students will also have three full-time clinical education experiences for a total of 36 weeks of full-time clinical education.

### **DPT 701 Clinical Learning Experience I (5.00 cr.) Year 2 Summer**

Students apply knowledge and skills in patient/client management in a health care setting and learn to address the physical therapy needs of actual patients and clients under the supervision of a physical therapist. The experience requires students to be in the clinical setting for approximately 40 hours per week for 12 weeks. (5 credits)

### **DPT 792 Clinical Learning Experience II (5.00 cr.) Year 3 Fall**

Students apply knowledge and skills in patient/client management in a health care setting, and learn to address the physical therapy needs of actual patients and clients under the supervision of a physical therapist. The experience requires students to be in the clinical setting for approximately 40 hours per week for 12 weeks. (5 credits)

### **DPT 793 Clinical Learning Experience III (5.00 cr.) Year 3 Spring**

Students apply knowledge and skills in patient/client management in a health care setting, and learn to address the physical therapy needs of actual patients and clients under the supervision of a physical therapist. The experience requires students to be in the clinical setting for approximately 40 hours per week for 12 weeks. (5 credits)

## **General Policies and Procedures**

### ***Policy on Essential Functions & Reasonable Accommodations***

All educational programs at Simmons University, including those of the College of Natural, Behavioral, and Health Sciences, are dedicated to principles of nondiscrimination. This includes a commitment not to discriminate against qualified disabled applicants and students.

As part of its effort to ensure that qualified disabled students are given the opportunity to participate fully in the graduate programs, the College of Natural, Behavioral, and Health Sciences has outlined here the essential functions of students in its programs. To be qualified to participate in and complete the programs, students must be able to perform these essential functions. The programs will provide qualified disabled students with reasonable accommodations that are necessary to enable them to meet the technical standards required of them.

Consistent with the varied nature of the College's programs, the essential functions vary to some degree from one to another. All programs require the cognitive, affective and communication functions outlined below. The programs in Primary Health Care Nursing and Physical Therapy also require the psychomotor functions. The nature of the nursing and physical therapy professions requires students to participate in clinical and laboratory course work that is at times physically demanding and requires certain physical strength, agility, endurance, perceptual skills and other attributes. The essential psychomotor functions, therefore, include descriptions of such physical demands. In some circumstances, the manner in which functions are typically performed is identified for illustrative purposes. If a student cannot perform the function in the manner indicated, he or she will not necessarily be precluded from participating in the program, but will need to be able to perform the essential functions with or without reasonable accommodation. See Essential Functions Form.

### ***Policy on Criminal Background Investigations***

Every student entering the Doctor of Physical Therapy program will be required to undergo a criminal background investigation within the first month of beginning the program at Simmons DPT Program. Criminal background checks provide Criminal Offender Record Information and are commonly referred to as CORI checks. Some facilities require additional background checks (i.e. CORI) and/or drug tests, particularly those facilities focusing on care of vulnerable populations.

Most clinical facilities require the student to provide evidence that a CORI check was conducted within a specific period; others may require students to submit to additional criminal background checks conducted by the clinical facility. A student with prior criminal convictions will be subject to annual CORI checks at their own expense throughout the duration of the program. In addition, students will be advised that a criminal conviction may preclude them from attaining licensure and may limit the availability of clinical learning experiences in some facilities.

- I. CORI checks will only be conducted as authorized by the State of Massachusetts Criminal History Systems Board (CHSB). DPT applicants and students will be notified before a CORI check will be conducted. If requested, the applicant will be provided with a copy of the CORI policy.
- II. An informed review of a criminal record requires adequate training. Accordingly, all personnel authorized to review CORI in the decision-making process will be thoroughly familiar with the education materials made available by CHSB.

- III. Unless otherwise provided by law, a criminal record will not automatically disqualify an applicant. Rather, determinations of suitability based on CORI checks will be made consistent with this policy and any applicable law or regulations.
- IV. If a criminal record is received from CHSB, the authorized individual will closely compare the record provided by CHSB with the information on the CORI request form and any other identifying information provided by the applicant, to ensure the record relates to the applicant.
- V. If Simmons University is inclined to make an adverse decision based on the results of the CORI check, the student will be notified immediately. The student shall be provided with a copy of the criminal record and the organization's CORI policy, advised of the part(s) of the record that make the individual unsuitable for the position or license, and given an opportunity to dispute the accuracy and relevance of the CORI record.
- VI. Applicants challenging the accuracy of the policy shall be provided a copy of CHSB's ***Information Concerning the Process in Correcting a Criminal Record***. If the CORI record provided does not exactly match the identification information provided by the applicant, Simmons University will make a determination based on a comparison of the CORI record and documents provided by the applicant. Simmons University may contact CHSB and request a detailed search consistent with CHSB policy.
- VII. If Simmons University reasonably believes the record belongs to the applicant and is accurate, based on the information as provided in section IV on this policy, then the determination of suitability for the position or license will be made. Unless otherwise provided by law, factors considered in determining suitability may include, but not limited to the following:
  - a) Relevance of the crime to the position sought;
  - b) The nature of the work to be performed;
  - c) Time since the conviction;
  - d) Age of the candidate at the time of the offense;
  - e) Seriousness and specific circumstances of the offense;
  - f) The number of offenses;
  - g) Whether the applicant has pending charges;
  - h) Any relevant evidence of rehabilitation or lack thereof;
  - i) Any other relevant information, including information submitted by the candidate or requested by the hiring authority.
- VIII. Simmons University will notify the student of the decision and the basis of the decision in a timely manner.

### ***Attendance Policy***

Students can anticipate being scheduled for a forty-hour work week while on their clinical experience. Although scheduled for forty hours, students should anticipate spending more than forty hours at the clinic in order to complete their work. If a student becomes ill, they are required to notify the DCE and the Clinical Instructor (CI) prior to the start of the day. If the student is sent home from the clinical facility for any reason, 47

the student must notify the DCE immediately. Failure to do so may result in failure of the Clinical Education course. Students should ask the CI what the facility's policy is for notification. Students will need to make up any time missed. This time must be negotiated and approved by both the Center Coordinator of Clinical Education (CCCE) and Director of Clinical Education (DCE). Only the CE office can request student time off. Excused time off is at the discretion of the DCE and the CCCE.

Students are expected to attend each day scheduled by the clinical facility; including weekends and days that Simmons University may be closed due to a holiday or inclement weather.

### ***Weather Policy***

Students are expected to attend each day scheduled by the clinical facility, including days that Simmons University may be closed due to a holiday or inclement weather.

You are expected to go to your assigned clinical placement unless your CI advises you otherwise. However, please take personal safety into consideration. If you arrive late, there is no makeup expected. If you do not feel you can safely make it in, then these missed hours must be made up. Enjoy the snow and be safe!

### ***CPR/First Aid***

Students are required to maintain evidence of CPR certification for the Healthcare Professional. Proof of this certification must be submitted to CNBHS Clinical Education Administrator by the announced deadline and as recertification is needed. It is the responsibility of the student to determine if First Aid Certification is required for their clinical placement. The student can obtain this information in the CSIFs on file or from the CCCE 12 weeks prior to their start date. Failure to show evidence of current CPR certification for the Healthcare Professional will preclude a student from participating in clinical education. Students should track their renewal dates to avoid any interruptions. Students should be prepared to provide evidence of compliance to facilities in advance of start dates.

### ***Health Eligibility***

Medical certification of adequate immunization to polio, measles, mumps, rubella, varicella, tetanus and diphtheria as required by Chapter 76, Section 15c of the General laws of Massachusetts, 1985, is required prior to initiating clinical experiences in most facilities. Titers will be required as proof of immunization against rubella, varicella, and hepatitis B. A Negative Tuberculosis Test (PPD or Mantoux) will be required prior to beginning a clinical experience (varies by site from one to twelve months). Yearly TB test required; if lapse 1 day, then 2-step TB needed. Additional immunizations and/or a flu shot may be required by some facilities.

Students will not be allowed to begin a clinical experience without completing the required immunizations. Most facilities will not accommodate rescheduling a clinical experience due to the student's procrastination in pursuing adequate immunization and medical clearance. (See above policy on Technical Standards and Essential Functions for medical clearance details.)

### ***Proof of Medical Insurance Policy***

Students are required by the state and facility contract, to provide evidence of medical insurance. Student may need to submit evidence to the facility in advance of the student's arrival.

### ***Registration/ Proof of Payment Policy***

Students are covered under the Simmons professional liability policy once they have registered and paid for the clinical education course. All contracts stipulate that students must be covered by a liability policy therefore students will not be allowed in the clinic until their account is cleared.

## **Clinical Placement Policies and Process**

### ***Time Table and Calendar***

***Subject to change depending upon clinical placement availability.***

The Simmons University DPT program conforms to the APTA national March 1 mailing date to contact all clinical partners to solicit clinical education experiences for the following year. Upon receiving clinical placement opportunities, a list is generated. Students will be given this list of the available clinical placements and asked to select 8. The student will be asked for their written rationale of why these 8 selections are being sought. The DCE will review these selections complete with rationales and make placement assignments according to DCE insight, faculty input, student choices, available sites, and programmatic needs. The number/rank of your placement out of your preference list for one placement will not be considered when looking at future placements. **It is not guaranteed that students will be placed at sites on their preference lists.**

Students can request the DCE to investigate one new clinical placement site for each of the three clinical experiences. New sites must be within a metropolitan area. Students will need to research the potential site and submit the site's contact information to the DCE. Students, who request a new site and are placed there, must go to that site. **Students are not permitted to solicit for clinical site placements- any student who does so will automatically forfeit their right to the placement. Requesting a new contract does not guarantee that site will be available.**

Ideally the clinical placement timeline is as follows: Year 2 student placements for DPT 701 are completed by January, the year of the placement. Year 3 student placements for DPT 792 and DPT 793 are completed in the summer prior to those experiences.

**Declining a clinical placement is not an option as it will affect the student's ability to graduate on time.**

If a site has accommodated a Simmons student in the past, it does not ensure placement in the future. If the site has offered a placement in the past and offers a placement during

this timeframe, then the entire class will have access to selecting such a placement.

It is highly recommended that students monitor their Simmons email daily to avoid missing announcements about the clinical selection process.

Students who are not in compliance with paperwork requirements (i.e. medical clearance and immunization records, CPR card on file, etc.) or are not in good academic standing will not be considered for a clinical placement.

**Placement opportunities are limited and subject to clinic availability. Housing, transportation and financial circumstances will not be considered in the placement process. Students with any of these limitations will experience further limitation with their placement options and may affect the student's ability to graduate on time.**

### **February 1<sup>st</sup>**

- New contract requests for DPT 792 and DPT 793 placements are due.

### **March 1<sup>st</sup>**

- National Mailing Date - all sites that have contracted with Simmons in the past are solicited for placement opportunities the following year.

### **Mid-March**

- A list of the available DPT 792 clinical placement opportunities for the following year will be posted on Moodle.
- Students will be notified via email to their Simmons email account to inform them that this list is posted. The students are responsible for monitoring their Simmons email account.
- Students will be given ~10 days to review the list and submit their top 8 selections, with a rationale for each selection, for a DPT 792 clinical placement.
- If a student has requested a new site but it has not yet been confirmed by the time the list is due, students must complete and submit a list.
- Students who do not receive any of their 8 selections will be asked to review the list of remaining DPT 792 clinical placement opportunities and submit a new list with 8 selections, with a rationale for each selection.

### **June**

- A list of the available DPT 793 clinical placement opportunities for the following year will be posted on Moodle.
- Students will be notified via email to their Simmons email account to inform them that this list is posted. The students are responsible for monitoring their Simmons email account.
- Students will be given ~10 days to review the list and submit their top 8 selections, with a rationale for each selection, for a DPT 793 clinical placement.
- If a student has requested a new site but it has not yet been confirmed by the time the list is due, students must complete and submit a list.

- Students who do not receive any of their 8 selections will be asked to review the list of remaining DPT 793 clinical placement opportunities and submit a new list with 5 selections, with a rationale for each selection.
- Students will be notified of their DPT 793 clinical placement for the following year.

### **July**

- Students will be notified of their DPT 793 clinical placement for the following year.

### **October/November**

- A list of the available DPT 701 clinical placement opportunities for the following year will be posted on Moodle.
- Students will be notified via email to their Simmons email account to inform them that this list is posted. The students are responsible for monitoring their Simmons email account.
- Students will be given ~10 days to review the list and submit their top 8 selections, with a rationale for each selection, for a DPT 701 clinical placement.
- If a student has requested a new site but it has not yet been confirmed by the time the list is due, students must complete and submit a list.
- Students who do not receive any of their 8 selections will be asked to review the list of remaining DPT 701 clinical placement opportunities and submit a new list with 8 selections, with a rationale for each selection.
- Students will be notified of their DPT 701 clinical placement by January 1<sup>st</sup>.

### ***Clinical Visit Policy***

Simmons University is committed to maintaining close contact with each student on each clinical experience, as well as with each affiliating site. Facilities are requested to specify in advance of the student's learning experience whether they prefer an onsite visit or phone call to assess student progress. A site visit may be requested by any facility and is encouraged if the student is demonstrating difficulty in the clinical setting. Most sites choose a phone follow-up with a visit if the situation warrants. If there are any concerns about a student's progress, please do not hesitate to contact the clinical education office prior to the midterm contact or at any time during the clinical experience.

### ***Communication with Sites***

#### **Student Contact with Facilities**

Students are asked to respect the facility's primary mission, providing physical therapy services to patients or clients. Students are asked to communicate with sites only after they have been officially placed by the DCE. Initial communication should be via a phone call followed *immediately* by written or electronic means. Electronic communication allows the site to respond at a convenient time. Sites have called to ask students to refrain from calling with an urgent list of questions and to recognize sites may not be able to respond at the



time of your call.

Under no circumstances may a student or their family contact a site directly to attempt to initiate their own placement or internship. If the student violates this contact rule, then they will be prohibited from a placement at that facility.

### **Clinical Education Faculty Communication with Facilities**

#### **Prior to Start Date**

In most situations, the school will confirm a student's full-time clinical placement three months prior to the start date. Students are encouraged to contact the CCCE at their assigned facility to confirm the dates, inquire about the dress code, the current CORI check requirement, and to obtain the name and email address of the clinical instructor 10 weeks prior to the start date. Approximately 8 weeks prior to the anticipated start date, the school will forward the course objectives to the facility. At 6 weeks prior the student will forward their completed Student Data Form and all health immunization/special requirements that site will need for the onboarding process.

#### ***Disaster Provision/ Clause***

In the case of a disaster during a clinical experience, the student will follow the disaster plan and recommendations of the clinical facility. The safety of the student is of primary importance. If damage to the site or the surrounding area results in the student's inability to return to the facility within one week, then the student will be reassigned to another clinical location ASAP.

#### ***Mid-term Conference***

The faculty will conduct midterm calls/visits to monitor progress and provide opportunity to clarify any issues or concerns. This also serves as an opportunity to obtain feedback from clinicians about the level of the student's academic preparation and as well as suggestions for curricular changes

If there is any concern about the student's progress, the student and the site are encouraged to contact the DCE as soon as possible.

#### ***Cell Phone Use***

Use of cell phones is prohibited while in the clinical environment. Students will limit their cell phone use to lunch breaks or prior to the start of the work day. Please ensure that cell phones are turned off when in the clinic.

#### ***Confidentiality***

##### **Confidentiality of Patients**

Students are expected to abide by the APTA Code of Ethics, Guide for Professional Conduct and Standards of Practice for Physical Therapists (Appendix A) at all times during clinical experiences. Students are introduced to Health Insurance Portability and Accountability Act (HIPAA) requirements in the classroom and complete an online quiz each year prior to embarking on clinical 52

learning experiences. Students are expected to comply with all requirements of each facility for maintaining the confidentiality of patients and clients and medical records. Students should inquire about specific HIPPA/confidentiality requirements at the beginning of each clinical learning experience. It is anticipated that each facility will orient students/interns to their HIPPA compliance measures.

### **Confidentiality of Student's Performance**

Clinical Education at Simmons University is considered to be a progressive experience; each experience constitutes one more step toward entry into the field as a professional. Given the relatively limited period of time students have to learn in the clinic, the quality of their education can be improved through disclosure of previous performance. The Family Educational Rights and Privacy Act (Buckley Amendment) permits disclosure of "educational records" to those parties who have been determined by the institution to have legitimate educational interests. Such disclosure will be carefully constructed to share such information as will help to focus subsequent educational experiences. Students will receive copies of written communications related to previous performance when they are sent by the DCE to the affiliated site.

### ***Dress Code***

Students are expected to dress in a professional manner while on clinical experiences. The student will conform to the dress code of each facility, if in question, please inquire as to the dress code **prior** to the initiation of the clinical experience. Simmons University nametags are required at all times; many facilities will require the student to obtain a facility name badge. Lab coats are often required- it is the student's responsibility to purchase this. Each student must wear a watch with a second hand. The "appropriateness" of student grooming and attire is determined by the CCCE and/or CI at each clinical facility. If the student does not meet the dress requirements of the clinical facility, then the CCCE and/or CI may ask the student to leave and return with the appropriate attire; this missed time must be made up.

Unless specifically directed to the contrary, jeans, shorts, T-shirts (collarless shirts) and open-toed shoes are unacceptable. If the student is in doubt, they should contact the CCCE prior to the experience to confirm the requirements.

Students are expected to be neatly groomed at all times. Nails will be short and neat; artificial nails are not acceptable. Hair should be natural color and tied back if longer than shoulder length. Jewelry, which might interfere with the safety or effectiveness of patient treatments, is prohibited. Facial piercing(s) must be removed. Tattoos must be covered at all times. Students are asked to refrain from the use of colognes or scented cosmetics, as patients may be sensitive to fragrances.

### ***Emergency Procedures***

If the student becomes seriously ill or is injured while at the clinical site, then the site is<sup>53</sup>

required by contract to direct the student to the nearest emergency services. The cost of medical care will be the student's responsibility. In addition, the DCE should be notified as soon as possible.

Any student who is injured while on a clinical experience may be required to produce written clearance to return to work at the clinical site. All documentation regarding the student's ability to return to work must be submitted to both the CCCE and the DCE. Sites do have the option of refusing to return a student to the clinic if they do not have full clearance to work.

### ***Critical Incident***

Please document any incidents on the Clinical Performance Instrument (via CPI web).

### ***Evaluation***

Student performance will be formally assessed at the midterm and final periods of the clinical learning experience. Simmons University requires that sites utilize the APTA online Clinical Performance Instrument (CPI) to evaluate performance.

Students are required to complete a formal self-assessment at the midterm and final. They are expected to take an active role in their learning, developing weekly goals, plans, and objectives to improve performance.

### ***Expected Performance/ Student Progress***

Clinical education is considered an on-going process. While a student may participate in three different rotations in the course of their clinical learning experiences, each student should demonstrate an increasing level of performance during each experience. This improvement will reflect the student's ability to integrate new material, previous information from the classroom, and prior clinical experience and apply it to the current setting. Specific clinical learning objectives are outlined and distributed for each clinical experience. It is important to note the level of complexity of the patients is an important determinant of the level of performance expected, as are each of the performance dimensions noted on the online CPI (quality, supervision/guidance required, consistency, complexity of tasks/environment, efficiency).

### **Satisfactory Progress**

The student's performance must meet or exceed the requirements for each clinical learning experience based upon the course objectives. In cases where the student's performance has been described as less than expected, the student must demonstrate consistent improvement over the course of the learning experience.

Successful completion of a clinical learning experience is based not only on the level of performance rated for each criterion on the CPI, but most importantly the comments written by the Clinical Instructor. The final determination of satisfactory progress and successful completion of the course is the responsibility of the school. Grades are determined by the DCE.

### **Unsatisfactory Progress/Performance Rated as Less than Expected**

Once the student's performance is identified as less than expected, the DCE should be notified immediately. This allows an opportunity for the DCE to work with the student and CI to identify learning issues, develop specific behavioral objectives and strategies to improve performance. The student will be expected to take an active role in the process and demonstrate commitment to improving performance.

A student cannot withdraw from a Clinical Education course if they are failing the course, regardless of the date of the withdrawal request.

### **Suspension**

The DCE, CCCE, or CI may immediately suspend any student who commits any act or omission endangering the life, health, or well-being, or violates any established rights or reasonable expectation of confidentiality of a patient or other person while on a clinical learning experience.

Immediately following the incident, the student is required to meet with the CI primarily responsible for that student's supervision. The student will assist the CI in completing the facility's incident reporting procedures. In addition, the DCE must be notified as soon as possible. Copies of the facility's reporting form should be made available to the DCE.

### **Early Termination**

A clinical experience may be terminated prior to the scheduled date of completion at the request of the clinical site or the DCE. Grounds for termination may include a student's engaging in unethical, illegal, or unprofessional behavior. Early termination is most often associated with a student's inability to demonstrate that sufficient learning is taking place at the clinical site or inability to perform in a safe and effective manner.

Students are expected to adhere to the APTA Code of Ethics, Guide for Professional Conduct, Standards of Practice and to consistently behave in a professional manner. The DCE should be notified immediately of any inappropriate behavior. Early termination will result in a failing grade.

### **Unsuccessful Outcome**

Students who receive a failing grade on their clinical learning experiences should refer to the unsatisfactory student progress section of the Doctor of Physical Therapy Student Handbook. An individual must successfully complete all clinical learning experiences in order to be eligible to graduate from the program.

### ***Grading***

The Director of Clinical Education is responsible for assigning a grade for each clinical education course.

Student performance will be evaluated by their Clinical Instructor using the online APTA

Clinical Performance Instrument (CPI). Performance will be evaluated based upon the specific objectives outlined for the clinical learning experience. Grading is Pass/Fail.

In order to receive a passing grade, students must submit all forms and course material. This would include:

- First Day On Site Form
- Reflection Paper of the experience with goals for their next clinical assignment
- Information page regarding the CI(s) Credentials
- APTA Student Evaluation of the Clinical Experience
- Evaluation of the Simmons University clinical education office
- In-service materials presented to the staff at the clinical facility
- Feedback forms completed by their in-service audience.
- Clinical Instructor's CPI, midterm and final - sign off online to submit to DCE.
- Student's CPI, midterm and final - sign off online to submit to DCE.

### ***Liability Insurance***

Physical therapy students who are enrolled in clinical education courses are covered by a blanket university policy covering medical liability in the amount of \$1,000,000 per incident and \$3,000,000 in aggregate. Students are covered under this policy as long as they are working under the supervision of a physical therapist employed by a contracted institution.

In order to be covered under the Simmons liability policy, students must have registered and paid for the clinical education course. It may take a few days for the university to process and record student payments. All contracts stipulate that students must be covered by a liability policy; therefore, a student will not be allowed in the clinic until their account is cleared.

### ***Non-Discrimination***

The Doctor of Physical Therapy program at Simmons University is committed to the policies of equal opportunity and non-discrimination on the basis of race, color, national origin, sex, sexual orientation, gender identity, age, religion, or status as a disabled individual in its programs and activities including, but not limited to, clinical experiences.

### ***Students with Disabilities***

Although Simmons has no academic program specifically designed for students with disabilities who are otherwise qualified for admission, Simmons is committed to providing support services and reasonable accommodations when requested by students who qualify for them. If you have a documented disability and anticipate needing accommodations in this course, it is your responsibility to register with the Office of Accessibility Services office as soon as possible to ensure that requested accommodations are implemented in a timely fashion. For more information or to request academic accommodations, contact the Office of Accessibility Services by phoning [617-521-2474](tel:617-521-2474) or emailing [access@simmons.edu](mailto:access@simmons.edu). You can also visit the Disability Services 56

web site at <http://www.simmons.edu/academics/student-success/accessibility-services> for additional information.

### ***HIPPA AND OSHA***

Most facilities require students to receive HIPPA and OSHA training prior to their clinical placement. Training is incorporated into the students' academic course material, and does include specific training in infection control procedures. Students are responsible for providing proof of this training, i.e. Certificate of Completion. If a clinical site requires more current OSHA training it is the student's responsibility to renew their certification.

### ***Managing Difficult Situations***

If there is a situation that causes either the student or clinical instructor to feel uncomfortable or neither party knows how to address, we welcome a call. Our preference is to try to resolve situations early, before they become major issues. We recognize that issues surrounding professional behaviors and communication are often difficult to address. However, the students are accustomed to receiving feedback in these areas throughout the academic program. The actual form utilized at Simmons (Ability-Based Assessment) can be found in the Forms Section of this Manual. You may find the form useful to identify problematic behaviors and to develop behavioral objectives to improve performance.

Students are instructed to check in during the first two weeks of their full-time clinical experiences. If either the student or clinical instructor has a concern that the student's performance is less than expected or if the student does not seem to be making improvement, please contact the DCE. Often, early intervention can help to identify problems, provide both parties with feedback, and create an opportunity to develop specific objectives to improve performance. If the student's performance is unacceptable or involves safety issues, an action plan may be developed by the DCE/CI/Student to address areas of concern.

During clinical education seminars, students are introduced to the concept of writing behavioral objectives and developing strategies to incorporate clinical instructor feedback. Simmons University utilizes the same model as the APTA Clinical Instructor Training Course so that CI's and students will have the same basic framework.

We welcome the opportunity to participate in resolving problem situations before they become major issues. We are available to work with either the CI and/or student to improve the clinical learning experience.

If there is ever any question or concern, please contact the DCE or Assistant DCE at:

Elizabeth Murphy  
603-401-8336  
[elizabeth.murphy@simmons.edu](mailto:elizabeth.murphy@simmons.edu)

## **Clinical Education Forms**

### **ICE Fact Sheets and Evaluation Forms**

- **Year 1 - Musculoskeletal I ICE**
- **Year 1 - Musculoskeletal II ICE**
- **Year 2 - Cardiopulmonary ICE**
- **Year 3 - Neuromuscular/Pediatric ICE**

### **Full-Time Clinical Learning Experience Forms/Information**

- **DPT 701 Objectives**
- **DPT 701 Clinical Education Checklist**
- **DPT 792 & 793 Objectives**
- **DPT 792 & 793 Clinical Education Checklist**

### **Anecdotal Record**

### **Action Plan**

### **NECCE Student Data Form**

### **PT Student Assessment of Clinical Instruction**

### **Simmons University Weekly Planning Form**

### **Simmons University Medical Clearance Form**

### **Student Review of Contract and Responsibilities**

**Simmons University**  
**Year 1 - Musculoskeletal I ICE Fact Sheet**

**Integrated Clinical Objectives:** The primary purpose of this clinical experience is to understand and articulate the role of the PT in the team of health care providers in intensive care, step-down, inpatient and/or outpatient rehabilitation setting. **All** experience will be beneficial, especially those with patients that have cardiovascular and pulmonary conditions which coincides with the current curriculum.

**Student Background** - *Students have varied amounts of clinical experience, but at a minimum have completed at least 30 hours of observation prior to admission to the program.*

- ◆ Students are in the **second** semester of the physical therapy doctoral program.
- ◆ Students have completed a course in applied human anatomy and clinical medicine
- ◆ Students are currently enrolled in: Frameworks for PT: Musculoskeletal System 1, Movement Science 1, Concepts and Skills in Physical Therapy, Evidence Based Practice and professional Seminar

**Clinical Instructor Responsibilities**

- ◆ Provide opportunities *in ways which are reasonable in your clinical setting* for students to meet the objectives attached.
- ◆ It is anticipated that this experience will be primarily observational in nature for the first few days as students begin their clinical coursework.
- ◆ As the semester progresses if you feel it is safe and advisable; please allow the students to participate in hands-on interactions with the patients, applying the skills they have learned, or are in the process of learning.
- ◆ **Assessment/Objectives:** The student has been given a checklist of objectives, you will be asked to review and initial each of the objectives completed at the conclusion of the five-week block. It is also helpful for the student if you can provide informal, formative feedback during each session.
- ◆ Please contact me immediately if the student demonstrates any behavior you feel we should be aware of, whether unsafe, unprofessional, or of some concern.

**If you have any questions, please contact:**

**Liz Murphy, PT, DPT**  
**Co-Director of Clinical Education**  
[Elizabeth.murphy@simmons.edu](mailto:Elizabeth.murphy@simmons.edu)  
**Cell: 603-401-8336**



## CLINICAL INSTRUCTOR PERFORMANCE EVALUATION of STUDENT (Musculoskeletal)

Student Name \_\_\_\_\_

Date \_\_\_\_\_

CI Name/Credentials \_\_\_\_\_

Facility Name \_\_\_\_\_

**Instructions:** During the course of the student's ICE we would like the CI to assess the completion of the objectives below. After completion of the objective, please initial in the column provided. If an objective was not successfully met or the opportunity did not arise, please explain in the space provided.

Clinical Instructor Performance Evaluation of Student			
Objectives: To be completed at least one time by the end of ICE		Yes	No
1)	Take part in the chart review process: interpret diagnostic test and lab findings		
2)	Observe a complete patient evaluation		
3)	Take part in a patient interview (i.e. evaluation or follow up appointment)		
Objectives: To be completed throughout and assessed upon completion of ICE			
4)	Discuss exam findings including impairments, functional limitations		
5)	Discuss overall plan of care for each patient encountered		
6)	Recognize & Verbalize understanding of patient care equipment: (i.e. monitors, lines/tubes)		
7)	Understand and discuss the influence of disease, lifestyle and behavior on musculoskeletal function, functional limitation and disability		
8)	Demonstrate sound professional behaviors and attitude including; adherence to the APTA Code of Ethics, State Practice Act and HIPPA regulations		
9)	Practiced in a safe manner: including adhering to policies and procedures regarding health, safety and universal precautions.		
10)	Participate in hands on interactions with patients as appropriate up to the discretion of the Clinical Instructor		
11)	Has the student been present for all scheduled clinical days?		
12)	Has the student met your expectations for effective professional communication? i.e. Appropriate tone, terminology, responds to other's verbal and nonverbal cues, clear and concise communication with patient families, CI, other team members		
<p><b>COMMENTS:</b> Please comment on the students overall professional behavior, strengths and weaknesses and the ability to meet the course objectives.</p>   			

\_\_\_\_\_  
Clinical Instructor Signature

\_\_\_\_\_  
Date

## STUDENT'S EVALUATION of Integrated Clinical Experience (Musculoskeletal)

Student's name \_\_\_\_\_ Dates at clinical site \_\_\_\_\_  
 Clinical Facility \_\_\_\_\_ Type of Rotation \_\_\_\_\_  
 Name(s) of CI(s) \_\_\_\_\_

Self-Evaluation			
Objectives: To be completed at least one time by the end of ICE		Yes	No
1)	Take part in the chart review process: interpret diagnostic test and lab findings		
2)	Observe a complete patient evaluation		
3)	Take part in a patient interview (i.e. evaluation or follow up appointment)		
Objectives: To be completed throughout and assessed upon completion of ICE			
4)	Discuss exam findings including impairments, functional limitations		
5)	Discuss overall plan of care for each patient encountered		
6)	Recognize & Verbalize understanding of patient care equipment: (i.e. monitors, lines/tubes)		
7)	Understand and discuss the influence of disease, lifestyle and behavior on musculoskeletal function, functional limitation and disability		
8)	Demonstrate sound professional behaviors and attitude including; adherence to the APTA Code of Ethics, State Practice Act and HIPPA regulations		
9)	Practiced in a safe manner: including adhering to policies and procedures regarding health, safety and universal precautions.		
10)	Participate in hands on interactions with patients as appropriate up to the discretion of the Clinical Instructor		
11)	Have you been present for all scheduled clinical days?		
12)	Have you met the expectations for effective professional communication? i.e. Appropriate tone, terminology, responds to other's verbal and nonverbal cues, clear and concise communication with patient families, CI, other team members		
<b>COMMENTS:</b> Please comment on your overall professional behavior, strengths and weaknesses and the ability to meet the course objectives.			

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

\_\_\_\_\_  
 Date



**Simmons University**  
**Year 2 - Cardiopulmonary ICE Fact Sheet**

**Integrated Clinical Objectives:** The primary purpose of this clinical experience is to understand and articulate the role of the PT in the team of health care providers in intensive care, step-down, inpatient orthopedic rehabilitation and/or home care setting. **All** experience and exposure to new settings will be beneficial for these Year III students' and will prepare them for their final clinical experiences.

**Student Background -**

- ◆ Students are in the **5th** didactic semester of the physical therapy doctoral program.
- ◆ Students have completed musculoskeletal evaluation and treatment of the spine and extremities, movement science and students have completed one full time 12 week clinical experience in addition to integrated clinical experiences coinciding with each academic semester.
- ◆ Students are currently enrolled in –Cardiovascular/Pulmonary System, health promotion, neuroanatomy, integumentary system and research seminar.

**Clinical Instructor Responsibilities**

- ◆ Provide opportunities *in ways which are reasonable in your clinical setting* for students to meet the objectives attached.
- ◆ It is anticipated that this experience will be primarily observational in nature for the first few days as students begin their clinical coursework.
- ◆ As the semester progresses if you feel it is safe and advisable; please allow the students to participate in hands-on interactions with the patients, applying the skills they have learned, or are in the process of learning.
- ◆ **Assessment/Objectives:** The student has been given a checklist of objectives, you will be asked to review and initial each of the objectives completed at the conclusion of the five-week block. It is also helpful for the student if you can provide informal, formative feedback during each session.

Please contact me immediately if the student demonstrates any behavior you feel we should be aware of, whether unsafe, unprofessional, or of some concern

**If you have any questions, please contact:**

**Liz Murphy, PT, DPT**  
**Co-Director of Clinical Education**  
[Elizabeth.murphy@simmons.edu](mailto:Elizabeth.murphy@simmons.edu)  
Cell: 603-401-8336

**CLINICAL INSTRUCTOR PERFORMANCE EVALUATION of STUDENT**  
**(Cardiopulmonary)**

Student Name \_\_\_\_\_

Date \_\_\_\_\_

CI Name/Credentials \_\_\_\_\_

Facility Name \_\_\_\_\_

**Instructions:** During the course of the student’s ICE we would like the CI to assess the completion of the objectives below. After completion of the objective, please initial in the column provided. If an objective was not successfully met or the opportunity did not arise, please explain in the space provided.

<b>Clinical Instructor Performance Evaluation of Student</b>				
<b>Objectives: To be completed at least one time by the end of ICE</b>			<b>Yes</b>	<b>No</b>
1)	a) Perform a chart review, b) Describe what might be included in the initial evaluation, & c) Observe a complete patient PT evaluation			
2)	Perform part of a patient interview (i.e. evaluation or follow up appointment)			
3)	Initiate draft documentation for a patients observed			
<b>Objectives: To be completed throughout and assessed upon completion of ICE</b>				
4)	Discuss exam findings including impairments, functional limitations			
5)	Discuss overall plan of care for each patient encountered and contribute treatment ideas			
6)	Understand and discuss the influence of disease, lifestyle and behavior on musculoskeletal function, functional limitation and disability			
7)	Demonstrate sound professional behaviors and attitude including; adherence to the APTA Code of Ethics, State Practice Act and HIPPA regulations			
8)	Practiced in a safe manner: including adhering to policies and procedures regarding health, safety and universal precautions.			
9)	Participate in hands on interactions with patients as appropriate up to the discretion of the Clinical Instructor			
10)	Has the student been present for all scheduled clinical days?			
11)	Has the student met your expectations for effective professional communication? i.e. Appropriate tone, terminology, responds to other’s verbal and nonverbal cues, clear and concise communication with patient families, CI, other team members			
<b>COMMENTS:</b> Please comment on the students overall professional behavior, strengths and weaknesses and the ability to meet the course objectives.				

Date \_\_\_\_\_

Clinical Instructor Signature \_\_\_\_\_





**Simmons University**  
**Year 2 - Neuromuscular/Pediatric ICE Fact Sheet**

**Integrated Clinical Objectives:** The primary purpose of this clinical experience is to understand and articulate the role of the PT in the team of health care providers in intensive care, step-down, inpatient and/or outpatient rehabilitation setting. **All** experience will be beneficial, especially those with patients that have neurological conditions or pediatric diagnoses which coincides with the current curriculum.

**Student Background -**

- ◆ Students are in the second year, 6th semester of the physical therapy doctoral program.
- ◆ Students are currently enrolled in their first semester of Neuromuscular Evaluation and Treatment, Fundamentals of Pediatric Physical Therapy, Introduction to the Health Care System, and Practice Management.
- ◆ Students have completed courses in the fundamentals of physical therapy practice, applied human anatomy, cardiopulmonary evaluation and treatment, musculoskeletal evaluation and treatment, and Evidence Based Practice
- ◆ Students have varied amounts of clinical experience, but at a minimum, have completed one 12-week clinical experience and two semesters of integrated clinical experiences.

**Clinical Instructor Responsibilities**

- ◆ Provide opportunities *in ways which are reasonable in your clinical setting* for students to meet the objectives attached.
- ◆ It is anticipated that this experience will be primarily observational in nature for the first few days as students begin their clinical coursework.
- ◆ As the semester progresses if you feel it is safe and advisable; please allow the students to participate in hands-on interactions with the patients, applying the skills they have learned, or are in the process of learning.
- ◆ **Assessment/Objectives:** The student has been given a checklist of objectives, you will be asked to review and initial each of the objectives completed at the conclusion of the five week block. It is also helpful for the student if you can provide informal, formative feedback during each session.
- ◆ Please contact me immediately if the student demonstrates any behavior you feel we should be aware of, whether unsafe, unprofessional, or of some concern.

**If you have any questions, please contact:**

**Liz Murphy, PT, DPT**  
**Co-Director of Clinical Education**  
[Elizabeth.murphy@simmons.edu](mailto:Elizabeth.murphy@simmons.edu)  
**Cell: 603-401-8336**



**CLINICAL INSTRUCTOR PERFORMANCE EVALUATION of STUDENT**  
**(Neuro/Peds)**

Student Name \_\_\_\_\_

Date \_\_\_\_\_

CI Name/Credentials \_\_\_\_\_

Facility Name \_\_\_\_\_

**Instructions:** During the course of the student's ICE we would like the CI to assess the completion of the objectives below. After completion of the objective, please initial in the column provided. If an objective was not successfully met or the opportunity did not arise, please explain in the space provided.

<b>Clinical Instructor Performance Evaluation of Student</b>			
<b>Objectives: To be completed at least one time by the end of ICE</b>		<b>Yes</b>	<b>No</b>
1)	Conduct elements of a physical therapy examination under the direct supervision of a licensed physical therapist and interpret the meaningfulness of the findings.		
2)	Determine goals based on the individual's diagnosis, impairments, functional status, and roles & responsibilities.		
3)	Draft documentation of an evaluation and treatment		
<b>Objectives: To be completed throughout and assessed upon completion of ICE</b>			
4)	Discuss exam findings including impairments, functional limitations		
5)	Discuss overall plan of care for each patient encountered and contribute to the Plan of Care		
6)	Understand and discuss the influence of disease, lifestyle and behavior on neuromuscular function, functional limitation and disability		
7)	Demonstrate sound professional behaviors and attitude including; adherence to the APTA Code of Ethics, State Practice Act and HIPPA regulations		
8)	Practiced in a safe manner: including adhering to policies and procedures regarding health, safety and universal precautions.		
9)	Participate in hands on interactions with patients as appropriate up to the discretion of the Clinical Instructor		
10)	Has the student been present for all scheduled clinical days?		
11)	Has the student met your expectations for effective professional communication? i.e. Appropriate tone, terminology, responds to other's verbal and nonverbal cues, clear and concise communication with patient families, CI, other team members		
<p><b>COMMENTS:</b> Please comment on the students overall professional behavior, strengths and weaknesses and the ability to meet the course objectives.</p>			

Date \_\_\_\_\_

Clinical Instructor Signature \_\_\_\_\_

## STUDENT'S EVALUATION of an Integrated Clinical Experience (Neuro/Peds)

Student's name \_\_\_\_\_ Dates at clinical site \_\_\_\_\_  
 Clinical Facility \_\_\_\_\_ Type of Rotation \_\_\_\_\_  
 Name(s) of CI(s) \_\_\_\_\_

Self-Evaluation			
Objectives: To be completed at least one time by the end of ICE		Yes	No
1)	Conduct elements of a physical therapy examination under the direct supervision of a licensed physical therapist and interpret the meaningfulness of the findings.		
2)	Determine goals based on the individual's diagnosis, impairments, functional status, and roles & responsibilities.		
3)	Draft documentation of an evaluation and treatment		
Objectives: To be completed throughout and assessed upon completion of ICE			
4)	Discuss exam findings including impairments, functional limitations		
5)	Discuss overall plan of care for each patient encountered and contribute to the Plan of Care		
6)	Understand and discuss the influence of disease, lifestyle and behavior on neuromuscular function, functional limitation and disability		
7)	Demonstrate sound professional behaviors and attitude including; adherence to the APTA Code of Ethics, State Practice Act and HIPPA regulations		
8)	Practiced in a safe manner: including adhering to policies and procedures regarding health, safety and universal precautions.		
9)	Participate in hands on interactions with patients as appropriate up to the discretion of the Clinical Instructor		
10)	Have you been present for all scheduled clinical days?		
11)	Have you met your expectations for effective professional communication? i.e. Appropriate tone, terminology, responds to other's verbal and nonverbal cues, clear and concise communication with patient families, CI, other team members		
<p><b>COMMENTS:</b> Please comment on your overall professional behavior, strengths and weaknesses and the ability to meet the course objectives.</p>          			

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

\_\_\_\_\_  
**Date**

**STUDENT’S EVALUATION of an Integrated Clinical Experience (Neuro/Peds)**

Student’s name \_\_\_\_\_  
 Clinical Facility \_\_\_\_\_  
 Name(s) of CI(s) \_\_\_\_\_

Dates at clinical site \_\_\_\_\_  
 Type of Rotation \_\_\_\_\_

Site Evaluation					
<p><i>Use this key and circle the most appropriate response(s) in the right column</i></p> <p><b>SA = Strongly Agree</b>      <b>NO = Neither agree nor Disagree</b></p> <p><b>A = Agree</b>                      <b>D = Disagree</b></p> <p><b>SD = Strongly Disagree</b></p>					
1. My clinical instructor had a clear set of objectives for my learning experience.	SA	A	NO	D	SD
2. I was expected to take responsibility for my learning, with support and encouragement from my CI.	SA	A	NO	D	SD
3. I was encouraged to seek out a variety of resources to augment my knowledge and learning.	SA	A	NO	D	SD
4. The balance of “hands-on” practice and observational experience was appropriate to my learning needs and style.	SA	A	NO	D	SD
5. The CI(s) provided an appropriate balance of positive feedback and constructive criticism throughout the clinical experience.	SA	A	NO	D	SD
6. My CI’s written evaluations of my performance were consistent with the informal formative feedback I received throughout the experience (i.e. no surprises).	SA	A	NO	D	SD
7. The variety of patients was adequate for me to meet the objectives of this clinical education experience.	SA	A	NO	D	SD
8. I felt welcomed as part of the physical therapy/rehabilitation department.	SA	A	NO	D	SD
9. I felt comfortable working with the staff in this clinical setting.	SA	A	NO	D	SD
<p><b>COMMENTS:</b> <i>Based on your past experience in clinical education, and your concept of the “ideal” clinical education experience, how would you rate this clinical education experience? Would you recommend it to other students?</i></p>					

**Simmons University**  
**Full-Time Clinical Learning Objectives & Checklists**

**DPT 701 Clinical Education Experience I Learning Objectives**

The student has completed one full year of foundational coursework including study of the musculoskeletal system. Students have been participating in clinical experiences approximately one day per week (over 3 semesters) to better integrate their academic courses with clinical learning. The student has **not** yet completed coursework related to pediatrics, the integumentary system, neuromuscular system, complex conditions, or manipulation.

In general, at the conclusion of the experience (12 weeks) we would expect the student to

- Demonstrate proficiency with simple tasks
- Demonstrate the ability to perform skilled examinations, interventions and clinical reasoning with supervision and moderate guidance
- Effectively manage **simple** patients (requiring clinical supervision less than 50% of the time)
- Manage increasingly **complex** patients (requiring clinical supervision less than 75% of the time)
- Demonstrate the capability of maintaining 50% of a full-time physical therapist caseload

**Professional Practice Expectations**

The student is expected to consistently adhere to the APTA's Core Documents, including: (1) *Professionalism in Physical Therapy: Core Values*, (2) *Code of Ethics*, (3) *Guidelines for Professional Conduct*, and (4) *Standards of Practice*.

In addition, at the conclusion of the experience (12 weeks) we would expect the student to:

- practice in a safe manner w/**minimal** guidance (CPI #1)
- demonstrate professional and responsible behavior w/**minimal** guidance (CPI #2)
- demonstrate accountability by adhering to established legal and professional standards and ethical guidelines w/**minimal** guidance (CPI #3)
- communicate expressively and receptively in a culturally competent manner with **minimal** guidance in routine situations, **moderate** if complex (CPI #4)
- practice in a culturally competent manner w/ **minimal to moderate** guidance (CPI #5)
- initiate and implement a self-directed plan for professional development w/**minimal** guidance (CPI #6)
- demonstrate the ability to formulate sound clinical reasoning with **considerable** guidance (CPI #7)

**Patient and Client Management Expectations**

The student is expected to:

- screen each patient to determine the need for further exam or consultation by a physical therapist or referral to another health care professional w/**moderate** guidance (CPI #8)
- perform a physical therapy patient examination using evidence-based tests and measures with **minimal** guidance (CPI #9)
- evaluate data from the patient examination to make clinical judgments w/**minimal to moderate** guidance (CPI #10)

- determine a diagnosis and prognosis that guides future management w/ **minimal to moderate** guidance (CPI #11)
- establish a physical therapy plan of care that is safe, effective, patient-centered and evidence-based w/**minimal** guidance (CPI #12)
- perform physical therapy interventions in a competent manner w/ **minimal to moderate guidance** depending on patient complexity (CPI #13)
- educate others with **minimal** guidance in routine situations, **moderate** if complex (CPI #14)
- produce complete, clear and accurate documentation in a timely manner w/ **minimal** guidance in routine situations, **moderate** if complex (CPI #15)
- participate in activities addressing individual patient and group outcomes assessment w/**moderate** guidance (CPI #16)
- participate in financial management of the physical therapy service w/**moderate** guidance (CPI #17)
- direct and supervise personnel to meet patient goals and expected outcomes according to legal standards and ethical guidelines with **moderate** guidance (CPI #18)

### **Additional Simmons University Expectations:**

#### The student is responsible for:

- Initiating the First Day on Site Form (FDOSF) and posting it to the Moodle assignment on the first day of their clinical education experience.
- Initiating the Weekly Planning Sheet and posting at least the first 2 Weekly Planning Sheets to the Moodle assignment.
- Maintaining electronic communication with the Director of Clinical Education.
- Serving as a resource to the clinical site for the web-based PTCPI.
- Completing all Assignments on Moodle within one week of completing the clinical education experience.

# Simmons University

## DPT 701 Clinical Education Checklist

*The Clinical Education office will communicate with you via your Simmons email account.  
Please check your Simmons email daily.*

### Prior to leaving Simmons University

- Complete online PTCPI Learning Module \_\_\_\_\_
- Register and Pay for DPT 701 \_\_\_\_\_
- Provide your Student Data Form to CE Admin with updated contact information; phone and email. \_\_\_\_\_
- Prior to DPT 701 and ICE assignments complete HIPAA Test and have your HIPAA Certificate of Completion available to provide for DPT 701, 792, and 793 \_\_\_\_\_
- Review Clinical Ed Manual - Online \_\_\_\_\_
- Review your Medical Clearance \_\_\_\_\_
- Determine Faculty Contact (Advisor) \_\_\_\_\_

### Day 1 or Day 2 on the Clinical experience

- Complete First Day on Site Form and submit to Moodle \_\_\_\_\_
- Clarify Policies/Procedures with CI \_\_\_\_\_
- Confirm Dates of the Clinical experience \_\_\_\_\_
- Assessment Tool (PTCPI)-sign on to Web CPI \_\_\_\_\_

### Week 1

- Clarify mechanism for communicating with CI \_\_\_\_\_
- Frequency/Style Feedback \_\_\_\_\_
- Ongoing Assessment/Goal Setting \_\_\_\_\_
- Submit Weekly Planning Form to DCE via Moodle \_\_\_\_\_

### Week 2

- Send Weekly Planning Form to DCE via Moodle \_\_\_\_\_
- \*Continue to complete weekly planning sheets, after week 2 only send to DCE upon request.***

### Week 3

- Review the 18 Criteria on the CPI \_\_\_\_\_

### Week 4

- Discuss potential in-service topics with your CI \_\_\_\_\_

### Week 5-6

- Confirm date/time of midterm conference/visit with CI \_\_\_\_\_
- Communicate with DCE to set up call/visit \_\_\_\_\_

Week 7-8

- Perform self-assessment using CPI Form (midterm) \_\_\_\_\_
- Confirm time for final CPI review with CI \_\_\_\_\_

Week 6-12

- Present In-service \_\_\_\_\_
- Prepare objectives for your in-service presentation \_\_\_\_\_
- Provide (then collect) feedback forms to your audience \_\_\_\_\_

Week 12

- Perform self-assessment using PTCPI Online (final) \_\_\_\_\_
- Complete Student Eval of Site/Clinical Instruction Form \_\_\_\_\_
- Confirm time for review of final CPI with CI \_\_\_\_\_

Week 12

- Discuss all evals, keep copies for yourself \_\_\_\_\_
- You don't need to wait until Last Day to submit forms via Moodle \_\_\_\_\_
- Complete Reflection Paper and submit via Moodle \_\_\_\_\_
- Complete Eval of CE office form and submit via Moodle \_\_\_\_\_
- Submit In-service materials via Moodle \_\_\_\_\_
- Submit In-service feedback forms via Moodle \_\_\_\_\_
- Submit page 3 of the APTA Student Eval of Clinical Experience and  
    Clinical Instruction form via Moodle. \_\_\_\_\_
- Submit pages 4-8 of the APTA Student Evaluation of Clinical Experience and  
    Clinical Instruction form via Moodle \_\_\_\_\_

**You must submit: Reflection Paper, CI(s) Credential Info page, APTA Student Evaluation of Clinical Experience and Clinical Instruction (pages 4-8), Evaluation of Simmons CE Office form, In-service materials along with feedback forms from your audience via Moodle to complete DPT 701 coursework for a grade.**

**PLEASE NOTE: IF AT ANY TIME YOU ARE FEELING VERY UNCOMFORTABLE IN YOUR SETTING, IF YOU ARE CONCERNED ABOUT YOUR PROGRESS, OR HAVING DIFFICULTY COMMUNICATING, PLEASE CONTACT THE DCE or ADCE. DO NOT FEEL THAT YOU NEED TO HANDLE THIS ALONE, WE ARE HERE TO HELP.**

Elizabeth Murphy,  
Elizabeth.murphy@simmons.edu  
(C) 603-401-8336

Submit all forms via Moodle. PTCPI will be saved online when you complete and sign off. You must submit all forms within one week of completing DPT 701 in order to receive a grade for the course.

**Simmons University**  
**DPT 792 / DPT 793 Clinical Education Experience II & III**  
**Learning Objectives**

The student has completed the final semester of academic coursework, as well as all integrated clinical experiences, including one full-time 12-week clinical experience. The learning objectives will be advanced intermediate in all areas of the CPI for 792, and entry level for 793.

**Professional Practice Expectations**

The student is expected to consistently adhere to the APTA's Core Documents, including: (1) *Professionalism in Physical Therapy: Core Values*, (2) *Code of Ethics*, (3) *Guidelines for Professional Conduct*, and (4) *Standards of Practice*.

**For 792:**

In addition, at the conclusion of the experience (12 weeks) we would expect the student to:

- practice in a safe manner **with only** guidance or supervision (CPI #1)
- demonstrate professional and responsible behavior **with only** guidance or supervision (CPI #2)
- demonstrate accountability by adhering to established legal and professional standards and ethical guidelines **with only** guidance or supervision (CPI #3)
- communicate expressively and receptively in a culturally competent manner **with only** guidance or supervision (CPI #4)
- practice in a culturally competent manner **with only** guidance or supervision (CPI #5)
- initiate and implement a self-directed plan for professional development **with only** guidance or supervision (CPI #6)
- demonstrate the ability to formulate sound clinical reasoning **with only** guidance or supervision (CPI #7)

**Patient and Client Management Expectations**

The student is expected to:

- screen each patient to determine the need for further exam or consultation by a physical therapist or referral to another health care professional **with only** guidance or supervision (CPI #8)
- perform a physical therapy patient examination using evidence-based tests and measures **with only** guidance or supervision (CPI #9)
- evaluate data from the patient examination to make clinical judgments **with only** guidance or supervision (CPI #10)
- determine a diagnosis and prognosis that guides future management **with only** guidance or supervision (CPI #11)
- establish a physical therapy plan of care that is safe, effective, patient-centered and evidence-based **with only** guidance or supervision (CPI #12)
- perform physical therapy interventions in a competent manner **with only** guidance or supervision (CPI #13)
- educate others **with only** guidance or supervision (CPI #14)
- produce complete, clear and accurate documentation in a timely manner **with only** guidance or supervision (CPI #15)



- participate in activities addressing individual patient and group outcomes assessment **with only** guidance or supervision (CPI #16)
- participate in financial management of the physical therapy service **with only** guidance or supervision (CPI #17)
- direct and supervise personnel to meet patient goals and expected outcomes according to legal standards and ethical guidelines **with only** guidance or supervision (CPI #18)

In general, at the conclusion of the experience (12 weeks) we would expect the student

- To be **capable of** functioning with only guidance or clinical supervision managing patients with simple or complex conditions.
- To be **capable of** maintaining 75% of a full-time physical therapist's caseload in a cost effective manner.
- To be consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning
- To consult with others and resolve unfamiliar or ambiguous situations.

### **Additional Simmons University Expectations:**

The student is responsible for:

- Initiating the First Day on Site Form (FDOSF) and posting it to the Moodle assignment on the first day of their clinical education experience.
- Initiating the Weekly Planning Sheet and posting at least the first 2 Weekly Planning Sheets to the Moodle assignment.
- Maintaining electronic communication with the Director of Clinical Education.
- Serving as a resource to the clinical site for the web-based PTCPI.
- Completing all Assignments on Moodle within one week of completing the clinical education experience.

### **For 793:**

In addition, at the conclusion of the experience (12 weeks) we would expect the student to:

- practice in a safe manner **without** guidance or supervision (CPI #1)
- demonstrate professional and responsible behavior **without** guidance or supervision (CPI #2)
- demonstrate accountability by adhering to established legal and professional standards and ethical guidelines **without** guidance or supervision (CPI #3)
- communicate expressively and receptively in a culturally competent manner **without** guidance or supervision (CPI #4)
- practice in a culturally competent manner **without** guidance or supervision (CPI #5)
- initiate and implement a self-directed plan for professional development **without** guidance or supervision (CPI #6)
- demonstrate the ability to formulate sound clinical reasoning **without** guidance or supervision (CPI #7)

## **Patient and Client Management Expectations**

The student is expected to:

- screen each patient to determine the need for further exam or consultation by a physical therapist or referral to another health care professional **without** guidance or supervision (CPI #8)
- perform a physical therapy patient examination using evidence-based tests and measures **without** guidance or supervision (CPI # 9)
- evaluate data from the patient examination to make clinical judgments **without** guidance or supervision (CPI #10)
- determine a diagnosis and prognosis that guides future management **without** guidance or supervision (CPI #11)
- establish a physical therapy plan of care that is safe, effective, patient-centered and evidence-based **without** guidance or supervision (CPI #12)
- perform physical therapy interventions in a competent manner **without** guidance or supervision (CPI #13)
- educate others **without** guidance or supervision (CPI #14)
- produce complete, clear and accurate documentation in a timely manner **without** guidance or supervision (CPI #15)
- participate in activities addressing individual patient and group outcomes assessment **without** guidance or supervision (CPI #16)
- participate in financial management of the physical therapy service **without** guidance or supervision (CPI #17)
- direct and supervise personnel to meet patient goals and expected outcomes according to legal standards and ethical guidelines **without** guidance or supervision (CPI #18)

In general, at the conclusion of the experience (12 weeks) we would expect the student

- To be **capable of** functioning without guidance or clinical supervision managing patients with simple or complex conditions.
- To be **capable of** maintaining 100% of a full-time physical therapist's caseload in a cost effective manner.
- To be consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning
- To consult with others and resolve unfamiliar or ambiguous situations.

## **Additional Simmons University Expectations:**

The student is responsible for:

- Initiating the First Day on Site Form (FDOSF) and posting it to the Moodle assignment on the first day of their clinical education experience.
- Initiating the Weekly Planning Sheet and posting at least the first 2 Weekly Planning Sheets to the Moodle assignment.
- Maintaining electronic communication with the Director of Clinical Education.
- Serving as a resource to the clinical site for the web-based PTCPI.
- Completing all Assignments on Moodle within one week of completing the clinical education experience.

**Simmons University**  
**DPT 792 / 793 Clinical Education Checklist**

The Clinical Education office will communicate with you via your Simmons email account.  
*Please check your Simmons email daily.*

- Prior to leaving Simmons University \_\_\_\_\_
- Register and Pay for DPT 792 and 793 \_\_\_\_\_
- Provide your Student Data Form to CE Admin with updated contact  
        information; phone and email. \_\_\_\_\_
- Provide HIPAA Certificate of Completion to CE site \_\_\_\_\_
- Review Clinical Ed Manual - Online \_\_\_\_\_
- Review CE Forms \_\_\_\_\_
- Determine Faculty Contact (Advisor) \_\_\_\_\_

- Day 1 or Day 2 on the Clinical experience
- Complete First Day on Site Form and submit to Moodle \_\_\_\_\_
- Clarify Policies/Procedures with CI \_\_\_\_\_
- Dates of the Clinical experience \_\_\_\_\_
- Assessment Tool (PTCPI)-sign on to Web CPI \_\_\_\_\_

- Week 1
- Clarify mechanism for communicating with CI \_\_\_\_\_
- Frequency/Style Feedback \_\_\_\_\_
- Ongoing Assessment/Goal Setting \_\_\_\_\_
- Submit Weekly Planning Form via Moodle \_\_\_\_\_

- Week 2
- Submit Weekly Planning Form via Moodle \_\_\_\_\_

***\*Continue to complete weekly planning sheets, after week 2 only send to DCE upon request.***

- Week 3
- Review the 18 Criteria on the CPI \_\_\_\_\_

- Week 4
- Discuss potential in-service topics with your CI \_\_\_\_\_

- Week 5-6
- Confirm date/time of midterm conference/visit with CI \_\_\_\_\_
- Communicate with DCE to set up call/visit \_\_\_\_\_

- Week 7-8
- Perform self-assessment using CPI Form (midterm) \_\_\_\_\_
- Confirm time for final CPI review with CI \_\_\_\_\_

Week 6-12 Present In-service \_\_\_\_\_  
Prepare objectives for your in-service presentation \_\_\_\_\_  
Provide (then collect) feedback forms to  
your audience \_\_\_\_\_

Week 12  
Perform self-assessment using PTCPi Online (final) \_\_\_\_\_  
Complete Student Eval of Site/Clinical Instruction Form \_\_\_\_\_  
Confirm time for review of final CPI with CI \_\_\_\_\_

Week 12  
Discuss all evals, keep copies for yourself \_\_\_\_\_  
You don't need to wait until Last Day to submit forms via Moodle \_\_\_\_\_  
Complete Reflection Paper and submit via Moodle \_\_\_\_\_  
Complete Eval of CE office form and submit via Moodle \_\_\_\_\_  
Submit In-service materials via Moodle \_\_\_\_\_  
Submit In-service feedback forms via Moodle \_\_\_\_\_  
Submit page 3 of the APTA Student Eval of Clinical Experience and  
Clinical Instruction form via Moodle. \_\_\_\_\_  
Submit pages 4-8 of the APTA Student Evaluation of Clinical Experience  
and Clinical Instruction form via Moodle \_\_\_\_\_

**You must submit: Reflection Paper, CI(s) Credential Info page, APTA Student Evaluation of Clinical Experience and Clinical Instruction (pages 4-8), Evaluation of Simmons CE Office form, In-service materials along with feedback forms from your audience via Moodle to complete PT792/793 coursework for a grade.**

**PLEASE NOTE: IF AT ANY TIME YOU ARE FEELING VERY UNCOMFORTABLE IN YOUR SETTING, IF YOU ARE CONCERNED ABOUT YOUR PROGRESS, OR HAVING DIFFICULTY COMMUNICATING, PLEASE CONTACT THE DCE or ADCE. DO NOT FEEL THAT YOU NEED TO HANDLE THIS ALONE, WE ARE HERE TO HELP.**

Elizabeth Murphy,  
[Elizabeth.murphy@simmons.edu](mailto:Elizabeth.murphy@simmons.edu)  
(C) 603-401-8336

You must submit all forms via Moodle no later than one week after your final day at each 792/793 clinical site. PTCPi will be saved online when you complete and sign off.

**For DPT 793:** Repeat activities for weeks 1 through 12  
Moodle DPT 793 assignments can be submitted as you complete them after week 10.

## The Anecdotal Record

*The CI simply records the facts of "what happened", offering no judgments.*

**Student's Name:** \_

**Evaluator/Observer:** \_

**Setting:** (Place, persons involved, atmosphere, etc.)

*Example: The student has made an appointment with the patient, who frequently was uncooperative. When the student returned, the patient was still on the phone and made no move to end the conversation.*

**Student Action or Behavior:**

*Example: The student demonstrated appropriate and assertive intervention to set limits on the patient's behavior. Assertiveness has been a challenge for this student, and this is a good example of an appropriate application of the skill.*

Student's Signature Evaluator's Signature

**Student's Comments:**

*Example: It's difficult to feel like I'm being rude, but I can see the importance of setting limits on the patient's behavior*

## Action Plan

Student Name:

Clinical Site:

Clinical Instructor:

CCCE:

Dates of Clinical Experience:

***This action plan will be initiated for any student who appears to be at risk for not meeting the learning objectives. If the student does not meet the objectives stated, they are at risk of failing the clinical experience.***

Identified Problems:

<b>OBJECTIVES:</b>	<b>Date to be Met</b>
1)	
2)	
3)	
4)	

Plan to meet objectives:

\_\_\_ I agree to the plan and terms as outlined. I understand that I am at risk for not passing this clinical course.

\_\_\_ I do not agree to the terms as outlined. I understand that by not following this action plan I am placing myself at further risk for not passing this clinical course. My rebuttal to this action plan is (please attach your written plan)

\_\_\_\_\_

Student/Date

\_\_\_\_\_

Clinical Instructor/Date

\_\_\_\_\_

Simmons Faculty/Date

PHYSICAL THERAPIST STUDENT  
EVALUATION:

CLINICAL INSTRUCTION  
AND  
CLINICAL EXPERIENCE

**PT Student Assessment of Clinical Instruction**

June 12, 2003



American Physical Therapy Association

American Physical Therapy Association  
Department of Physical Therapy Education  
1111 North Fairfax Street  
Alexandria, Virginia, 22314

## **PREAMBLE**

The purpose of developing this tool was in response to academic and clinical educators' requests to provide a voluntary, consistent and uniform approach for students to evaluate clinical education as well as the overall clinical experience. Questions included in this draft tool were derived from the many existing tools already in use by physical therapy programs for students to evaluate the quality of the clinical learning experience and clinical instructors (CIs), as well as academic preparation for the specific learning experience. The development of this tool was based on key assumptions for the purpose, need for, and intent of this tool. These key assumptions are described in detail below. This tool consists of two sections that can be used together or separately: Section 1 Physical therapist student assessment of the clinical experience and Section 2-Physical therapist student assessment of clinical instruction. Central to the development of this tool was an assumption that students should actively engage in their learning experiences by providing candid feedback, both formative and summative, about the learning experience and with summative feedback offered at both midterm and final evaluations. One of the benefits of completing Section 2 at midterm is to provide the CI and the student with an opportunity to modify the learning experience by making midcourse corrections.

### **Key Assumptions**

- The tool is intended to provide the student's assessment of the quality of the clinical learning experience and the quality of clinical instruction for the specific learning experience.
- The tool allows students to objectively comment on the quality and richness of the learning experience and to provide information that would be helpful to other students, adequacy of their preparation for the specific learning experience, and effectiveness of the clinical educator(s).
- The tool is formatted in Section 2 to allow student feedback to be provided to the CI(s) at both midterm and final evaluations. This will encourage students to share their learning needs and expectations during the clinical experience, thereby allowing for program modification on the part of the CI and the student.
- Sections 1 and 2 are to be returned to the academic program for review at the conclusion of the clinical experience. Section 1 may be made available to future students to acquaint them with the learning experiences at the clinical facility. Section 2 will remain confidential and the academic program will not share this information with other students.
- The tools meet the needs of the physical therapist (PT) and physical therapist assistant (PTA) academic and clinical communities and where appropriate, distinctions are made in the tools to reflect differences in PT scope of practice and PTA scope of work.
- The student evaluation tool should not serve as the sole entity for making judgments about the quality of the clinical learning experience. This tool should be considered as part of a systematic collection of data that might include reflective student journals, self-assessments provided by clinical education sites, Center Coordinators of Clinical Education (CCCEs), and CIs based on the Guidelines for Clinical Education, ongoing communications and site visits, student performance evaluations, student planning worksheets, Clinical Site Information Form (CSIF), program outcomes, and other sources of information.

### **Acknowledgement**

We would like to acknowledge the collaborative effort between the Clinical Education Special Interest Group (SIG) of the Education Section and APTA's Education Department in completing



this project. We are especially indebted to those individuals from the Clinical Education SIG who willingly volunteered their time to develop and refine these tools. Comments and feedback provided by academic and clinical faculty, clinical educators, and students on several draft versions of this document were instrumental in developing, shaping, and refining the tools. Our gratitude goes out to all of those individuals and groups who willingly gave their time and expertise to work toward a common voluntary PT and PTA Student Evaluation Tool of the Clinical Experience and Clinical Instruction.

Ad Hoc Group Members: Jackie Crossen-Sills, PT, MS, Nancy Erikson, PT, MS, GCS, Peggy Gleeson, PT, PhD, Deborah Ingram, PT, EdD, Corrie Odom, PT, DPT, ATC, and Karen O'Loughlin, PT, MA

**© 2003 American Physical Therapy Association. All rights reserved. Duplication of this form in its entirety is permitted; however, any revision, addition, or deletion is prohibited.**

**SECTION 1: PT STUDENT ASSESSMENT OF THE CLINICAL EXPERIENCE**

Information found in Section 1 may be available to program faculty and students to familiarize them with the learning experiences at this clinical facility.

1. Name of Clinical Education Site \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_
2. Clinical Experience Number \_\_\_\_\_
3. Specify the number of weeks for each applicable clinical experience/rotation.  
 \_\_\_\_\_ Acute Care/Inpatient Hospital Facility      \_\_\_\_\_ Rehabilitation/Sub-acute Rehabilitation  
 \_\_\_\_\_ ECF/Nursing Home/SNF      \_\_\_\_\_ School/Preschool Program  
 \_\_\_\_\_ Federal/State/County Health      \_\_\_\_\_ Wellness/Prevention/Fitness Program  
 \_\_\_\_\_ Industrial/Occupational Health Facility      \_\_\_\_\_ Other \_\_\_\_\_

Orientation

4. Did you receive information from the clinical facility prior to your arrival?     Yes     No
5. Did the on-site orientation provide you with an awareness of the information and resources that you would need for the experience?     Yes     No
6. What else could have been provided during the orientation? \_\_\_\_\_

Patient/Client Management and the Practice Environment

**For questions 7, 8, and 9, use the following 4-point rating scale:**  
 1= Never    2 = Rarely    3 = Occasionally    4 = Often

7. During this clinical experience, describe the frequency of time spent in each of the following areas. Rate all items in the shaded columns using the above 4-point scale.

Diversity Of Case Mix	Rating	Patient Lifespan	Rating	Continuum Of Care	Rating
Musculoskeletal	0	0-12 years	0	Critical Care, ICU, Acute	0
Neuromuscular	0	13-21 years	0	SNF/ECF/Sub-acute	0
Cardiopulmonary	0	22-65 years	0	Rehabilitation	0
Integumentary	0	over 65 years	0	Ambulatory/Outpatient	0
Other (GI, GU, Renal, Metabolic, Endocrine)	0			Home Health/Hospice	0
				Wellness/Fitness/industry	0

8. During this clinical experience, describe the frequency of time spent in providing the following components of care from the patient/client management model of the Guide to Physical Therapist Practice. Rate all items in the shaded columns using the above 4-point scale.

Components Of Care	Rating	Components Of Care	Rating
Examination		Diagnosis	0
• Screening	0	Prognosis	0
• History taking	0	Plan of Care	0
• Systems review	0	Interventions	0
• Tests and measures	0	Outcomes Assessment	0
Evaluation	0		

9. During this experience, how frequently did staff (i.e., CI, CCCE, and clinicians) maintain an environment conducive to professional practice and growth? Rate all items in the shaded columns using the 4-point scale on page 4.

Environment	Rating
Providing a helpful and supportive attitude for your role as a PT student.	0
Providing effective role models for problem solving, communication, and teamwork.	0
Demonstrating high morale and harmonious working relationships.	0
Adhering to ethical codes and legal statutes and standards (e.g., Medicare, HIPAA, informed consent, APTA Code of Ethics, etc).	0
Being sensitive to individual differences (i.e., race, age, ethnicity, etc).	0
Using evidence to support clinical practice.	0
Being involved in professional development (e.g., degree and non-degree continuing education, in-services, journal clubs, etc).	0
Being involved in district, state, regional, and/or national professional activities.	0

10. What suggestions, relative to the items in question #9, could you offer to improve the environment for professional practice and growth? \_\_\_\_\_

Clinical Experience

11. Were there other students at this clinical facility during your clinical experience? (Check all that apply):

- Physical therapist students
- Physical therapist assistant students
- From other disciplines or service departments (Please specify \_\_\_\_\_)

12. Identify the ratio of students to CIs for your clinical experience:

- 1 student to 1 CI
- 1 student to greater than 1 CI
- 1 CI to greater than 1 student; Describe \_\_\_\_\_

13. How did the clinical supervision ratio in Question #12 influence your learning experience?
14. In addition to patient/client management, what other learning experiences did you participate in during this clinical experience? (Check all that apply)
- Attended in-services/educational programs
  - Presented an in-service
  - Attended special clinics
  - Attended team meetings/conferences/grand rounds
  - Directed and supervised physical therapist assistants and other support personnel
  - Observed surgery
  - Participated in administrative and business practice management
  - Participated in collaborative treatment with other disciplines to provide patient/client care (please specify disciplines) \_\_\_\_
  - Participated in opportunities to provide consultation
  - Participated in service learning
  - Participated in wellness/health promotion/screening programs
  - Performed systematic data collection as part of an investigative study
  - Other; Please specify \_\_\_\_
15. Please provide any logistical suggestions for this location that may be helpful to students in the future. Include costs, names of resources, housing, food, parking, etc. \_\_\_\_

Overall Summary Appraisal

16. Overall, how would you assess this clinical experience? (Check only one)
- Excellent clinical learning experience; would not hesitate to recommend this clinical education site to another student.
  - Time well spent; would recommend this clinical education site to another student.
  - Some good learning experiences; student program needs further development.
  - Student clinical education program is not adequately developed at this time.
17. What specific qualities or skills do you believe a physical therapist student should have to function successfully at this clinical education site? \_\_\_\_
18. If, during this clinical education experience, you were exposed to content not included in your previous physical therapist academic preparation, describe those subject areas not addressed.
19. What suggestions would you offer to future physical therapist students to improve this clinical education experience? \_\_\_\_
20. What do you believe were the strengths of your physical therapist academic preparation and/or coursework for this clinical experience? \_\_\_\_
21. What curricular suggestions do you have that would have prepared you better for this clinical experience? \_\_\_\_

## SECTION 2: PT STUDENT ASSESSMENT OF CLINICAL INSTRUCTION

Information found in this section is to be shared between the student and the clinical instructors) at midterm and final evaluations. Additional copies of Section 2 should be made when there are multiple CIs supervising the student. Information contained in Section 2 is confidential and will not be shared by the academic program with other students.

### Assessment of Clinical Instruction

22. Using the scale (1 - 5) below, rate how clinical instruction was provided during this clinical experience at both midterm and final evaluations (shaded columns).

*1= Strongly Disagree 2=Disagree 3= Neutral 4=Agree 5= Strongly Agree*

<b>Provision of Clinical Instruction</b>	<b>Midterm</b>	<b>Final</b>
The clinical instructor (CI) was familiar with the academic program's objectives and expectations for this experience.	0	0
The clinical education site had written objectives for this learning experience.	0	0
The clinical education site's objectives for this learning experience were clearly communicated.	0	0
There was an opportunity for student input into the objectives for this learning experience.	0	0
The CI provided constructive feedback on student performance.	0	0
The CI provided timely feedback on student performance.	0	0
The CI demonstrated skill in active listening.	0	0
The CI provided clear and concise communication.	0	0
The CI communicated in an open and non-threatening manner.	0	0
The CI taught in an interactive manner that encouraged problem solving.	0	0
There was a clear understanding to whom you were directly responsible and accountable.	0	0
The supervising CI was accessible when needed.	0	0
The CI clearly explained your student responsibilities.	0	0
The CI provided responsibilities that were within your scope of knowledge and skills.	0	0
The CI facilitated patient-therapist and therapist-student relationships.	0	0
Time was available with the CI to discuss patient/client management.	0	0
The CI served as a positive role model in physical therapy practice.	0	0
The CI skillfully used the clinical environment for planned and unplanned learning experiences.	0	0
The CI integrated knowledge of various learning styles into student clinical teaching.	0	0
The CI made the formal evaluation process constructive.	0	0
The CI encouraged the student to self-assess.	0	0

23. Was your CI(s) evaluation of your level of performance in agreement with your self-assessment?

Midterm Evaluation  Yes  No

Final Evaluation  Yes  No

24. If there were inconsistencies, how were they discussed and managed?

Midterm Evaluation \_\_\_\_

Final Evaluation \_\_\_\_

25. What did your CI(s) do well to contribute to your learning?

Midterm Comments \_\_\_\_

Final Comments \_\_\_\_

26. What, if anything, could your CI(s) and/or other staff have done differently to contribute to your learning?

Midterm Comments \_\_\_\_

Final Comments \_\_\_\_

**Thank you for sharing and discussing candid feedback with your CI(s) so that any necessary midcourse corrections can be made to modify and further enhance your learning experience.**

## Weekly Planning Form

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

Week of Clinical Learning Experience (1-12) \_\_\_\_\_

Rotation: \_\_\_\_\_

Student's Review of Week

Have you met your objectives from the previous week?

Provide examples:

Areas to Improve:

Objectives for the next week:

Strategies to meet objectives:

## **CI's Review of Week**

Does the student demonstrate good self-assessment skills?

Is the student demonstrating initiative in planning learning experiences?

Has the student met the previous week's objectives?

Are the new objectives appropriate?

Additional Comments: (Use Reverse Side)



**Appendix D. Acknowledgement of Student Handbook**

I acknowledge that I have received, read, and understand the DPT Student Handbook.

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

## **Appendix E. Log of Student Handbook Distribution & Edits**

May 29, 2015	Last Edited, AH
June 2, 2015	Class of 2018 received handbook, AH
August 27, 2015	Edits regarding removal of CNBHS Student Handbook, AH
May 2016	Editorial changes, Student Progress Committee
June 1, 2016	Classes of 2017, 2018, and 2019 received handbook, AH
July 14, 2016	CNBHS Academic Review Board and Appeals Committee information added, AH
November 13, 2017	Added Clinical Education Manual to Appendix C, Resulted in “Acknowledgement of Student Handbook becoming Appendix D, and “Log of Handbook Distribution & Edits becoming Appendix E”. AH
May 25, 2018	Edited Clinical Education Class Numbers, AH
May 24, 2019	Edited Handbook to recognize Simmons University and College of Natural, Behavioral, and Health Sciences. Updated DPT Mission. Made minor edits. Modified links for new Web sites, updated descriptions of various offices and contacts. JAB
May 29, 2019	Updated Clinical Education Handbook. EM and JAB
July 26, 2019	Omitted paragraph on walking during graduation prior completing all courses. JAB