Doctor of Physical Therapy Student Handbook

University of Cincinnati

College of Allied Health Sciences

Department of Rehabilitation, Exercise, and Nutrition Sciences



Welcome to the University of Cincinnati DPT Program!

Dear Student,

This handbook has been compiled to provide insight into the Doctor of Physical Therapy program at the University of Cincinnati. Hence, the handbook is designed to inform you about the various program policies as well as the program procedures that will be important to you. All are advised to read the information carefully and to ask questions about coursework, clinical requirements, academic standards, the College of Allied Health Sciences and the Physical Therapy program. Although this handbook is specific to the PT program, the Graduate Handbook details policies not outlined in this handbook that are important to you as a graduate student in this University. Therefore, students are advised to access the Graduate Handbook at: http://www.grad.uc.edu (click on "Current Students" and then "Student Handbook") and are also directed toward additional information that can be provided by the Graduate School, the Academic Advisors and the Director of Clinical Education. Students are further advised that they must abide by the University of Cincinnati's Student Code of Conduct (SCOC).

I hope that you will find this handbook useful as you embark on your graduate education in physical therapy.

Sincerely,

Chalu Engelhard

DPT Program Director



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College of Allied Health Sciences

Mission

The College of Allied Health Sciences educates and prepares future allied health and other health science professionals to provide high quality service in their respective fields. In conjunction with community- based partners, students achieve clinical skills and learn the values of critical thinking, good communication, teamwork, cultural humility and service learning. The college's faculty is committed to excellence in teaching, research, service and leadership.

Vision

It is the belief of the faculty that the vision and mission of the college will be served best by encouraging our students at all levels, by explanation and by example to:

- Strive for excellence in the scientific, professional and humanistic aspects of their chosen discipline.
- Be aware of the changing needs and demands in health professions which may lead to changes in practice and/or education patterns.
- Participate in activities which enhance the role played by all allied health professions.
- Practice in a manner current and consistent with well-established methods, and use treatments which have been fully explained to, and accepted by, the patient or client.
- Provide an environment conducive to gaining an awareness of the importance of lifelong learning.
- Foster an open and collaborative relationship with other disciplines.

DPT Program Overview

Vision

Transforming our profession and community through education, research, service, and leadership.

Mission

It is the mission of the University of Cincinnati's physical therapy program to:

- Utilize evidence, reflection, and contemporary practice in student education.
- Support the professional development of students and faculty.
- Promote scholarly activity which drives the field of physical therapy.
- Serve the local, regional, and global communities.
- Exemplify professional, interprofessional and academic leadership.

Philosophy

The physical therapy program fosters mastery of foundational and applied sciences in conjunction with the development of professional behaviors as the cornerstones of physical therapy practice. The program values the uniqueness of each student and faculty member as it strives for excellence in the classroom and clinic. We are committed to education, research, service and leadership that will transform our profession and community.

Faculty Information Core Faculty Information

Name	Education	Contact Information
 Chalee Engelhard, PT, EdD, MBA DPT Program Director Board Certified Clinical Specialist in Geriatric Physical Therapy, Emeritus Graduate of the Fellowship in Education Leadership Fellow of the National Academies of Practice Professor, Tenured 	 BHS (University of Kentucky) MBA (Thomas More University) EdD (University of Cincinnati) 	<u>Chalee.engelhard@uc.edu</u> (513) 558-7481 CAHS, HSB 274
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Associated Faculty with 50% or Greater Teaching Responsibility

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8 Semester Program Curriculum

		Semester #1 - Summer		
	Course #	Course Name	# of Credits	Course Instructors
	PT 8061C	Gross Anatomy	7	Lui/Gleason/Alt
	PT 8079C	Interventions I	3	Just
	PT 8031	Clinical Medicine I	3	Just
	PT 8071	Professional Roles I	2	Boyd
	PT 8076	Evidence Based PT I	1	Dunning
			16	
		Semester #2 - Fall		
	Course #	Course Name	# of Credits	Course Instructors
	PT 8041C	Movement Science I: UE	3	Torbeck
ar	PT 8077	Evidence Based PT II	2	Dunning
First Year	PT 8080C	Documentation & Interview Skills	2	Rebitski
irst	PT 8081C	Examination I: UE	4	Rebitski
ш	PT 8087C	Interventions II: Physical Agents	1	Earnest
	PT 8062C	Neuro Anatomy	4	Liu
			17	
		Semester #3 - Spring		
	Course #	Course Name	# of Credits	Course Instructors
	PT 8056C	Neurologic PT I	4	Leugers
	PT 8042C	Movement Science II: LE	3	Torbeck
	PT 8082C	Examination II: LE and Spine	4	Rebitski
	PT 8088C	Interventions III: Therapeutic Exercise	5	Allen
	PT 8032	Clinical Medicine II	3	Just
			19	

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		Semester #4 - Summer				
	Course #	Course Name	# of Credits	Course Instructors		
	PT 8094	Clinical Medicine III: Pain Management	2	Durban		
	PT 8067C	Medical I	3	Just		
	PT 8058C	Pediatrics/Geriatrics	4	Bookser-Feister		
	PT 9009	Clinical Seminar I	2	Boyd		
			11			
	Semester #5 - Fall					
	(10 Week Block Clinical & 7 Week Block Instruction)					
	Course #	Course Name	# of Credits	Course Instructors		
	PT 9001	PT Practice I	9	Boyd		
Second Year	PT 8046C	Musculoskeletal PT I: UE	3	Allen		
p p	PT 8066C	Medical II: Integumentary	2	Leugers		
l Ö	PT 8072	Professional Roles II (1/2 Semester)	2	Leugers		
S	РТ 9007	Special Topics I	2	Section Specific		
	PT 8083C	Musculoskeletal PT I: Spine	3	Allen		
			21			
	Semester #6 - Spring					
	Course #	Course Name	# of Credits	Course Instructors		
	PT 8047C	Musculoskeletal PT III: LE	3	Allen		
	PT 8057C	Neurological PT II	4	Leugers		
	PT 9008	Special Topics II	2	Section Specific		
	PT 9010	Clinical Seminar II	1	Boyd		
	PT 8099	Differential Diagnosis	3	Just		
	РТ 8078	Evidence Based PT III	1	Strenk		
			14			

	Semester #7 - Summer					
	Course #	Course Name	# of Credits	Course Instructors		
	PT 9002	PT Practice II	12	Boyd		
	PT 8073	Professional Roles III	1	Engelhard		
Year			13			
Third	Semester #8 - Fall					
⊨	Course #	Course Name	# of Credits	Course Instructors		
	PT 8074	Professional Roles IV	1	Engelhard		
	PT 9003	PT Practice III	14	Boyd		
			15			

Program and Faculty Goals

Goal 1: The UC DPT Program will promote excellence in the classroom and clinic by:

- Weaving the most current evidence, reflection, and contemporary practice into DPT student education.
- Encouraging excellence in student performance with e-portfolios, professional behavior assessments, clinical education performance, and pass rates.
- Providing a culture of excellence in clinical decision-making, interprofessional education, and demonstration of the APTA Core Values.
- Providing learning experiences that value each individual's contributions to promote greater understanding of cultural humility and varying viewpoints.

Outcome – Students will achieve entry level performance as evidenced by NPTE pass rates (100% ultimate pass rate), Professional Behavior documents, and Clinical Internship Evaluation Tool (CIET).

Goal 2: The DPT Program will support excellence in professional, lifelong learning.

Outcome – Students will attend at least one conference during their DPT Program experience as evidenced by the participation of students and faculty at local, state, regional and national conferences/events.

Goal 3: The DPT Program will promote scholarly activity and/or clinical excellence with our students and faculty to drive the field of physical therapy forward.

Outcome – Students will participate in at least one faculty led scholarly or clinical excellence activity during their DPT Program experience as evidenced by publications, presentations, grant funding, awards, advanced certification, advanced technique development, or other scholarly products.

Goal 4: The DPT Program will encourage excellence in social responsibility as students and faculty will serve the local, regional, and global communities.

Outcome – Students will serve in at least two volunteer, faculty-involved experiences during their time in the DPT program by participating in experiences such as volunteering at a pro bono clinic, international experience, or collaborating with professional organizations.

Goal 5: The DPT program's students and faculty will exemplify excellence in professional, interprofessional, and academic leadership.

Outcome – Students and faculty will have 100% APTA membership; faculty and students will hold local, state, regional or national positions; and demonstrate active engagement in UC interprofessional experiences.

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Student Goals

Students of the UC DPT program enter the profession as autonomous, reflective healthcare practitioners who:

Goal 1: Are competent, safe, and independent in physical therapy practice across the lifespan and in the numerous settings of physical therapy practice.

Outcome: Students will achieve entry-level by the last clinical rotation on the CIET.

Goal 2: Students will utilize evidence-based practices to direct their clinical decision making.

Outcome: Students will demonstrate evidence-based practices as demonstrated by the CIET, completing clinical projects such as in-service, administrative project, active engagement in clinical site evidence-based practice meeting, or grand rounds-UC GNI.

Goal 3: Demonstrate the APTA Core Values: accountability, altruism, collaboration, compassion and caring, duty, excellence, integrity, and social responsibility.

Outcome: Students will demonstrate reflection and growth through the Professional Behaviors Assessment and ultimately reach entry-level prior to graduation.

Goal 4: Exhibit professional and effective verbal, non-verbal, and written communication skills.

Outcome: Students will meet entry-level by the last clinical rotation on the CIET.

Goal 5: Participate in activities that advance the profession of physical therapy and that benefit the local, regional, national, and/or global community.

Outcome: Students will participate in at least one professional development event prior to graduation.

Goal 6: Are motivated, engaged, agile, and adaptive learners who demonstrate life-long learning.

Outcome: Students will demonstrate reflection and growth through the Professional Behaviors Assessment and ultimately achieve entry-level prior to graduation.

Goal 7: Engage in interprofessional education and collaborative practice and understand their influence on patient outcomes.

Outcome: Students will participate in at least two College-sponsored interprofessional activities prior to graduation and will experience at least one interprofessional education touchpoint during a clinical rotation.

Graduate Goals

Graduates of the UC DPT program are autonomous, reflective healthcare practitioners who in practice will:

Goal 1: Adhere to legal practice standards, including all federal, state, and institutional regulations related to patient/client care and to fiscal management.

Goal 2: Exhibit caring, compassion and empathy in providing services to patients/ clients.

Goal 3: Demonstrate excellence in professional behavior in interactions with patients/clients, family members, caregivers, other health providers, students, other consumers, and payers.

Goal 4: Actively participate in or support clinical education of students.

Goal 5: Interact and practice in collaboration with a variety of professionals.

Goal 6: Expressively and receptively communicate in a culturally humility manner with patients/ clients, family members, caregivers, practitioners, interdisciplinary team members, consumers, payers, and policy makers.

Goal 7: Consistently apply current knowledge, theory and professional judgment while considering the patient/client perspective in patient/client management.

Goal 8: Consistently and critically evaluate sources of information related to physical therapist practice, research and education and apply knowledge from these sources in a scientific manner and to appropriate populations.

Outcome: Graduates will exhibit each of the above professional characteristics as indicated by the 12 month and/or 3-year graduate survey.

Outcome: Graduates will exhibit each of the above professional characteristics as indicated by the employer survey.

Program Policies

Accreditation

Policy 1

It is important to understand that while the University of Cincinnati and all regional campuses are accredited by the Higher Learning Commission, the Doctor of Physical Therapy program at University of Cincinnati is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE). As a part of being an accredited program, which is necessary in order to receive licensure, faculty and students have roles and responsibilities to ensure compliance with CAPTE policies and procedures and to align our learning experience with the program's mission and vision.

Recruitment

Policy 2

Recruitment occurs in three phases throughout the year. The initial phase of recruitment occurs in the spring semester (12 months prior to admission). The first phase has two primary foci. The first is the Junior Early Assurance Pathway (JEAP) which targets potential applicants enrolled at UC since their freshman year and currently enrolled in the Health Sciences Program. The second focus includes the High School Early Assurance Pathway (HEAP) which occurs in coordination with the college's admission team as this pathway focuses on the recruitment of high school seniors. The second phase begins when the Physical Therapy Centralized Application System (PTCAS) application is available (midJune) and continues through the application due date (traditionally on October 1). During this phase, the program offers numerous in-person and virtual (on-line) information sessions to provide potential applicants data about the program and an opportunity to interact with current students and faculty. The final phase of the recruitment process is focused on yielding the applicants who receive offers of admission.

Admissions

Policy 3

Each year the program takes intentional steps to ensure that the incoming cohort has the capacity to meet the rigor, goals, mission and vision of our program while maintaining the CAPTE-set planned cohort size. This is accomplished through careful consideration of each applicant. Each applicant completes a standardized application through PTCAS. The program currently considers Grade Point Average (GPA), Kira Talent Assessment outcomes, observation hours and essay review measures for acceptance into the program. Application review includes multiple phases with the applicants being scored on the data listed above including determining how well the applicant may align ("fit") with the mission and goals of the program. After each admissions cycle is complete, the admissions process is examined to identify any potential sources of bias and outlying trends, which are addressed prior to the next review cycle.

With respect to planned class size, the Admissions Chair and Committee follow a set procedure to ensure class size does not lead to over-enrollment. Admission offers begin prior to the Winter Season break and are sent out in carefully planned waves. As acceptances are received, the Admission's Chair and Program Coordinator meet to determine the number of applicants who will be in the next wave. The cycle becomes iterative until the class size parameters are met.

Academic Requirements

Policy 4

Students admitted to the Physical Therapy program are required to carry the full semester load and to meet the criteria of the College and the program as follows:

- Enrollment in all required courses each semester as outlined in the program curriculum.
- Earn a minimum GPA of 3.0 each semester.
- Earn a minimum cumulative GPA of 3.0.
- Earn a grade of B or better in all courses graded A through F.
- Earn a grade of P in all courses graded P (pass) or F (fail).
- Complete all courses in an academic semester with a grade of B or better or with a grade of P before advancing to the next semester's classes.

If, during one semester, a grade of "C" is received in any one or any two courses that are required in the PT program, the course(s) must be repeated. In such cases, the student will be placed on academic probation within the program and will be restricted from enrolling in any succeeding physical therapy courses until the course(s) has/have been repeated at the next offering and a grade of "B" or better has been attained in each course. Physical therapy courses are offered one semester per year; therefore, in the event of the need to repeat a course, the completion of the curriculum will be delayed one year. In this case the student must submit to the Program Director a written request for a program leave of absence, and is subject to the conditions of the Leave of Absence policy.

If the student does not attain a grade of "B" or better after taking a course a second time, the student will be dismissed from the physical therapy program. If a student, during another semester, again, receives a grade of "C," or "F," the student will be dismissed from the physical therapy program. A student is not eligible for academic probation or a leave if the student, in any one semester, receives a grade below a B in three or more courses or receives an "F" in any course.

Clinical Education Requirements

Clinical education is an important part of the Physical Therapy curriculum. Students must successfully complete all Physical Therapy Practice courses (clinical rotations) receiving a grade of "P" prior to progressing in the curriculum.

Required Program Activities

The Program works diligently to provide each student with opportunities to learn inside and outside of the classroom to become graduates who are highly successful, well-rounded, entry level clinicians. All students are required to participate in the following professional development activities:

- Three interprofessional education (IPE) activities with IPE being defined as when a student learns about, with and from other student(s) from a different discipline.
 - Within two weeks of participating in an IPE activity, students are to complete and upload a reflection in the Canvas PT Community.
- Advanced Practice: Elevating Person-Centered Care (AP) activities occur when the student engages with patients/clients outside of required student experiences on campus and/or in clinic. As a part of this program requirement, students will volunteer their time to engage in one AP activity such as participating in community events, attending formalized webinars/lectures, and/or developing projects that connect our

community with resources. These patient/community experiences will ultimately influence students' future practice as a physical therapist. In the end, students' intentional volunteerism will elevate their skills in person-centered care. Within two weeks of participating in an AP activity, students are to complete and upload a reflection in the Canvas PT Community.

• Within two weeks of participating in an AP activity, students are to complete and upload a reflection in the Canvas PT Community.

In addition, all students will have an APTA-sponsored conference experience such as attending the Combined Sections Meeting (CSM), Ohio Physical Therapy Association State Conference (OPTA) or Southwest District Meeting. The outcome of attending a conference or professional meeting is for students to enhance their passion for the profession, learn important networking skills and gain understanding of the importance of lifelong learning. To facilitate this, the student is to experience professional development in the form of attending a variety of educational sessions, potentially presenting in one of these forums, interact with experts in the field, develop networking skills, get to know the faculty outside of the classroom, experience role modeling and gain understanding of where the profession is headed and understand their role in that trajectory.

Each student has a choice of one of the three below options, at a minimum:

- Option A Attend CSM
- Option B Attend OPTA Conference (Or other faculty agreed upon conference)
- Option C Attend two OPTA Southwest (SW) district meetings and earn 4 education hours in the APTA Learning Center

Within two weeks of attending a conference, students are to complete and upload the conference toolkit in the Canvas PT Community.

Professional Behavior Requirements

All students must demonstrate appropriate professional behavior as defined in the Professional Behaviors policy. Satisfactory progress is demonstrated by exhibiting consistent growth from the Beginning Level Criteria to Intermediate Level and eventually to Entry Level by the end of experiencing the DPT curriculum.

Included in the competencies for each course are not only knowledge, skills, and attitudes, but also safety, ethics, judgment, appropriate behavior (see Professional Behaviors policy), communication, documentation, etc. To be awarded a grade of "B" or better, a student must demonstrate a satisfactory level of performance in these areas as determined by the faculty.

Program responsibilities such as weekly cleaning of the labs and completion of course evaluations are considered professional behavior requirements. At the end of each term, students are required to complete course evaluations for each course in which they are registered. Feedback on courses is required to meet accreditation guidelines and to provide the faculty with information needed to make changes and improvements to their courses. Students who do not fulfill program responsibilities may be placed on a professional behavior plan.

All students must submit, within the specified time frames, required documentation of physicals, all needed immunizations, CPR certification and all other required program documentation. Failure to do so will result in suspension from all program activities, including classes and clinical rotations, and may result in dismissal from the program. Please refer to Additional Requirements for further information.

Progression through the Program

Policy 5

All students will be reviewed by the faculty, at a minimum, following each academic semester. The progress of each student is monitored by reviewing grade reports, professional behaviors, ability to meet the program technical standards and clinical performance.

If a student is identified as having academic/clinical issues, the program has established Success Teams to support our students. Based on the basic belief that each student admitted into our program can be successful, efforts to take a proactive approach to student support and the use of "abundance" language, are in place. A Success Team surrounds students who are in need of intervention to realign their path towards resolution of an academic and/or clinical issue. These Teams are a support and resource for students needing additional guidance.

Formal Success Plans for Students on Campus

Facilitators for Initiating a Formal Success Plan

The process for improving academic performance for campus students is designed to promote their success during the program's didactic phase. The initiation of a formal success plan involves key faculty members, including the student's faculty advisor, primary course instructors, and the program director.

When a student faces significant didactic issues, such as struggling with coursework, or when there are concerns about the student's affective domain behavior, faculty can implement a formal success plan. There are two types of oncampus formal success plans:

Program-Driven Formal Success Plan (Major)

In cases involving multiple classes and/or significant multiple domain concerns, faculty will implement a programdriven success plan. The faculty advisor takes the lead, providing crucial support and guidance for the student. Collaborating with faculty subject matter experts across relevant courses, the advisor coordinates the details of the success plan, including plan content, milestones, and timeline. The faculty advisor will also communicate the plan to the Program Director.

If the student is unsuccessful in completing the program-driven plan, they will meet with the program director and success team lead to review the consequences outlined in their success contract. These consequences may include pausing progression in the program or dismissal from the program.

Faculty-Driven Formal Success Plan (Minor)

For issues within a single course, the process is faculty driven. In this case, the primary instructor for the course leads the success plan. When faculty identifies that a student is underperforming in a course, they will initiate a formal success plan. Faculty may coordinate with others to provide necessary resources. Like the program-driven process, there is required communication with the Program Director and the faculty advisor. The faculty advisor supports the student, initiating at least one communication to offer assistance.

If the student is not successful in the faculty-driven success plan, they will meet with the program director and facultydriven lead to review the consequences. These consequences may include transitioning to a major intervention, pausing progression in the program or dismissal from the program.

By following these structured processes and ensuring clear communication among faculty, advisors, and students, we create a supportive environment conducive to academic success.

Please see <u>Appendix L: Flow Chart Representations of the Success Plan Processes</u> for flow chart representations of the Success Plan processes.

The decision for dismissal is made by a majority vote of the full-time physical therapy faculty. The Program Director has a final meeting with the student to inform the student of the decision and to explore potential options. A student will only be assigned to a clinical rotation if the student has met all necessary program requirements.

Dismissal from the Program

Policy 6

Reasons for dismissal from the program include, but are not limited to, the following:

- A student who takes a course and receives a grade of "C" and upon taking the same course a second time, receives a grade lower than a "B".
- A student who, after receiving a grade of "C" in any course, fails to take the course the next time the course is offered.
- A student who, after withdrawing from classes, fails to return to the program by the term stated in the Leave of Absence letter.
- A student who, after remediating a grade of "C" in one semester by successfully retaking the course the next time it is offered, receives a grade lower than a "B" in another course or withdraws from classes.
- A student who receives, in any one semester, a grade that is lower than a "B" in three or more required courses in the PT program or receives an "F" in any required course will be immediately dismissed from the physical therapy program regardless of semester or cumulative GPA.
- A student who has withdrawn, with an approved leave of absence, returns and then withdraws a second time, or receives a grade of "C" in any subsequent course.
- A student who has failed to maintain a cumulative GPA above 3.0 during any three semesters in the program.
- A student who withdraws from a course and fails to take the course the next time it is offered.
- A student who achieves acceptable academic standing but, in the professional opinion of the faculty, demonstrates unacceptable professional behavior may not be recommended for a clinical experience or may be dismissed from the program. A decision to not place a student in a clinical experience or to dismiss a student from the program will occur only after a student has been notified of the faculty's concerns and has been given the opportunity to correct the deficiencies (see
- <u>Progression through the **Program** and <u>Professional Behaviors</u>).</u>
- A student who is unable to meet program's technical standards.
- A student who fails to submit required documentation within program timelines is also, upon a majority vote by the faculty, subject to dismissal.
- Violation of the University of Cincinnati Student Code of Conduct.

A student has the right to appeal a dismissal decision. See Appeal & Complaints Process.

Anyone dismissed from the Physical Therapy program may re-apply for admission after two academic years. Readmission will be determined by the Admissions Committee utilizing all admissions criteria and is a competitive process. The Committee will also take into consideration the reason for the dismissal. Faculty must also approve, by a majority vote, readmission.



Wrapping presents for the annual Christmas family donation!

Leave of Absence

Policy 7

On occasion, a student may experience academic difficulty, illness or personal issues which prevent the student from completing the requirements of a specific course and necessitates a withdrawal from classes. A request for leave of absence must be submitted to the program director in writing, within one week of the withdrawal and cannot exceed one calendar year.

Program faculty will review the request and have the discretion, but are not required, to grant such leaves. In addition, the faculty may recommend that the student complete specified activities while on leave that will allow the student to be better prepared to resume full-time studies upon their return. This may include, but is not limited to, additional coursework, tutoring, meeting with faculty, etc. Prior to their return, the student's academic record will be reviewed and, if courses which have already been completed are considered out of date, or if new requirements, courses, or competencies have been added to such curriculum, the faculty may stipulate that certain course be taken or retaken to meet requirements. A student may only be granted one leave of absence.

If a student withdraws, they must withdraw from all courses in which they are enrolled. Students are not permitted to withdraw from a specific course and remain enrolled in other courses.

Students must withdraw by the stated University deadline for withdrawal from classes or as permitted by University standards. Any student who withdraws from courses and is granted a leave of absence must repeat the courses the next time they are offered. Please note that PT courses are only offered once per year. Students must successfully complete the courses with a grade of B or better in each course.

If a student who has withdrawn, with an approved leave of absence, returns and then withdraws a second time, or receives a grade of "C" in any subsequent course, they will be dismissed from the program. A student who is in good academic standing and requests a leave of absence can be reinstated at the same course level if the leave is approved by the faculty and the student is reinstated within one year.

Students who request a leave of absence because they are academically ineligible to continue in the program due to a grade of "C" in one or two courses in a semester, will be required to repeat the course(s) the next time the course is offered.

Before returning to the program, the student must complete all additional requirements (as outlined in Additional Requirements). Proof of compliance with these additional requirements must be submitted prior to resuming courses. The student must notify the PT Program Director in writing of his/her continued intention to return to the program by the date stated in the letter informing the student that the request for a leave of absence has been granted.

In addition, the student is required to pay all fees required of incoming students by the stated deadline. A student who withdraws from any required physical therapy course without requesting and/or receiving a leave of absence from the program will be dismissed from the program.

Note: Students must register for at least one graduate course (minimum of 1 credit hour) during an academic year in order to maintain graduate student status within the University. If a student is unable to register for at least one graduate credit hour, then the student must request a leave of absence from the Graduate School. This request must be made on a Request for Leave of Absence form, obtained from the graduate school website (<u>https://grad.uc.edu</u>) and submitted to the program director.

The program director will forward the application to the department head and college dean for approval. Upon approval of the dean, the dean will forward the application to the Associate Dean of the Graduate School. The Associate Dean will notify the student in writing of the approval or denial of the request.

Please note that the Graduate School will only approve a leave of absence under very specific circumstances. Please refer to the Graduate School handbook for further details.

A program leave of absence as outlined in the Leave of Absence Policy does not typically require that the student request a leave of absence from the Graduate School. A request for a leave from the Graduate School is only required if the student will not be registered for at least 1 graduate credit hour during an academic year.

Students with financial aid or student loans should confer with Student Financial Aid @ (513) 556-1000 or <u>Financial Aid</u> prior to requesting a leave of absence to ascertain the consequences of such action on their loan status.

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PT Program 25th Anniversary Celebration!

Completion/Retention of the Program

Policy 8

To complete the PT program, students must satisfactorily complete all program courses and requirements, including all clinical assignments and meet all University of Cincinnati obligations, including all financial responsibilities. In order to be certified for graduation, the Graduate School requires that a student have a cumulative GPA of 3.0 or higher and have no grades of I, F, or NG on their transcript.

Physical Therapy Program Advising

Policy 9

Each student will be assigned a faculty advisor. Students are required to contact and arrange a meeting with their advisor during the fall semester of each year and as needed or requested in subsequent semesters. Academic progress and professional development are to be discussed and documented. If, during the student review by the faculty which takes place at the end of each semester (see

<u>Progression through the</u> **Program**), or at any other time, it is determined that a formal professional behavior plan is needed for a student, the appropriate faculty member which may be their faculty advisor, instructor, and/or Director of Clinical Education (DCE) will meet with the student. The faculty member will be responsible for overseeing the writing, initiation, and completion of the professional behavior plan with support as needed from the Program Director. See Professional Behaviors.

It is also recommended that a student discuss any extenuating circumstances that might affect the student's attendance or performance in class with their faculty advisor during their annual meetings.

The goals of Physical Therapy program advising are as follows:

- To help students understand the day-to-day life as a PT.
- To help students evaluate personal strengths, weaknesses and areas of concern that might affect successful completion of the PT program.
- To facilitate, if needed, the development of a success plan.
- Be a member or lead of the success team as needed.
- To assist the students with specific areas of academic concern.
- To assist those students who choose to leave the PT program through available information and referrals.
- To serve as a conduit to university student services as needed by the student.
- To confirm the student is on track with program requirements such as Interprofessional Education (IPE) and Advanced Practice touchpoints.

Note: The PT advisor does not replace the need for students to contact the college academic advisors, as needed.

Classroom Attendance

Policy 10

The PT program strongly recommends that students attend all classroom and laboratory meetings. If a student is absent from any course meeting, for any reason, the student is responsible for all information, assignments, homework, handouts, discussions, and any necessary additional assignments as determined by the instructor. In addition, if a student is absent, for any reason, the student is advised that missing classroom discussion, lab questions, assignments, checkoffs, quizzes, practicals, exams and/or any other activities and/or missing the date the above occur or are due, may have significant effects on the student's grade and ability to pass the course. A student who misses more than three consecutive days of classes must have a written note from their physician.

Students are responsible for their own attendance and, thus, take responsibility for consequences of non- attendance.

Note: Exceptions may be made to the policy above in individual courses as noted on the course syllabus.

Tardiness

Policy 11

Students are expected to be in the classroom or lab at the start of class and stay until all activities are completed. On all occasions, the student will be responsible for all activities missed and must recognize the consequences of an absence.

Note: Exceptions may be made to the policy above in individual courses as noted on the course syllabus.

Class Cancellation

Policy 12

In the event of an unscheduled University closure or cancellation of program classes, students may be required to make up the missed class time and/or have the class moved to being online. The decision to make up the class time is at the sole discretion of the course instructor.

Note: Exceptions may be made to the policy above in individual courses as noted in the course syllabus DPT Vision – Transforming our profession and community through education, research, service, and leadership



DPT students volunteering at the First Ladies Health Initiative

Physical Therapy Practicals

Policy 13

Practical examinations are given to students to assess competency in each patient evaluation, treatment and/or assessment skill. In addition to assessment concerning the actual performance of the skill, all practicals will include assessment of communication skills, any required adaptations, appropriate professional behavior and when indicated, decision making. All practicals must also include an assessment of safety.

Safety must be weighed such that a student who is unsafe during the practical will not pass the practical. Students must achieve a minimum grade of 74.6% or a "Pass (P)" on all practicals. If a student performs lower than a 74.6% or "Fail (F)", the instructor will determine whether the student will be permitted to re-take the practical and what, if any remediation, will take place. Practical dress code will be provided by the instructor in the course syllabi.

Note: Exceptions may be made to the policy above in individual courses as noted on the course syllabus.

Classwork Re-Takes

Policy 14

The decision to require/allow a student to re-take an exam, practical, quiz, in-class assignment and/or final is made solely by the instructor. The instructor is in no way obligated to allow a student to re-take an exam, practice, quiz, in-class assignments and/or final.

Classwork Make-Up

Policy 15

Students who are unable to attend a scheduled exam, quiz, in-class assignment, final exam or practical must notify the program office and the instructor prior to or at least within 24 hours of the scheduled exam, quiz, in-class assignment, final exam or practical. Written documentation of the reason for absence at the exam must be submitted to the instructor within 48 hours of the scheduled exam, quiz, in-class assignment, final exam or practical.

The instructor can do any of the following:

- Award a zero for the exam, quiz, in-class assignment, final exam or practical.
- Allow the student to take the exam at a later date and time without a penalty. Failure to take the exam on the indicated date and time may result in an "F" for the course.
- Allow the student to take the exam at a later date and time but average the grade of the exam with a score of zero from the exam missed. Failure to take the exam on the indicated date and time may result in an "F" for the course.
- Allow the student to take a make-up exam at a later date and time without penalty. Such a make-up may be in any format desired by the instructor and may include oral portions. Failure to take the make-up exam on the indicated date and time may result in an "F" for the course.
- Allow the student to take a make-up exam at a later date and time and subtract up to 50 points. Such a make-up may be in any format desired by the instructor and may include oral portions. Failure to take the make-up exam on the indicated date and time may result in an "F" for the course.

The decision about the make-up is made solely by the instructor. The decision of the instructor is final.

Note: Exceptions may be made to the policy above in individual courses as noted on the course syllabus.

Grading Scale Policy 16

The recommended grading scale for the PT program shall be as follows:

А	92.0-100
A-	88.0-91.9
B+	83.0- 87.9
В	74.6-82.9
С	69.6-74.5
F	69.5 or below

Each student must achieve a minimum of 74.6% to successfully complete each course. Students must realize that 74.6 is the minimum passing grade. As noted on the course syllabus, a student attaining less than 75% on any exam, assignment or project, including a final exam, may be required to meet with the course instructor two days after the return of the exam, assignment or project. The student may be required to do remedial work, as assigned by the instructor. In the event that a student passes a course but has done so by a minimal amount, the student may be required to perform additional work. The decision is left solely to the course instructor. It is the Policy of the Physical

Therapy program that a grade of "B" or better or a grade of "P" in courses graded as "Pass/Fail" must be achieved in all PT courses for a student to progress in the program.

A student who is unable to complete all course requirements by the end of the semester, may receive a grade of "I" (incomplete). A student will not progress in the program until the "I" grade has been resolved and replaced by a letter grade of B or better. (See Assignment of an Incomplete). Students should note that the grade of "D" is not given in graduate level courses. Students should also be aware that clinical courses are graded as "Pass / Fail". Standards for each are given in course syllabi.

Note: An instructor has the right to use an alternate grading scale. Exceptions may be made to the policy above in individual courses as noted on the course syllabus.

Academic and Non-Academic Misconduct

Policy 17

The Physical Therapy program is committed to educating students to assume the role of a physical therapy professional. Such a role is guided by the American Physical Therapy Association's Code of Ethics¹ and stresses ethics, adherence to acceptable professional behavior and avoidance of misconduct. Therefore, the program will not tolerate any forms of academic or non-academic misconduct. It is each student's responsibility to know and comply with the University's Student Code of Conduct (SCOC) and/or Rules and Regulations of the University of Cincinnati. The SCOC applies to student conduct that occurs on campus or University owned, leased or controlled premises as well as off-campus conduct. Students who violate the SCOC, University Rules and Regulations, APTA Code of Ethics and/or the law are subject to dismissal from the PT program.

Non-academic misconduct is described in the SCOC and includes criminal offenses such as theft, disturbing the peace, etc. In addition, since the PT program is a professional program, non-academic misconduct may also include behavior that is not specifically described in the SCOC such as inappropriate professional behavior. Instances of student misconduct resulting in criminal investigation must be reported to the PT Program Director.

It is the responsibility of the student to report all criminal investigations, arrests, convictions, and guilty pleas for any offense other than minor traffic violations to the PT Program Director as soon as possible after the occurrence but no later than seven calendar days after the occurrence. The reporting requirement includes DUI (driving under the influence) and OVI (operating a vehicle while intoxicated) offenses, any instance where the student is called into court as a defendant or any instance where the student is named a defendant in a lawsuit. If it is found that a student fails to report such an occurrence, the student is subject to immediate dismissal from the program.

The PT Program Director will report any violation of the SCOC, University Rules and Regulations, APTA Code of Ethics and/or the law to the Department Head, and, as appropriate, to the Dean of the College and, as appropriate, to the University Office of Legal Affairs and General Counsel, as soon as possible without unnecessary delay. The PT Program Director, in conjunction with the Department Head and the Dean and in consultation with the University Office of Legal Affairs and General Counsel, will determine whether any violation of the SCOC, University Rules and Regulations, APTA Code of Ethics and/or the law should be reported to the program faculty for a faculty hearing.

If it is determined that a faculty hearing is warranted, the PT Program Director will arrange a meeting with the student involved in the occurrence and the program faculty. Every effort will be made to arrange the meeting at a time when the full faculty is available. However, due to varied schedules and responsibilities of the faculty, this may not be possible. The meeting will be scheduled as soon as possible without unnecessary delay. The purpose of the meeting is to determine if the student should be dismissed from the program.

¹American Physical Therapy Association's Code of Ethics (https://www.apta.org)

The student is permitted to bring an advisor to the meeting. The advisor must be a university employee. The student will have 15 minutes to address the faculty followed by 15 minutes of questions from the faculty. The student's advisor is not permitted to address the faculty but may confer with the student during the hearing. Dismissal will be determined by a simple majority vote of the faculty at the meeting. Results of the hearing will be verbally conveyed to the student at the conclusion of the hearing followed by written notification within one week of the hearing.

In keeping with the APTA Code of Ethics, students who observe alleged instances of non- academic misconduct should consider reporting such instances to the PT Program Director or another faculty member. Students who report misconduct that results in a faculty hearing may be asked to attend a meeting with the faculty prior to the hearing.

Students in the PT program found to be responsible for violating the Student Code of Conduct and/or academic standards or who are found to be involved in academic dishonesty may receive an "F" in the course in which the violation or the academic dishonesty occurred and may be dismissed from the Physical Therapy program. While students are referred to the University of Cincinnati's Student Code of Conduct and the Graduate Student Handbook for additional information, students should be aware that the following are behaviors that shall be considered academically dishonest:

Aiding and Abetting Academic Misconduct

Knowingly helping, procuring, or encouraging another person to engage in academic misconduct.

Cheating

Any dishonesty or deception in fulfilling an academic requirement such as:

- 1. Use and/or possession of unauthorized material or technological devices during an examination, any written or oral work submitted for evaluation and/or grade.
- 2. Obtaining assistance with or answers to examination questions from another person with or without that person's knowledge.
- 3. Furnishing assistance with or answers to examination questions to another person.
- 4. Possessing, using, distributing or selling unauthorized copies of an examination or computer program.
- 5. Representing as one's own an examination taken by another person.
- 6. Taking an examination in place of another person.
- 7. Obtaining unauthorized access to the computer files of another person or agency and/or altering or destroying those files. Utilizing Artificial Intelligence (AI) to complete any work associated with the program such as an assignment, in class activity, paper or research without prior consent of the instructor and/or faculty member.

Fabrication

The falsification of any information, research statistics, lab data, or citation in an academic exercise.

Plagiarism

- 1. Submitting another's published or unpublished work in whole, in part or in paraphrase, as one's own without fully and properly crediting the author with footnotes, quotation marks, citations, or bibliographic references.
- 2. Submitting as one's own original work, material obtained from an individual, agency, or the internet without reference to the person, agency or webpage as the source of the material.
- 3. Submitting as one's own original work material that has been produced through unacknowledged collaboration with others without release in writing from collaborators.

Violating Ethical or Professional Standards

The violation of any ethical or professional standard as outlined by the College of Allied Health Sciences, University or the Physical Therapy Code of Ethics. Details regarding the process for dealing with alleged academic misconduct can be found on the website within Student Conduct & Community Standards.

Assignment of an "Incomplete"

Policy 18

The grade "I" or incomplete is awarded at the discretion of the faculty member when a student fails to complete an element of the assigned work in a course. An agreement is made between the student and the faculty member about the completion of the work and the date of the completion. Specific performance levels and consequences about non-completion and/or completion below a specific level should be outlined.

The PT program recognizes that the grade "I" may be submitted for a student in the program. When a faculty member in the program determines that an "I" is the appropriate grade, the faculty member and the student will complete the PT Incomplete Grade Form. This form includes the following:

- 1. Student name and ID number
- 2. Faculty name
- 3. Course, course number, semester and year
- 4. Reason for "I"
- 5. Specific assignment(s) that must be completed for the course
- 6. Date the specific assignment(s) must be complete
- 7. Consequences of non-completion of assignment

Both the faculty member and the student must sign the form when the "T" is utilized. In addition, the faculty member must complete Part II of the form within one week of the date the assignment is due. Part II must indicate the final disposition of the student's status in the course. The original form will be placed in the student's file with a copy sent to the student.

While the PT program leaves the assignment of the "I" grade to the individual faculty member, consistent student performance is necessary to assure clinical competency. The PT program recognizes that extenuating circumstances may exist in which the grade of "I" may be granted in more than one class. Appropriate reasons for an "I" may include illness, death in the family, military assignments, surgery, medical leaves and other reasons which have been approved by the program faculty. In the event that one or more grades of "I" are earned during a semester(s), the program faculty will meet to determine if continuation in the program is appropriate for the student. It is also recognized that the grade

of "I" is not appropriate when a student has completed all assignments but has failed to achieve a grade of "B". In such cases, the grade earned by the student will be recorded.

Students should be aware that PT courses have pre- requisite course requirements that must be met prior to the commencement of the course. Therefore, if a student has a grade of "T" in such a pre-requisite course that has not been resolved prior to the start of a new academic term, the student will be prohibited from enrolling in subsequent PT courses. If this occurs, the student must complete the requirements necessary to change the "T" grade to a letter grade and enroll in the PT course the next time it is offered. Students who are unable to progress in the program due to an "T" grade must request a leave of absence as outlined in the Leave of Absence policy. The Incomplete Grade Form can be found in the Appendices.

Professional Behaviors

Policy 19

Through research, ten physical therapy-specific Professional Behaviors have been identified and are required for success in the profession. These behaviors, attributes or characteristics are not explicitly part of a professional's core of knowledge and technical skills, but equally important, these behaviors have been validated as defining professional behavior in physical therapy (May, et. al, 1995). These behaviors were initially identified as Generic Abilities. With the evolution of our profession and healthcare, a second investigation into this area by May, et al (2009) warranted a revision of the Generic Abilities to become the Professional Behaviors. Students in the physical therapy program must satisfactorily exemplify the ten PT specific professional behaviors and the three level of associated behavioral criteria throughout the PT program.

The intent of the Professional Behaviors Assessment Tool is to identify and describe the repertoire of professional behaviors deemed necessary for success in the practice of physical therapy. This Professional Behaviors Assessment Tool is intended to represent and be applied to student growth and development in the classroom and the clinic. It also contains behavioral criteria for the practicing clinician. Each Professional Behavior is defined and then broken down into developmental levels with each level containing specific behavioral criteria. The behavioral criteria are examples of behaviors one might demonstrate and are not exhaustive. Each developmental level builds on the previous level such that the tool represents growth over time in physical therapy education and practice. The Professional Behaviors Assessment Tool allows the student to build and strengthen skills in the affective domain in order to augment the cognitive and psychomotor domains. A sample and link to the entire Professional Behaviors Tool is located in the Appendices.

Opportunities to reflect on each Professional Behavior through self-assessment, and through peer and instructor assessment is critical for progress toward entry level performance in the classroom and clinic. A student does not need to possess each behavioral criteria identified at each level within the tool, however, should demonstrate, and be able to provide examples of the majority in order to progress from one level to the next.

Satisfactory progress is demonstrated by exhibiting consistent growth from the Beginning Level criteria to Intermediate Level and eventually to Entry Level by the end of all clinical education experiences.

The Professional Behaviors are:

- 1. Critical thinking
- 2. Communication
- 3. Problem solving
- 4. Interpersonal skills
- 5. Responsibility
- 6. Professionalism
- 7. Use of constructive feedback
- 8. Effective use of time and resources
- 9. Stress management
- 10. Commitment to learning

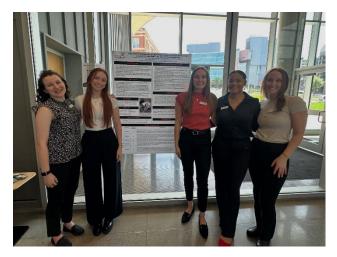
Mastery of these behaviors facilitates the ability to:

- 1. Generalize from one context to another
- 2. Integrate information from different sources
- 3. Apply knowledge and skills in the practice setting
- 4. Synthesize cognitive, affective and psychomotor behavior
- 5. Interact effectively with clients, families, the community, and other professionals

Initially, when filling out the Professional Behavior Assessment Tool, a student may integrate past life experience to help understand the framework of the tool and where they are on the spectrum. As the student moves through the PT program. It is critical that students, academic and clinical faculty utilize the Professional Behaviors Assessment Tool in the context of physical therapy and not life experiences. For example, a student may possess strong communication skills in the context of student life and work situations, however, they may be in the process of developing their physical therapy communication skills, those necessary to be successful as a professional in a greater health care context. One does not necessarily translate to the other and thus must be used in the appropriate context to be effective as the student socializes into the physical therapy profession.

During the first and second years of the PT program, students perform a Professional Behaviors self- assessment which is completed during the Clinical Seminar course sequence and reviewed by their faculty advisor. Students in their third year are not required to meet with their faculty advisor as they are off campus most of the semester, however these students will have a professional behaviors final touchpoint in fall term while in the clinic.

If a student is not progressing satisfactorily or if problems such as inappropriate behaviors are identified, the student will receive individual feedback regarding the inappropriate behavior and/or level of behavior. The student will then develop a draft of a plan that is designed to facilitate change and improvement of the behavior to the required level.



DPT students presenting at the CAHS Scholarly Showcase

Upon approval of the faculty, the plan will be implemented and completed according to the timelines accepted by both the student and faculty. Failure to satisfactorily complete the plan or to reach the appropriate level of professional behavior in the agreed upon timeframe may result in delay in progression through the program or dismissal from the program.

Professional behavior is, without exception, required. A student who displays unprofessional behavior will be made aware of the behavior and the consequences of such behavior. This is necessary to provide the student with an

opportunity to facilitate personal growth and development. Students who observe a fellow student acting in an unprofessional manner are encouraged to report such behavior to a faculty member.

The following guidelines are offered to serve as a general course of action:

For less severe incidents: The faculty member will meet with the student to discuss the behavior observed by the faculty member, staff, or other student(s). The faculty member will listen to the student's response to the concern and offer ways in which to resolve the situation. Documentation of this meeting is optional but may be discussed at the end of term faculty meeting.

For recurring or multiple incidents: The student will be placed on a professional behaviors plan. The student, appropriate faculty member and/or faculty advisor will work together to ensure that the plan adequately addresses the remediation of the professional behaviors with appropriate consequences if the plan is not carried out. Every effort should be made to ensure that the plan is implemented within 2 weeks of the incident.

For serious incidents or egregious behavior: The student will be informed that the incident will be reported to the PT faculty who will determine the next course of action which will be communicated in writing to the student and further discussed in a meeting with the program director. Every attempt will be made to schedule the meeting within 2 weeks of the incident. Consequences may range from development of a professional behavior plan to dismissal from the program. Certain behaviors may be more appropriately dealt with according to the policy on Academic and Non-Academic Misconduct.

Web-Based Professional Behaviors

Acknowledgement of the virtual environment expected professional behaviors are important to be explicitly understood. The below Virtual Professional Behavior Expectation were developed and refined by the DPT students in the program during 2020.

- 1. Avoid personal distractions by:
 - a. Not using phone and place in "do not disturb" mode.
 - b. Close out of tabs that are not relevant to the class to avoid distractions.
 - c. Only use one screen.
- 2. Establish a quiet environment by letting others in your space know that you are in class.
- 3. Do not talk over others.
- 4. Stay engaged during class and be respectful by paying attention.
- 5. Be encouraging of others' ideas and thoughts.
- 6. Be aware of your mute/video on button and what setting they are in.

- 7. Be sure to be on time and ready to go once class starts.
- 8. Be appropriately dressed.
- 9. Demonstrate an inquisitive nature by asking questions in class of instructor or peers and likewise respond out loud to questions posed by instructors or classmates. Respond to cues to turn on video.

Borrowing Equipment

Policy 20

There may be instances when a student wishes to borrow equipment owned by the department to practice a technique, complete research, study for an exam, etc. The student must receive permission from the faculty member who teaches the class which is associated with the specific equipment and must obtain the equipment from the faculty member or a person designated by the faculty member. A student is only permitted to borrow equipment if the department owns multiples of the equipment and there is at least one remaining piece of equipment in the storage room or classroom. Borrowed equipment must be returned to the same faculty members. Models may be used for study in the program classrooms.

It is recognized that the quality of a given course may be enhanced using equipment not owned by the University of Cincinnati. It is also recognized that facilities, companies and/or individuals are often willing to allow their equipment or resources to be used during class periods.

To ensure the proper handling and care of such equipment, the PT program will follow the procedures listed below:

- 1. The faculty member or a staff member assigned by the faculty member in charge of the course in which the equipment is going to be used will make all arrangements for equipment.
- 2. Only a faculty or staff member may pick up the equipment.
- 3. Only a faculty or staff member may return the equipment.

Student Use of PT Labs Policy 21

The PT labs are to be utilized to facilitate learning. Only students in the PT, Occupational Therapy (OT), Athletic Training (AT) programs or in the final two years of the HLSC program are permitted to utilize the labs outside of scheduled class times. As outlined in the laboratory rules, conduct in the labs must be professional, ethical, legal, and safe at all times.

The utmost respect for the equipment is expected at all times.

Laboratory activities must be limited to the equipment or techniques which students have been instructed in during class and only for the express, sole purpose of increasing competence. Use of equipment, machines or assistive devices for any other reason is prohibited. Students may utilize the lab when the lab is not being used for a scheduled class, class activity or department activity. Students are not to prop doors open or leave the rooms unsecured. When finished in the lab, students must assure that the doors to the lab are closed and locked and lights are turned off. Students in violation of this policy are subject to dismissal from the PT program.

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Incidents and Incident Reporting

If an incident occurs on campus:

The student must complete the University of Cincinnati Initial Report on Work-Related Injury or Illness (see <u>Appendix</u> <u>H: Injury Report</u>) and submit the form to Environmental Health & Safety as indicated on the form. It is preferred that the form is printed out, completed, then submitted as a PDF. The student and/or faculty member should also complete the Doctor of Physical Therapy Student Incident Report form. Please submit this form to the PT Program Director within 24 hours of the incident or on the next business day if the incident occurs on a weekend or holiday.

Note: For safety and security reasons students should work in pairs or small groups. During evening hours, NightRide (513) 556-RIDE (7433) is available. NightRide is a student-run nighttime shuttle service. It exists to provide safe and reliable transportation to and from transportation to and from locations within a one- mile radius around the UC campus. Similar to a cab company, students, faculty and staff can call NightRide to pick them up and take them to/from places on and off campus. NightRide is available during fall and spring semesters. Students should also call security if safety is a concern or if an emergency arises (911) for emergencies or (513) 556-1111 or (513) 558-1111 for non-emergencies.

Laboratory Rules

Policy 22

The following rules are to be observed in all PT Labs:

- 1. The PT Labs are to be utilized only by students enrolled in the PT, OT, AT and final two years of the HLSC program unless special permission is granted by a faculty member.
- 2. The PT Labs are available for independent use by the above qualified individuals twenty-four hours a day, seven days a week when not in a global pandemic. During such time, student lab time will be designated at the beginning of each term. If additional lab time is needed, it will be coordinated with the PT Program Director.
- 3. Students participating in independent use of the lab will only utilize equipment for which they have been properly trained.
- 4. Students will utilize equipment for the sole purpose of becoming competent in its use.
- 5. Equipment will be utilized only for its intended purpose and following its use, will be returned to the proper location and the condition in which it was found.
- 6. All equipment must be turned off, with intensity and other controls returned to a zero position.
- 7. All wheelchair parts, including arm and leg rests, must be re-assembled on the appropriate wheelchair and stored neatly. At no point should wheelchair parts be place on plinths.
- 8. Any malfunctioning or damaged equipment must be reported to a faculty member immediately.
- 9. Students must follow the department policy for borrowing equipment (<u>Borrowing Equipment</u>). Equipment may not be taken home or off the premises of the University.
- 10. All equipment, except the hydro collator unit, cold pack unit and paraffin bath, will be unplugged following use.
- 11. All lotions and oils should be capped after use and stored away from heat sources. Students are required to refill used bottles.
- 12. All individuals utilizing the lab are responsible for maintaining the lab in a clean, orderly fashion.
- 13. Students are responsible for providing their own clean sheets, pillowcases and towels.

- 14. Linen & other equipment will be returned to its marked location for storage after each use. Linens left in the lab will be placed in a laundry basket in the back of the lab. Unclaimed linens will be removed at the end of each semester.
- 15. Equipment and tables are to be cleaned after each use using the disinfectant spray bottles.
- 16. Appropriate attire is required at all times.
- 17. The use of sheets & pillowcases on treatment tables are required when performing treatment procedures.
- 18. Coats, books & other articles should be stored in lockers to avoid tripping & injury. Laptop computers must also be stored when not in use during lab sessions. Damage to a laptop that is not properly stored during a lab session will be the responsibility of owner.
- 19. All spills are to be cleaned up immediately.
- 20. Any injuries must be reported to faculty or staff member immediately. If an injury occurs when no faculty or staff are present, the incident must be reported to the PT Program Director at the next available opportunity. An incident report detailing the injury and the circumstances surrounding it must be completed by the students involved in the incident. If an injury requires medical attention while faculty are not present or if emergency medical attention is required, the student is advised to call 911. The student incident report can be found in the Appendices.
- 21. The phones in the lab are NOT for student use except in the case of an emergency.
- 22. Students misusing equipment or in violation of laboratory regulations will be prohibited from attending or using the lab.
- 23. Students are not to use the lab for any reason other than listed above without receiving permission.
- 24. Students are not permitted to use the lab for any unethical (as described by the APTA Code of Conduct) or illegal acts. Students involved in such activities will be prohibited from attending or using the lab and will be terminated from the program.

All equipment, at a minimum, is calibrated and/or checked for safety by a professional annually. Logs are kept by the Program Coordinator. Since the labs are used very heavily by many students, it is imperative to clean and organize the labs on a weekly basis. A cleaning schedule will be e-mailed to all PT students at the beginning of each semester. The cleaning schedule will also be posted in the labs. If a student is assigned to clean the labs and is unable to do so, the student must find an alternate to assume their cleaning duties.

The following duties must be completed by the assigned cleaning crews in rooms HSB 200, 215, 225 and 243:

- All equipment must be returned to its proper location.
- Pillows must be placed on the shelves in the back of the rooms on cabinets.
- Garbage should be picked up from the floor, tables etc. and deposited in the garbage cans.
- Tables should be wiped down with the disinfectant spray.
- Chalk boards and white boards should be cleaned.
- Check water levels in hydrocollator units and add water as needed.

- Floors must be swept. If the floors are in need of mopping, please notify the office staff so that maintenance can be contacted.
- The plinths should routinely be checked for stability and for loose screws and reported to the program coordinator for repair. The plinth bases should also be wiped.

Cleaning the labs is considered part of a student's professional responsibilities. Failure to follow through with assigned cleaning duties will be considered unacceptable professional behavior and will be dealt with accordingly (see Professional Behavior policy).



Students with Dr. Rebitski at the annual UC DPT Gala

Dress Code Policy 23

All students must adhere to a uniform dress code when visiting a clinic site as part of a class and when attending clinical rotations. Unacceptable dress or appearance could lead to course failure. Good personal hygiene must be practiced as part of conforming to the dress code. Students should contact the facility where they will be performing their clinical rotation to inquire about their dress code and should adhere to that dress code.

If the facility does not have a dress code, students should wear the PT program uniform:

- Students will wear khaki, navy or dark pants, a button-down shirt, polo, or appropriate top.
- Shoes must have no more than a one-inch heel, be closed toed and heeled, and made of leather or vinyl. Tieup shoes must be tied.
- A program nametag must be worn at all times.

- Hair that reaches the collar or lower must be tied back.
- No jewelry other than watches, small earrings, and wedding bands.
- No colognes, perfumes or heavily scented hair products.
- No hats.
- Clothing must always be neat and clean.
- Students must NEVER wear: midriff tops, tops which expose the midriff when the arms are raised, seethrough tops (even with another top underneath), pants whose hems drag the floor, ill-fitting pants, tank tops, sleeveless tops, shirts with logos or sayings (exception: shirts which bear the logo of the clinical site or the UC logo, if they are acceptable to the site).
- Shoes must be flat and made of leather or vinyl and completely enclose the foot. No open toed or heeled shoes or sandals are allowed.
- Armpits must be covered at all times when working with patients.
- False fingernails are not permitted.
- No fingernails visible above the fingertip.
- No front or back cleavage is permitted.
- No visible tattoos.
- No body piercings other than the earlobe. No more than two earlobe piercings per ear are permitted.
- Students should have hair color that occurs naturally (no pink, purple, green, blue, etc. hair color during clinical experiences).

Use of Electronic Devices

Policy 24

The use of any electronic device(s) beyond a laptop during scheduled class or exam periods is strictly prohibited unless students are instructed otherwise by the course instructor. If a student has a need to use this type of equipment, the student must receive permission from the course instructor. It is NOT acceptable to place cell phones on vibrate or to participate in text messaging during class or exams unless instructed to do so by the instructor. Laptop computers powered by a battery source may be used during lecture as indicated by the course instructor but NOT during exams or lab sessions unless expressly permitted by the instructor. Power cords may be used as needed but all attempts will be made to limit this to minimize potential tripping hazards. Laptop computers must be stored during lab sessions. Damage to a laptop computer during lecture or a lab session will be the responsibility of the student who owns the laptop.

Hazardous Materials and Potential Health Risks

Policy 25

Students are advised that formaldehyde and other chemical substances are used in the preparation and preservation of anatomical specimens. Cadaver dissections and the use of prosections are part of the PT program curriculum. It is the student's responsibility to discuss any concerns they might have about these substances and potential risks of contact with these substances with their own physician. In addition, laboratories and/or clinical facilities may house materials

that could be hazardous. Proper adherence to the appropriate procedures when in contact with these materials must be practiced. It is the student's responsibility to request, from clinical facilities, policies concerning hazardous materials and to follow these policies.

Students are advised that while in the program, they may be exposed to individuals who have communicable diseases. Hand washing is recommended to reduce the spread of certain communicable diseases. Additionally, the utilization of masks and/or gloves may be required when working with patients in clinical settings or if a patient/community member comes to a class as a guest. Standard precautions such as recommended immunizations are in place to protect the student, however any concerns a student may have regarding the potential of exposure should be discussed with the student's physician. In cases where a student is engaged in an activity which could result in contact with body fluids, the student is advised to follow universal precautions as outlined by the Centers for Disease Control (CDC): <u>Universal Precautions</u>. Additional information on can be found at: <u>Healthcare Associated Infections</u>.

In each year of the program, students are required to complete an educational module on blood borne pathogens.

Students assigned to a clinical site must follow the precautions recommended by the site.

Student Expenses

Policy 26

In addition to the usual costs of university tuition and fees, program fees, educational materials and textbooks, the students should be prepared for the following expenses:

Malpractice Insurance

Students are covered under the University's malpractice insurance policy for program related incidents.

Uniforms & Supplies

The purchase of at least one nametag is necessary. Cost: Approximately \$11 The following items are required and should be purchased by the student:

- 1. Nametag
- 2. Lab clothes which allow for posterior exposure of trunk from occiput to sacrum along with abdomen and anterior upper chest
- 3. Locker padlock
- 4. Guide to Physical Therapy Practice (available online as part of the APTA membership)

As a convenience, a student PT kit containing several items needed for class/lab will be provided by the program.

Program Fees

Students will be assessed a program fee of \$215 per semester. Students must also be prepared to assume reasonable costs of research projects that are not covered by grant funding including but not limited to transportation costs to research sites, costs of presentation materials such as posters, etc.

Medical Examination

Students, at their own expense, must have a physical examination and required health forms completed by their health care provider on a yearly basis. In addition, immunizations, as required by the PT program, must be completed prior to the beginning of clinical education experiences. Please see the sample sheet in the appendices. Students are required to submit a medical history, immunization records, and related health forms to the University Health Services on a yearly basis and to the program's secured, web-based platform (Exxat) on an ongoing basis. Students are advised that failure to adhere to deadlines or upload documents in a timely manner may result in clinical education experiences being canceled, and therefore, may result in delayed graduation.

Note: All documents must be uploaded in PDF format.

Health Insurance

All students are required to carry health insurance. Specific information, including costs and instructions to waive student health insurance if you are covered by another policy can be found at University Health Services.

Needlestick (Bloodborne pathogens) Insurance Students who purchase Student Health Insurance through the University receive Needlestick Insurance coverage as part of the basic policy. This will cover costs associated with follow-up care following a Bloodborne pathogen exposure.

Students who do not purchase Student Health Insurance will be assessed a \$31 annual fee for a Needlestick Insurance policy which will appear on the student bill (as Bloodborne Pathogen Insurance) the first semester of enrollment of each year.

APTA Student Membership

APTA membership is required each year a student is enrolled in the PT program. Membership is approximately \$90 per year.

Clinical Expenses

Students are responsible for all costs related to the Physical Therapy Practice clinical experiences. Students must be prepared to attend a clinical rotation outside of the Cincinnati area and to assume responsibility for all travel, room and board arrangements and costs associated with these placements. The student's "out of town rotation" budget needs to include tuition payments, travel, lodging, food, etc. The cost varies dramatically depending upon if the student is able to stay with family/friends during the rotation and the location of the rotation. For example, the cost can be \$500 if staying in Ohio to \$2000 for a rotation in Chicago. Expense reports from previous students are available in Exxat for specific clinical site for current students to review. Students doing clinical experiences still have the usual financial obligations to the University. "Out of town" is considered to be 100 miles distance from 3225 Eden Ave Cincinnati, OH 45267 (the Health Sciences Building).

Please note that for larger healthcare systems, the final placement within the hospital system is up to the clinical site. Students are assigned to a facility. The clinical site assigns the clinical instructor and specific location within the clinical site is based on clinical instructor availability.

Books

Books are estimated to cost between \$500 and \$700/semester. Course materials must also be purchased. Please note that this is an average cost over the length of the program. The cost of books in the first year, especially the first two semesters, may be higher.

CPR Certification

CPR certification is required and must be maintained throughout the length of the program. Students must be certified in adult, child and infant CPR. Successful completion of CPR/AED for Professional Rescuers and Healthcare Providers offered by The American Red Cross or the Basic Life Support (BLS) for Healthcare Providers course offered by the American Heart Association fulfills the CPR requirement. Online courses do not fulfill the CPR requirement. Students are responsible for all costs associated with certification and/or re-certification. Students are advised that failure to submit documentation of CPR certification by the required deadline will prevent the student from participating in the clinical education process.



Students with Doctor Engelhard at the Investiture Ceremony

Communication with Students Policy 27

All students enrolled in the PT program will receive a University e-mail account. It is the student's responsibility to be sure their University e-mail account is activated. Important University and program information will be communicated via the University e-mail system; therefore, students are advised to check their University accounts on a daily basis. In addition, students are required to report any changes in address or phone number to the program office in a timely manner.

Students will automatically be signed up for the University of Cincinnati's emergency text-messaging service. UC Public Safety uses this emergency text-messaging system only in the event of imminent or ongoing threats to campus safety and security and in the case of a delay or closure. The program highly recommends obtaining the free Bearcat Guardian app as it is a state of the art safety app that allows the user to turn your cell phone into a safety device. It works on any mobile phone running on any US-based mobile carrier network. For further information, use this link: <u>Bearcat</u> <u>Guardian</u>

Students should be aware that most program faculty utilize Canvas for their courses. Important course information may be posted under announcements on Canvas and students may be required to submit assignments via Canvas. Students must be registered for a course to access the Canvas site for that course. Students should check the course syllabus regarding the use of Canvas for a specific course. Clinical Education courses use a variety of platforms including Exxat, Canvas, and Teams. Students will have an introduction to each of these platforms during their time in the program. Communication during clinical education experiences occurs through Teams Video, Teams Audio, Teams Chat, and University email accounts.

Disability Accommodations

Policy 28

Students with a disability are eligible to receive a variety of support services. To receive academic accommodations, a student must be registered with the Accessibility Resources Office and have an accommodation form that lists in-class and test accommodations. Accommodation forms must be presented to the course instructor during the first week of

class of each semester. Students who require accommodations to meet the program essential functions are required to register with the Accessibility Resources Office on West Campus at 210 University Pavilion (513) 556-6823 or Accessibility Resources. Students are advised that certain disabilities can interfere with a student's ability to complete the program of study and acquire the essential functions necessary for the practice of physical therapy.

Reasonable accommodations can be made to compensate for some, but not all, limitations. Students should be aware that limitations that interfere with patient care, safety or require the use of an intermediary may be incompatible with independent professional practice. A student who is unable to fulfill the technical standards with reasonable accommodations may be dismissed from the program.

Subject Participation in Lab Activities and Clinical Rotations

Policy 29

Student Subjects

As part of the PT curriculum, students will be participating in laboratory activities and clinical rotations in which they may be requested to assume the role of "patient" or "subject" or "treating therapist." It is the student's responsibility to inform the course instructor of any health concerns related to the student's participation in the laboratory activity prior to the beginning of class. If a student has had a recent illness, injury, surgery, or other medical problem that could limit their participation in these activities, physically or cognitively, the student must obtain a written note from their healthcare practitioner specifying the restrictions or limitations. The student must provide a note from their healthcare practitioner when they are cleared to fully participate in lab activities or released to full clinical duties or modified duty for their clinical rotation. If participation is limited in clinical rotation activities, early communication with the Director of Clinical Education is important. This note must be given to the PT Program Director who will inform the faculty of the restrictions. The student's safety is of utmost importance.

A student who is unable to fully participate in class, clinic rotation and/or lab activities and is unable to acquire and demonstrate the skills and knowledge required to successfully complete a course by the end of the term will not pass the course. At the instructor's discretion, the student may be assigned an "T" grade and may be required to take a leave of absence from the program.

In addition, students are advised that laboratory activities are for the purposes of demonstration, instruction and practice and are not intended to be therapeutic or diagnostic for the student. Students are required to sign the Consent and Release form for Participation in PT Lab Activities as a Student Subject at the start of each academic year.

Community Participants as Subjects

On occasion, an individual from the community may participate as a "patient" in a laboratory activity. Consent must be obtained from these individuals prior to their participation. The instructor is responsible for assuring completion of the consent form and maintaining these records. Students are reminded that HIPAA standards of privacy apply to the information shared by these individuals and the results of any examination or evaluation completed as part of the laboratory activity. In addition, if a "patient" is to be videotaped or photographed, it is the responsibility of the faculty member to obtain a photo/videotape release. If a student is videotaping a "patient" for an assignment, the student must obtain the photo/videotape release and submit it with their assignment.

Students are required to delete images, photo, and videotape from their devices once the assignment is complete and the grade has been recorded to ensure maintenance of patient privacy.

Note. Consent forms for PT Lab Activities are located in the Appendices.

Community Assistance/Work Requests

As a physical therapy student, there will be infrequent volunteer and work requests for your services by community stakeholders. The physical therapy program director will forward these opportunities to the student body for consideration. In no way are these forwarded emails vetted by the program director. It is up to the student to consider if they have the time to commit to these volunteers and/or job requests. The student must also understand what is within their scope as an unlicensed person to provide care that will not extend beyond what they are permitted to do by law in the state of Ohio. Students must determine the liability involved as well as be aware that they would be acting outside of the malpractice insurance coverage of the university. If students have any questions about these requests, they are advised to discuss this with the physical therapy program director.

Program Development Opportunities

The program provides opportunities to students to not only enhance their experience while in the program but also to influence their work as a future physical therapy practitioner. In light of this, there are certificates of recognition that can be earned while in the program.

Recognition of Advanced Practice: Elevating Person-Centered Care (AP) Certificate: The Recognition of Advanced Practice: Elevating Person-Centered Care (AP) Certificate is awarded to students who excel in volunteering above and beyond what is required by the program. These students volunteer their time to engage in activities such as participating in community events, attending formalized webinars/lectures, and/or developing projects that connect our community with resources. These patient/community experiences will ultimately influence their future practice as a PT. In the end, their intentional volunteerism will elevate their skills in person-centered care.

This certificate is optional. To earn this certificate, by November 1st of a student's final term in the curriculum, the student must meet or exceed the following criteria:

- Experience three AP touchpoints.
 - A student may use one place (e.g. pro bono clinic) for two touchpoints if the student is volunteering in two separate roles such as volunteer worker and volunteer leader. The student must articulate how the separate roles will differently influence their future work as a physical therapist.
- Submit a reflection for each AP experience in the Canvas PT Community within two weeks of the touchpoint.
- Notify their advisor of completion of the three or more AP experiences and indicate their desire to earn the Recognition of Advanced Practice: Elevating Person-Centered Care Certificate.

*If a student is unclear as to what counts towards this certificate, they are to contact their advisor or the program director.

College of Allied Health Sciences Interprofessional Education (IPE) Certificate of Recognition

The College of Allied Health Sciences offers the Interprofessional Education Certificate of Recognition. To earn this certificate, a student must experience four interprofessional education or interprofessional collaborative practice experiences by their final term in the program and write brief reflections after each touchpoint. There are specific criteria published on what counts towards this certificate each year. The program director will send this information to students via email when it is available. If a student is unclear as to what counts towards this certificate, they are to contact their advisor or the program director.

There is an application process for this certificate in which only final year students are eligible to submit. The program director will communicate with third year students when the application portal opens.



Students exercising with a patient during a lab interaction

Additional Requirements

Policy 30

Additional testing, training, or other requirements are necessary for the student at various times within the program. The student is responsible for obtaining or completing these requirements and paying all associated fees. A list of current requirements and deadline dates for their completion can be found in the appendix. Students are advised that this list is not all inclusive as other requirements may be added as necessary during the year.

Appeal & Complaints Process

Policy 31

Appeals

A student has the right to appeal a dismissal decision or any other decision which affects the student's standing in the program. A written appeal must be submitted to the program director no later than 5 working days after the decision has been rendered. The written appeal should include a specific plan describing how the student intends to address any deficiencies, professional behavior issues, etc. A student who has been dismissed is not permitted to continue in the program during the appeal process. The written appeal will be distributed to all program faculty members upon receipt. Decisions based on academic factors will be appealed to the entire faculty. Decisions based on non-academic factors, such as professional behavior issues, will be appealed to a Faculty Appeals Committee. This committee will be appointed by the department head on an as needed basis. The Appeals Committee will consist of 3 department members, one of whom should be the student's faculty advisor. A student who chooses to appeal a decision based on either academic or non- academic factors will be required to address the faculty or Appeals Committee for a maximum of 15 minutes at a meeting arranged by the program director. This will be followed by a maximum of 15 minutes of questions from the faculty/ committee.

Every attempt will be made to schedule an academic appeal meeting at a time when all faculty are available to attend; however, this may not be possible due to varied faculty schedules. The appeals meeting will be scheduled within 10 working days of receipt of the appeal. The decision regarding the appeal will be based on a majority vote of the full time faculty present if the dismissal was for academic reasons or the Appeals Committee in the case of dismissal for non-academic reasons.

The decision will be conveyed to the student, in writing, within 5 working days of the appeal meeting. In the case of a tie vote, the student's appeal will be denied. Listed timelines exclude weekends, holidays, and term breaks and anytime when the university is not in session. Please note: this is a department procedure and does not replace the Grievance Procedure which is outlined in the Graduate Student Handbook.

Complaints – Due Process

Students who have an issue concerning a specific course should initially discuss the issue with the course instructor. If the problem persists and is not satisfactorily resolved the student, the student should bring the matter to the attention of the Program Director. The Program Director will attempt to intervene to reach an agreement between the student and the course instructor. If an acceptable resolution is not reached, the Program Director will bring the matter to the attention of the Department Head. Please note that issues regarding course content and/or grades can only be addressed by the course instructor.

If a student has an issue with a fellow student, faculty member (who is not their course instructor) or a staff member, the student should initially address the issue directly with the individual involved. If the problem persists and is not satisfactorily resolved the student should discuss the issue with their faculty advisor. If the problem continues to persist,

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the student should bring the matter to the attention of the Program Director. The Program Director will attempt to intervene to reach an agreement between the student and the other individual involved. If an acceptable resolution is not reached, the Program Director will bring the matter to the attention of the Department Head.

Students are advised that they may seek the assistance of the Office of the University Ombuds. The Office of the University Ombuds is a safe and confidential place for all members of the UC community to talk about University

related conflicts, issues or concerns. The office staff will listen to your concerns and help you identify options for successful resolution. Contact information for the Office of the University Ombuds is:

Office of the University Ombuds Swift Hall, 2842 Campus Way University of Cincinnati PO Box 210180 Cincinnati, OH 45221-0180

The University of Cincinnati's Collective Bargaining Agreement (CBA) outlines procedures for complaints utilizing the Office of the University Ombuds as seen below:

9.1 - Student Complaints. In the event that a student has a complaint against a Faculty Member, the student should be encouraged to meet with the Faculty Member, with the Ombudsperson or with the Academic Unit Head in order to resolve the complaint. It is preferable, but not required, that the meeting be with the Faculty Member. If the student's complaint remains unresolved, the student may proceed under the Student Grievance Procedures, as established by the Board from time to time. However, a proceeding under this Article may be commenced for any violation of the Contract regardless of any prior or concurrent action taken under the Student Grievance Procedure concerning the same or similar issues. The University of Cincinnati's Graduate School has a formal Student Grievance Procedure. This

process is to be used when resolution of the concern is not attained within the program or with the assistance from the University Office of Ombuds.

Complaints - Outside of Due Process

Any student, faculty member, clinical site employee or patient who have a concern or complaint that falls outside of due process, has the ability to report their complaint without concern for retaliation following complaint submission. The first point of contact is the Physical Therapy Program Director. If the complainant is not satisfied with the process or resolution of the complaint, they can register their complaint with, in order, the Department Head, the Dean, the Provost, or the President. For clinical education sites' personnel and/or patients, the first point of contact is the Program Director.

For all other stakeholders including the public, prospective students, and employers of graduates, the Program Director is the first point of contact. As with other complainants, they may register their complaints, in order, with the Department Head, Dean, Provost or President. Lastly, if any stakeholder has exhausted the process and is not satisfied with the outcome within the program and University, the stakeholder has the right to contact the Commission on Accreditation of Physical Therapy Education (CAPTE) to report any concerns or complaints regarding the program. CAPTE can be reached by phone at (1-800) 999-2782.

Please note that records of complaints about the program, including the nature of the complaint and the disposition of the complaint, are maintained by the program. These processes are located in the University ombudsman, graduate school and program websites as well as the Collective Bargaining Agreement, and the student handbook. Please see the Appendices for the electronic format of these documents.

Recording of Complaints

Records of complaints are maintained in a file by the program director.

Policy on Harassment/Abuse

Policy 32

The Doctor of Physical Therapy program is committed to providing a positive learning environment both in the classroom and in the clinical setting. In order to achieve this goal, the program has established standards of behaviors that are based upon mutual respect of all individuals involved in the learning process. No form of student harassment or abuse is acceptable. Any student who harasses/abuses another individual is in violation of the Student Code of Conduct and is subject to dismissal from the program.

Definition of Harassment/Mistreatment:

Harassment/Mistreatment is defined as any behavior that is disrespectful and/or unreasonable and may demonstrate a misuse of positional power. Mistreatment includes but is not limited to the following behaviors:

- General Mistreatment (i.e., public humiliation or belittlement, threats, personal service requests, physical or verbal abuse)
- Sexual Harassment (i.e., inappropriate comments, name calling, jokes, slurs, gestures, touches, advances of a sexual nature)
- Racial Harassment (i.e., inappropriate comments, name calling, jokes, slurs, gestures of a racial nature)
- Sexual Orientation Harassment (i.e., inappropriate comments, name, calling, jokes, slurs, gestures, touches, advances of a sexual nature)
- Religious Harassment (i.e., inappropriate comments, name calling, jokes, slurs, gestures of a religious nature)

Relationships May Include:

- Faculty to student
- Clinical instructor to student
- Supervisory/administrative personnel to student
- Hospital/clinic personnel to student
- Student to student
- Student to faculty
- Student to clinical instructor
- Student to supervisory/administrative personnel
- Student to hospital/clinic personnel

A student who has been the victim of any type of harassment or abuse should report the incident to the PT Program Director or another faculty member. Harassment or abuse that has occurred in the hospital or clinical setting should be

reported to the Director of Clinical Education (DCE). Faculty and staff who receive a report of a Title IX violation must report the incident to the Title IX office. Additional assistance may be obtained from the Office of the University Ombuds and the Office of Equal Opportunity.

For more information, please see the University Policies below:

Sexual Harassment Discriminatory Harassment Emergency Procedures



Investiture Ceremony



Students at the CSM Conference

Additional Information

Additional Information

Additional testing, training, or other requirements are necessary for the student at various times within the program. The student is responsible for obtaining or completing these requirements and paying all associated fees. A list of current requirements and deadline dates for their completion is in <u>Appendix A: Additional Requirements</u>. Students are advised that this list is not all inclusive as other requirements may be added as necessary during the year.

Student Lockers

Lockers are available for student use and will be assigned by the PT Program Coordinator. Students are advised to remove their belongings from their lockers during extended breaks. If a lock must be cut off a locker, any fees associated with the removal will be paid by the student.

Student IDs

Student IDs are issued at the Office of Public Safety in Edwards Three. IDs are issued every day but students should call for specific hours (513) 556-4900. IDs are required for various rights/privileges, including but not limited to, admittance to the Health Science Building and the Medical Sciences Building on evenings and weekends, tickets to University sporting events, etc. Students are advised to carry their student ID with them at all times while on campus. Access to the Health Science Building doorways requires your student identification swipe after business hours and on weekends.

Donald C. Harrison Health Science Library

Traditionally, the main entrance doors to the CARE/Crawley Building and the Medical Sciences Building are accessible via card access ONLY from 7 PM to 6 AM, Sunday through Thursday, and 5 PM to 8 AM, Friday through Saturday.

Note. In recent times, access is only available through Bearcat card use. With questions on how to access the Donald C. Harrison Health Sciences Library after the building doors close, please call (513) 558-0127.

Fitness Center at Care/Crawley (Campus Recreation)

Payment of the University's Campus Life Fee entitles all full-time Physical Therapy student access to the Campus Recreation Centers. The Fitness Center at the Care/ Crawley Building is located on E-level.

University Police

For emergencies dial 911. The University of Cincinnati police provide campus safety services and crime prevention. Other services include lost and found reporting and crime statistic documentation. Police main headquarters are at:

Three Edwards Center 51 West Corry Street Cincinnati, Ohio 45221-0215.

Non-emergency phone numbers are (513) 556-1111 or (513) 558-1111. UC Public Safety also recommends that students use the <u>Bearcat Guardian</u> app. This app allows you to turn your cell phone into a safety device. The app is available for Apple and Google Play devices.

Additional Information

Parking Services

Parking services maintains the parking facilities and sells parking passes to students, faculty and staff. Students are encouraged to purchase their parking passes as early as possible for best selection. Parking may be purchased via the web at www.uc.edu/about/parking or in person at the parking office. West (main) campus office:

Four Edwards Center 51 W. Corry Blvd Cincinnati, OH 45221-0624 Phone: (513) 556-2283

Motorist Assistance: Monday - Friday 8 a.m. - 3 p.m., call (513) 556-2283. After hours, call (513) 556-1111.

University Health Services

<u>University Health Services (UHS)</u> provides primary care to all registered University of Cincinnati students. UHS accepts most insurance. Students who have private insurance are advised to contact their insurance company to verify coverage. In addition to primary care services, on-site specialty care is available in athletic, gynecology, dermatology, orthopedic, internal medicine and mental health. Other on-site campus services include: laboratory, pharmacy, x-ray services, allergy injections and an international travel clinic. A doctor is on call 24 hours a day to advise students should an emergency arise when UHS is closed. All physicians are board certified.

UC Student Health Insurance

All students and their dependents enrolled for six or more credit hours at the University of Cincinnati are required to carry health insurance and are eligible for the <u>Student Health Insurance program</u>. All international students on F-1 or J-1 visas are required to have health insurance. Students will be enrolled in the student health insurance plan unless they submit a waiver form to verify similar or better coverage through other insurance. The fee is assessed twice a year (Fall and Spring). An additional fee is assessed to students who request optional insurance for their dependents. Insurance enrollment and waiver forms are available online.

Resource Websites

University of Cincinnati Information Technology College of Allied Health Sciences Department of Rehabilitation, Exercise, and Nutrition Sciences UC Student Code of Conduct UC Graduate School Website Ohio PT Practice Act Kentucky PT Practice Act Indiana PT Practice Act American Physical Therapy Association Federation of State Boards of Physical Therapy

Clinical Education Overview

Clinical education is an essential part of the Physical Therapy program. The physical therapists and health care facilities participating in the clinical program are carefully screened and must share the PT program's commitment to excellence in patient care.

It is important to note that the entire faculty work as a team to develop and implement the knowledge, skills, and abilities expectations for students to demonstrate so that students are competent and safe in their clinical education experiences. It is the responsibility of the faculty to ensure that students have the foundational skillset to be successful in the clinical environment. Hence, faculty determine which skills students must demonstrate competent and safe performance prior to engaging in clinical education.

The clinical experience is spread throughout the student's education. Students participate in the first clinical rotation after the first four semesters of didactic coursework. The clinical rotation is a nine-week, full- time rotation. The students can be placed in any practice setting except for pediatrics. After completing two more semesters of coursework, students complete a second full time clinical rotation that is twelve weeks in length. An additional didactic courses is taken in a flex semester, after which students complete their final fourteen-week clinical education experience.

Note that every effort will be made to secure appropriate and timely practicum experiences for each student of the academic cohort. However, considering situations such as the COVID-19 pandemic, student placements may be postponed, interrupted, or cancelled as a result of the clinical partners' focus on providing services to those in the community directly impacted by the virus. If this situation were to occur, the Director of Clinical Education will work to secure an alternative placement; additionally, no guarantee can be made regarding an on-time program completion due to the uncertain progressions of a global pandemic.

Students must complete their clinical experiences in all four practice patterns – musculoskeletal, neuromuscular, integumentary, and cardiopulmonary. Additionally, they must experience patient populations across the lifespan in both inpatient and outpatient settings. Students can also participate in more specialized patient care areas including, but not limited to, home health, sports medicine, pediatrics, wellness clinics, hand therapy, burn hospitals, or occupational health.

Students participating in clinical rotations are still part of the University and are expected to meet all financial obligations and academic requirements of a student. Students must adhere to the schedule assigned them by the clinical site, including holiday/work schedules.

Defining Inpatient (IP) & Outpatient (OP)

Inpatient Criteria

Doctoral level students need to gain experience/exposure in considering all the components of a patient's current condition in this setting including but not limited to:

- Episodes of acute illness or disability, co-morbidities
- Medications, labs, imaging, and medical screening
- Line management, insurance reimbursement issues/ case management, short-term stay
- Self-care, promote health and prevent loss of function
- Address any preexisting or long-term illness
- Ambulatory or non-ambulatory patients with injuries/disabilities that reside at a facility

Outpatient Criteria

Doctoral level students need to gain experience/ exposure in considering all the components of a patient's current condition in this setting including but not limited to:

- Conditions that may no longer be in the acute phase
- Ambulatory patients with injuries who live at home, but are able to be community dwellers with or without assist
- Preventative care that fosters early detection of disease and morbidity and focuses on keeping patients well in addition to helping them while they are sick.
- Medical conditions that do not require hospital admission and can be managed without admission to the hospital
- Insurance reimbursement issues/case management
- Self-care, promote health, and prevent loss of function
- Address any preexisting or long-term illness

Assignment to Clinical Rotations

Requests for clinical slots will be made by the Director of Clinical education (DCE) in March of each year. Requests should be returned by May.

Physical Therapy Practice I

Students will be assigned to this clinical experience by the DCE after receiving input from students and faculty. Some clinical facilities may have additional requirements, such as drug testing, COVID-19 and Annual Influenza vaccine, 2 step TB testing, and/or background checks. It is the student's responsibility to fulfill these requirements and to pay any related costs. This information is available on Exxat which is accessible to students. However, this information changes frequently. Thus, when cued to do so by the DCE, the student will contact the assigned clinical site to confirm the clinical sites' additional requirements. The student will notify the DCE if additional requirements are needed and the DCE will direct the student on where to send the results. Please see the Background Check Release form in the appendices.

Students need to review the clinical site information and Exxat to see if any such additional requirements exist for the site within two weeks of receiving the placement letter and if so, the student may request to not be placed at the site. In addition, a criminal background check and/or drug screen may be required for practicing as a Physical Therapist. Many state licensing agencies require a negative criminal background before granting a license to practice. Students should be aware of the possible need for a criminal background check and/or drug screen and should be prepared to absorb the costs.

Physical Therapy Practice II - III

A master list of facilities available for the upcoming year will be compiled and made available to the students by the end of July. Students will make their preliminary choices of setting and/or clinical site and then meet with the DCE. The DCE and student will discuss the student's choices. The DCE will take the student's choices into consideration when completing the assignment process. After consulting with the faculty, students will be provided with placement confirmation emails.

Students cannot perform rotations at a facility or within a health care system where:

- They previously volunteered or worked (in the Physical Therapy Department or Rehabilitation Area)
- They have a relative working (in the Physical Therapy Department or Rehabilitation Area).
- They or a relative have ownership.
- They will be supervised by a person or persons with whom they have previously volunteered or worked.
- They have accepted a post-graduation position.

Upon assignment of students to the clinical practice experience, the facilities will be sent the name(s) of the student(s) assigned to them. This will take place by October 31. Sites will be asked to confirm placement of the student.

Removing a student from an assigned clinical site: Clinical site assignments are considered permanent unless the site cancels the placement. Removal of a student from a clinical site for any other reason is very rarely done and is at the sole discretion of the Director of Clinical Education.

It is the student's responsibility to contact the facility to find out about clinic hours, location, directions, parking, dress code, etc. It is also solely the student's responsibility to arrange for transportation, room and/ or board for each clinical assignment. The University, faculty and Clinical Sites have no responsibility for providing transportation, room and/or board for clinical assignments.

The DCE will communicate with the site and student at least once during each clinical experience. This communication can be via phone call, site visit, videoconference, or email.

Additional Information on Clinical Rotations

Immunizations

Students are required to complete immunizations as outlined on the DPT immunization form, including an annual flu vaccination, and receive an "Approved" status through Exxat. It is the student's responsibility to ensure approval through Exxat. Failure to do so may delay the start of clinical experiences.

Immunizations are required to be completed prior to commencing clinical rotation or observation experiences. Clinical sites may require an up-to-date two-step TB, COVID-19 vaccine, or other requirements (i.e., drug screen) within a

certain timeframe of starting the experience. The student must be prepared to perform and pay for this, as requested. The University of Cincinnati does recognize that students who are on campus may be exempt from immunizations for religious reasons or medical reasons. Students must complete an **Appendix E:** Vaccination Exemption Form and submit it to the DCE. The University of Cincinnati's recognition of exemption of immunizations on religious grounds while a student is on campus does not carry over into the clinical setting. It is not guaranteed that clinical sites will exempt a student from immunizations for religious grounds, in particular large hospital systems. For employment at many healthcare facilities, there are no religious exemptions for immunizations including but not limited to MMR, influenza, COVID- 19, and varicella.

A student who files a <u>Appendix E:</u> Vaccination Exemption Form may:

- 1. Complete the immunizations and progress through the program in both academic and clinical courses.
- 2. Decline immunizations and participate in academic courses only. This option will disqualify the student from participating in clinical courses.

As such, this will make the student ineligible to complete the full curriculum for graduation and sit for the NPTE.



Students and faculty members attending the American Academy of Orthopedic Manual Physical Therapists conference in St. Louis

Site Selection

All clinic facilities participating in our clinical education program must have a contract with the University of Cincinnati before a student can perform a clinical rotation in that facility.

Students must be prepared and may be expected to complete at least one clinical experience outside of the Greater Cincinnati area. Outside of the Greater Cincinnati area is defined as 100-mile driving distance from the Health Sciences Building (3225 Eden Avenue, Cincinnati, Ohio 45267). The student's "out of town rotation" budget needs to include: paying tuition, travel, lodging, food, etc. The costs can vary widely depending on the location of the rotation and what living arrangements can be made.

If a student requests a clinical placement in an area where the program does not have an established site, the DCE will investigate a maximum of three possible new sites depending on the current needs of the clinical education curriculum with consideration for the amount of time that is available before the proposed clinical rotation is scheduled to begin.

Students must complete their clinical experiences in all four practice patterns – musculoskeletal, neuromuscular, integumentary, and cardiopulmonary. Additionally, they must experience patient populations across the adult lifespan in both inpatient and outpatient settings.

Since participation in clinical education by the clinical facility is completely voluntary, assignment to a facility is subject to change until the first day of the rotation. Occasionally, clinic facilities may have to cancel a student's rotation. The DCE will then try to place the student in a similar setting. However, if this is not possible; the student will then have to be reassigned to an available facility. The DCE will make every attempt to place students in clinical rotations. However, the PT program cannot guarantee clinical rotation placements.

Should a conflict arise during the student's performance in the clinical setting, use the following steps for resolution:

- 1. The student and the Clinical Instructor (CI) should try to resolve the conflict.
- 2. If the conflict is unable to be resolved, the Clinical Instructor should approach the site's Clinical Coordinator for Clinical Education (SCCE) for intervention.
- 3. The SCCE should serve as an objective third party in his/her observation of the student/ CI relationship and make recommendations for possible positive solutions to the situation.
- 4. If the conflict is judged by the Clinical Instructor and/or the SCCE to be a more serious matter, the CI and/or SCCE should contact the PT program immediately and apprise the Director of Clinical Education (DCE) of the situation. The DCE will then take action based on the information provided.
- 5. At any point in the process, the student, CI or SCCE may contact the DCE to assist with strategies to help facilitate a successful resolution.
- 6. When a problem situation arises, whether it is due to a conflict in professional behaviors or decreased performance expectations, the most likely sequence of events will be as follows:
- 7. The DCE will talk to the student and the CI separately to get each individual's account of the problem.
- 8. The DCE may schedule a time to come to the clinic to discuss the situation further with all parties involved.
- 9. The DCE will meet or speak individually with the student, the CI and/or the SCCE, if indicated, and make recommendations for possible resolutions.
- 10. If indicated, the DCE will then meet with all parties involved in a joint meeting to facilitate the development and execution of an action plan.
- 11. A written plan of action will be generated and specific timelines for completion will be agreed to by all parties involved (student, CI, SCCE, DCE).
- 12. The DCE will remain involved for as long a period as necessary and will go to the site as necessary to ensure resolution of the situation.

If the conflict cannot be resolved, or if the student has violated the law or the APTA Code of Ethics, the student will be removed from the clinic immediately and dealt with in accordance with program policy.

If the conflict is judged by the DCE to be a personality or professional behavior issue and if intervention has not been successful, the student will be removed from the clinical setting. If the student can successfully remediate, they will likely be reassigned to another clinical site.

Students who have been removed from the clinic, for knowledge or skill deficits, will be required to formulate and carry out a success plan in collaboration with the DCE. The plan may call for the student to participate in a variety of activities such as reading the literature, working with the program faculty on case studies, practicing techniques, etc.



Annual DPT Career Fair in the Great Hall

General Student Policies

Students in the clinical education experience setting must be able to fulfill the Technical Standards of a DPT Student as defined in the <u>Appendix B: University of Cincinnati Doctor of Physical Therapy Technical Standards and Release</u> Form in order to participate in clinical education. If the student does not meet these requirements, the student must immediately notify the DCE to determine eligibility to participate in the clinical education experience and next steps. Students who are ineligible to complete a clinical education experience within the designated time frame will be given an "Incomplete" for the associated course. A plan to complete the course requirements will be implemented with the student, DCE and/or appropriate faculty member(s) during an agreed upon timeframe to satisfy the "Incomplete" grade. The plan may involve an alternative location to the previously assigned clinical education site.

The student's schedule during full time clinical education experience's follows that of the clinical instructor(s)/clinical site. The student will continue to follow the clinical instructor(s)/clinical site's schedule regardless of university/closure schedule. The student's schedule is determined by the clinical site/clinical instructor(s) but must be the equivalent of a full-time experience, or 32 hours per week.

Students must notify the DCE of any schedule or location changes. Students must follow the schedule of their clinical instructor(s) and be prepared to work longer than scheduled work hours, weekends, and holidays. **Punctuality is**

required without exception. The student is to be at the facility at least ten minutes before they are expected and is not to leave until excused by their clinical supervisor.

If a student's clinical instructor is absent, a designated alternative clinical instructor as named by the clinical site will supervise the student until the primary clinical instructor returns to duty. The student will follow the schedule of the alternate clinical instructor.

Beginning and end dates for clinical education experiences are established by the program and are provided to the students in advance. The week immediately following each rotation should be left available in case of remediation or need for make-up days during the clinical education experience. Furthermore, the clinical site may require onboarding activities immediately prior to the start date of the clinical rotation. The student should be available as requested by the clinical site for these activities.

Attendance for Full-time Clinical Education Experience

Absence, Tardiness, or Early Departure Policy

It is the belief of the University of Cincinnati Physical Therapy program that clinical attendance is a critical aspect of professional behavior. A physical therapist must be present for meetings, conferences, consultations, and patient care to fulfill their professional responsibilities. Lateness, absences, and student-initiated schedule changes are only acceptable in the event of an emergency and with notification.

The program informs students those violations of the attendance policies may result in:

- Removal of the student from the clinic,
- Additional scheduled time in the clinic,
- A delay in return to the clinic,
- No opportunity to make up missed time,
- Placement in an additional clinical experience,
- Failure in the clinical experience, and/or
- Termination in the program.

The program emphasizes to clinical instructors the need to reflect any violations of these attendance policies on the clinical performance evaluation sheets. The program requires that acceptable and appropriate attendance be exhibited prior to completion of the program.

Unexcused Absences and Tardiness

Unexcused absences are not acceptable. The student is expected to be in the clinic when assigned. Absences and tardiness are considered unexcused when:

- They are for non-emergent reasons.
- They are not approved by the site and/or the DCE.
- The DCE and site are not informed of the absence or early departure prior to the event.
- The DCE and site are not informed of the tardiness within 24 hours of the event.

Planned Absences

Students are not permitted planned absences during clinical education experiences. However, the program understands that there are certain events such as professional (conference attendance, residency interviews, or job interviews), religious, or life events that may occur during clinical education experiences that may affect attendance. Students can complete an <u>Appendix I: Absences Appeal Form</u> and email the form to the DCE. Only after the student has received approval from the school may the student reach out to the clinical instructor/site coordinator of clinical education for approval. Once approval is granted through the school and the clinical site, the student must put in a leave request in Exxat and detail how the time will be made up during the clinical education experience based on feedback from the clinical site.

Unexpected Absences

During clinical education experiences, unexpected or unplanned absences may occur secondary to illness/injury, transportation issues, family emergency, death in family, or inclement weather. The student should first immediately contact the clinical instructor via their preferred method of communication. Then, the student should immediately communicate to the DCE via Team Chat, Teams Voicemail, or University Email detailing the reason for the absence. A plan will be developed in conjunction with the clinical site in regard to making up the missed clinical time. If the facility is unable or unwilling to schedule for this, the DCE may assign additional projects to be completed by the student.

Grading

If a student does not miss any clinical time or is given permission by the clinical instructor to make up excused absences/tardiness/early departures in the most appropriate manner, the student will receive 100% in the category. Detriments to grades for unexcused or excessive absences are fully outlined in each syllabus for each clinical experience.

Written Authorization

Due to illness, injury or accident, students who are out of the clinic for greater than two days will be required to get a health care professional's note stating they are medically fit to return to the clinical education experience. If a student has been in an accident, they must supply written evidence of the accident. The authorization must be submitted to the DCE and the student's clinical site upon his/her return. Failure to adhere to this policy will be considered a violation of the policy.

Clinical Experience Dress Code

All students must adhere to a uniform dress code when attending clinical rotations. Unacceptable dress or appearance could lead to course remediation with potential course failure. Good personal hygiene must be practiced as part of conforming to the dress code. Students should contact the facility where they will be performing their clinical rotation to inquire about their dress code and should adhere by that dress code. If the facility does not have a dress code, students should wear the PT program uniform:

- Students will wear khaki, navy or dark pants, a button-down shirt, polo or appropriate top.
- Shoes must have no more than a one-inch heel, be closed toed and heeled, and made of leather or vinyl. Tieup shoes must be tied.
- A program nametag must be worn at all times.

- Hair that reaches the collar or lower must be tied back.
- No jewelry other than watches, small earrings, and wedding bands.
- No colognes, perfumes or heavily scented hair products.
- No hats
- Clothing must always be neat and clean.
- Even if permitted by the clinical site:
 - Students must NEVER wear: midriff tops, tops which expose the midriff when the arms are raised, seethrough tops (even with another top underneath), pants whose hems drag the floor, ill- fitting pants, tank tops, sleeveless tops, shirts with logos or sayings (exception: shirts which bear the logo of the clinical site or the UC logo if they are acceptable to the site).
- Armpits must be covered at all times when working with patients.
- False fingernails are not permitted.
- No fingernails visible above the fingertip.
- No front or back cleavage is permitted.
- No visible tattoos.
- No body piercings other than the earlobe. No more than two earlobe piercings per ear are permitted.

Health and Other Requirements

Clinic facilities require the students to have completed health testing and vaccines. Satisfactory proof of these requirements must be received and confirmed by University Health Services, and on Exxat, to the faculty's satisfaction and prior to attending clinical education.

Health Insurance

Student Health Insurance is available for a fee and must be purchased if a student is not covered by private health insurance. Students who purchase Student Health Insurance through the University receive Needlestick insurance coverage as part of the basic policy. This will cover costs associated with follow-up care following a Bloodborne pathogen exposure. Students who do not purchase Student Health Insurance will be assessed a fee for a Needlestick Insurance Policy which will appear on the student bill (as Bloodborne Pathogen Insurance) the first semester of enrollment of each year.

University Health Services

Students must complete the health requirements of University Health Services, including but not limited to testing, vaccines, and consultation. Failure to complete vaccination series and/ or submit required documentation by the stated deadline will result in suspension from all program activities, including classes and clinical rotations. Some clinical facilities may have additional requirements, such as drug testing, additional screening or vaccinations, or criminal background checks. It is the student's responsibility to fulfill these requirements and to pay any related costs. The DCE will direct the student on to where to send the results of such testing.

According to the contract between the University and the clinical site, the clinical site will provide emergency care to students for any accident, injury, or illness. The student's health insurance shall be billed for any services, and the balance billed to the student. Responsibility for follow-up care remains the responsibility of the student.

Students are required to hand carry their medical documentation with them to the clinic on the first day they are required to report or have access to their documentation via Exxat, if required by the clinic. The student is to confirm this requirement when contacting the SCCE or CI prior to the first day of the clinical rotation.

Finances

Students are responsible for all finances involved in clinical education, including, but not limited to, transportation, room, and board.

Schedule

Students should be prepared and expect to be in the clinic for at least forty hours per week. However, hours may vary from one site to another. Students should prepare to be available 7 am to 8 pm, seven days per week. Students will follow the schedule of their clinical instructor, not that of the University.

Learning Expectations

The student is expected to learn, respect, and observe all the rules and regulations of the facility in which the student is working. They are also expected to respect the confidentiality of the staff and patients.

The clinical site also has obligations to the students – to provide a safe, supportive atmosphere conducive to learning and growth and to provide a clinical supervisor to whom the student will have a close, working relationship. If the facility does not appear to be meeting its obligations, the student should immediately inform the DCE.

Students are not to share any information from a clinical site such as patient care protocols, etc. unless a Clinical Education Release of Information form has been completed by a person in authority at the clinical site and the completed form submitted to the DCE.

Students are to identify themselves as a "student physical therapist" and are to obtain the patient's consent prior to initiating therapy. Students are to respect the right of the patient to refuse treatment by the student. In this case, the student is instructed to immediately report the patient's refusal to their clinical instructor.

Site Visits

The DCE will make every attempt to contact the student and their clinical instructor at least once during a rotation. This contact can be made by phone, video conference, email, or in person. The DCE will make every attempt to visit a student at least one time over the course of their three clinical rotations.

Termination from Clinical Education

A student will be removed from their clinical education experience and receive a failing grade for that experience if they:

- Are found to be under the influence of an intoxicating substance.
- Have been proven to have committed felonious behavior.
- Exhibit slanderous or libelous behavior.

Incidents and Incident Reporting

If an incident occurs at the clinical site:

The student must complete the clinical site's incident report form(s) as appropriate. If permitted, the PT program will request a copy of the clinical site's incident report form(s). If the PT program is not permitted to have a copy of the clinical site's form(s), the student will also be required to complete the Doctor of Physical Therapy Student Incident Report form. If the clinical site does not have an incident report form, the student must complete the program's Student Incident Report form regardless.

Student-Needlestick or Body Fluid Exposure

After a needlestick or body fluid exposure, students should proceed with the following steps:

- 1. If indicated, HIV prophylaxis needs to be started within 2 hours.
- 2. Cleanse wound with soap and water and irrigate area with saline. For eyes, irrigate with water, saline, or sterile irritants.
- 3. Arrange for source patient blood tests to be ordered by the provider responsible for the source patient's care (see below) Receive care from your medical provider or the nearest Emergency Department that accepts your insurance.

If you have UC Student Health Insurance:

Please go to the University Health Services:

University Health Services Holmes Building, 1st floor, Room 1007 Phone: (513) 584-4457

On nights, weekends, and University holidays:

Go to the nearest Emergency Department or the University Hospital Emergency Department. If you need advice call (513) 584-STIX. Follow up with University Health Services at (513) 584-4457 the next workday.

If you are away from Cincinnati:

Go to the hospital emergency room where you can get immediate care. If you need advice, call University Health Services (513) 584-4457, or the University Hospital operator (513) 584-7777 or (513) 584- PAGE, and page the University Health Services physician on call. Report your exposure to University Health Services at (513) 584-STIX or (513) 584-4457.

Note: If you do not have UC Student Health Insurance, contact your insurance company for instructions or go to the nearest Emergency Department that takes your insurance. You may receive care at University Health Services. You will be billed for your care.

Lab Work Required for Exposure Source:

- Rapid HIV antigen test (OCCEXP or other) (written informed consent required).
- HBsAg, HBclgM, and HCVab.

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- Hepatic profile.
- Collect 3 serum separator tubes and label with source name, medical record number, date, and time collected.
- At University Hospital UC students and employees should request an orange packet from Immediate Response lab (IRL) by calling (513) 584-3700.

Lab Work for Exposed Individual

- HIV antibody (HIVR)
- NDSTKII (includes HBsAg, HBsAb, HBcAb, SGPT, SGOT)
- HCVab

Note: Call University Health Services at (513) 584-4457 or have the University Hospital Operator at (513) 584-7777 or (513) 584-PAGE page the UHS provider on call for any questions regarding appropriate medical care. You will need to follow the protocol of the site at which you are rotating regarding documentation, obtaining source blood, etc.

Required Documentation for Clinical Assignments

It is the student's responsibility to submit required documentation by the stated deadline to the department or other appropriate parties (see <u>Appendix A: Additional Requirements</u>). Failure to do so may result in termination from the program or the cancellation of a clinical assignment which may result in a delay in progression through the program. In the rare instance that an original, submitted document has been lost or misplaced, the student is responsible for submitting a copy of the original form. Therefore, students are required to make a copy of the documentation prior to submitting it. It is the student's responsibility to maintain these copies on file until completion of the program.

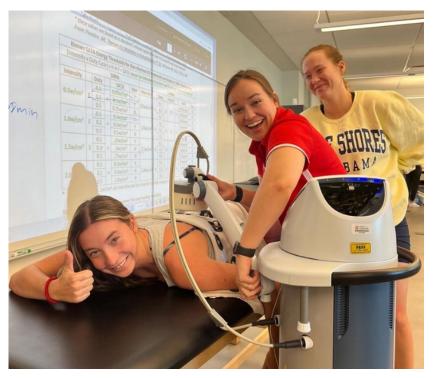
Guidelines for Selection of Clinical Instructors

Clinical Instructors who are selected to supervise the PT program's students should:

- Be a Physical Therapist with at least one-year experience with current licensure within their state/ country of practice.
- Be current in and follow clinical competence guidelines, professional policies and procedures, code of ethics, and jurisdictional laws and regulations.
- APTA Clinical Instructor Credentialing is preferred but not required.
- APTA membership is preferred but not required.
- Demonstrate a desire to work with students.
- Be able to meet student(s) needs in terms of personality, enthusiasm, and communication.

In addition, the clinical instructor should be familiar with the Clinical Internship Evaluation Tool (CIET) before the student is scheduled to begin. The training for the CIET takes approximately 20 minutes. The DCE will provide the information needed to get this completed prior to the student's rotation.

Upon request, the DCE/ADCE is available to provide an in-service for all clinical faculty or for individuals on the use of the CIET.



Students and faculty practicing the use of modalities during lab

Role of the Site Coordinator of Clinical Education (SCCE)*

- 1. Orient the student to the facility, the department, and the staff.
- 2. Instruct the student in departmental procedures.
- 3. Ensure that the student is supervised by a specific physical therapist and that the therapist is supportive of the student's needs, both clinically and personally.
- 4. Ensure that the student participates in departmental activities.
- 5. Ensure that the student is always assigned an appropriate number of patients to completely carry out treatments for and to document.
- 6. Allow the student to present an in-service program or complete an administrative project.
- 7. See that the student's performance is evaluated and that evaluations are carried on in private with opportunity for discussion to determine the student's strengths and weaknesses. The student will be responsible for his/her evaluation forms, the SCCE/CI will not need to return them to the PT Program.
- 8. Act as a resource to clinical instructors on the use of the Clinical Performance Instrument.

*Some of these duties might be shared with the CI, depending on clinicals

Appendices

Appendices

Appendix A: Additional Requirements

Requirement	Provider	Deadline for Completion
APTA Membership Along with being in-depth resource for our profession, membership provides access to the Guide to PT Practice which will be used throughout the program.	АРТА	Beginning of summer semester of the first year of the program and renewed annually. This is an additional fee.
Cardiopulmonary Resuscitation (CPR Adult, including one person and two person CPR and pediatric—infant and child)	Certified agency (American Heart Association, Red Cross) - for specific information on courses, refer to the paragraph on CPR certification under <u>Student Expenses</u> . Online courses are not acceptable.	Proof of CPR certification must be uploaded into Exxat by the end of the fall semester for all years in the program.
Bloodborne Pathogens Training	Compliance Training or Competency Testing, Blood Borne Pathogens Training	Beginning of summer semester of the first year of the program and renewed annually
HIPAA Training	Compliance Training or Competency Testing, HIPAA Privacy Introduction	Beginning of the summer semester of the first year and renewed annually
 Required Forms (Signature Required) Appendix B: University of Cincinnati Doctor of Physical Therapy Technical Standards and Release Form Appendix C: Consent Form (Activity, Travel and Video/Photo) Appendix D: Acknowledgement of Clinical Education and Vaccine Form 	Program	In year 1, forms are to be completed and submitted on the first day of class. Updates must be uploaded in years 2 and 3 as a part of a class.
Professional Behaviors Self- Assessment	Program	As outlined in Appendix J : Student Professional Behavior Assessment
Research Training - Human Subjects	UC Website- CITI	By the end of the fall semester of the first year and renewed annually

Yearly Physical Examination, Hep B series plus proof of positive titer, TB testing & Vaccinations (Measles, Mumps, Rubella (MMR), Meningococcal Quadrivalent, Tetanus,, Diptheria, Pertussis (Tdap), Varicella (chickenpox), and COVID19), Annual Influenza	University Health Services or General Practitioner	Upon entering the program and beginning of the fall semester each year. Students are advised that the University Health Services charges a fee to maintain health records as required by the program. Documentation submitted and verified through SalesForce.
Health Insurance and Needlestick (Bloodborne pathogens) insurance	University Health Services	Upon entering the program and must be maintained throughout the length of the program; additional fee unless the student is covered by the University Health Insurance

University of Cincinnati Standardized Immunization Form

DPT Physical Form

Appendix B: University of Cincinnati Doctor of Physical Therapy Technical Standards and Release Form

University of Cincinnati Doctor of Physical Therapy Technical Standards

Overview

The Commission on Accreditation of Physical Therapy Education (CAPTE) accredits professional physical therapy programs and requires that graduates of these programs are able to deliver entry-level clinical services. Graduates of entry-level programs are required to possess a broad base of knowledge, skills and attitudes requisite for the practice of physical therapy. Physical therapists must possess the intellectual, communication, sensory, social behavioral, observational, and motor abilities to meet the standards of practice.

In keeping with the goals of the University of Cincinnati Doctor of Physical Therapy (DPT) Program, the highest priority is placed on developing entry-level physical therapists who possess the knowledge, skills and attitudes to function in a broad variety of clinical settings and adapt to an ever-evolving healthcare environment. Certain technical standards are required for admission, progression, and graduation from the DPT Program.

Specifically, admission and retention decisions are based not only on prior satisfactory academic achievement, but also on non-academic factors, which serve to ensure that the candidate can complete the technical standards of the academic program required for graduation. The Physical Therapy Program faculty maintain the responsibility to evaluate achievement of these Technical Standards as they determine the level of student success based on their classroom and clinical education performance.

The Physical Therapy Program as a part of the University of Cincinnati is committed to providing students with equitable learning experiences and does not discriminate on the basis of race, color, creed, religion, national origin, gender, sexual orientation, age, marital status, or disability. A student with a disability may participate in the Program provided the student satisfies Program requirements including these Technical Standards, with or without reasonable accommodations. Students who seek reasonable accommodations for disabilities must contact Accessibility Resources (AR) within two weeks of the start of any physical therapy program course. Accessibility Resources will determine student eligibility for and recommend, if deemed appropriate, accommodations and services.

Students are encouraged to meet with faculty members by appointment or during office hours to discuss approved accommodations and how course requirements and activities may impact a student's ability to fully participate.

Technical standards, as distinguished from academic standards, refer to those physical, cognitive, and behavioral abilities required for satisfactory completion of all aspects of the curriculum, and the development of professional behaviors required by the Program of all students upon graduation. The Technical Standards and abilities required by the curriculum are in the following areas: sensory, processing abilities, observational ability, motor, communication, intellectual (conceptual, integrative, and quantitative abilities for problem solving, clinical reasoning and patient assessment) and the behavioral and social aspects of the performance of a physical therapist. *This list is not intended to be exhaustive and individual course instructors*

Appendices

may identify additional requirements for successful completion of their courses.

Technical Standards

Sensory and processing abilities: The student is expected to possess functional use of the senses of vision, touch, and hearing so that data received by the sense may be integrated, analyzed and synthesized in a consistent and accurate manner. The student must also possess the ability to perceive pain, pressure, temperature, position, vibration, position equilibrium, and movement that are important to the student's ability to gather significant information needed to manage patients effectively. The student must have the ability to master information, with or without reasonable accommodation, presented in course work in the form of lectures, written material, and projected images.

Observational ability: The student must be able to observe demonstrations in basic and applied sciences including, but not limited to human anatomy and neuroscience as well as in didactic courses in physical therapy theory and practice for normal and pathologic states. The student must be able to observe patients at a distance and close at hand, including non-verbal and verbal signals, to assess health and illness alterations in a variety of healthcare settings. Observation requires the use of common sense, as well as the functional use of the sense of vision, audition, olfaction, and palpation.

Communication ability: The student must be able to communicate effectively with patients and family, physicians and other members of the health care team. These skills involve assessing all information, including non-verbal cues, and promptly interpreting provided information. The student must be capable of responsive, empathetic listening to establish rapport in a way that promotes openness to issues of concern and sensitivity to potential cultural differences.

The student must be able to process and communicate information regarding the patient's status with accuracy in a timely manner to physical therapist colleagues and other members of the health care team. This information needs to be both concise and comprehensive, especially in settings where time is limited. Written or dictated patient assessments, etc., must be complete and accurate. The appropriate communication may also rely on the student's ability to make a correct judgment in seeking supervision and consultation in a timely manner.

Motor ability: The student must possess the fine and gross motor skills necessary to provide care to patients of all ages and sizes, including the ability to perform complete physical examinations using a variety of examination maneuvers. The student must be able to perform gross and fine motor movements with coordination sufficient to perform interventions, including management and operation of therapeutic healthcare equipment used in the general practice of a physical therapist. The student must be (1) able to maintain consciousness and equilibrium, (2) have sufficient levels of postural control, neuromuscular control, and eye-to- hand coordination, and (3) possess the physical and mental stamina to meet the demands associated with extended periods of sitting, standing, moving, lifting, and physical exertion required for satisfactory performance in patient care and classroom/laboratory settings. In addition, the student must possess adequate motor ability to respond efficiently and effectively in an emergency situation.

The student must be capable of gathering information, documenting a patient's history appropriately, and conducting a physical examination for inclusion in the patient's record. Such tasks require the ability to communicate with the patient and family. The student must also be capable of perceiving the signs of disease as manifested through the physical examination. Such information is derived from observation and palpation of the body surfaces, palpable changes in various organs and tissues, and auditory information (such as patient voice, joint, heart and lung sounds).

In order to master observation and palpation techniques, students are required to complete courses with laboratory components. Labs are co-educational, and students are often required to dress in shorts and t-shirts/sports bras to allow appropriate visualization and palpation. During these courses, students are required to work with classmates of all genders and all body types.

Intellectual, Conceptual, Integrative, and Quantitative Abilities: The student must possess a range of intellectual skills that allows mastery of the broad and complex body of knowledge that comprises a DPT curriculum. The student must be able to comprehend, analyze, and synthesize information from various sources. The student must be able to develop and refine problem- solving skills crucial to physical therapist practice. Problem solving involves the abilities to (1) comprehend three-dimensional relationships and understand the spatial relationships of structures, (2) measure, calculate, reason, analyze, and synthesize objective and subjective data, and (3) make decisions in a timely manner that reflect consistent and thoughtful deliberation and sound clinical judgment. The Program uses cadaver dissection in gross anatomy instruction and expects all students to participate in dissection as part of the learning process.

The student must possess the emotional health required for full use of their intellectual abilities, the exercise of good judgment, the prompt completion of all responsibilities attendant to the evaluation, diagnosis and care of patients, and the development of mature, sensitive, and effective relationships with patients. The student must be able to tolerate physically-taxing workloads and to function effectively under stress. The student must be able to adapt to changing environments, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of many patients. The student also must possess attributes which include compassion, empathy, altruism, integrity, responsibility, and tolerance.

Student and Faculty Responsibilities

The Technical Standards are included in the DPT Program Handbook which is located on the Program website as well as in the PT Community in Canvas.

Student acknowledgement of receipt of the DPT Program Handbook (containing Technical Standards), occurs after the student has read the handbook. All students are required to complete a brief quiz based on the contents of the DPT Program Handbook. Students must achieve an 80% or higher on the quiz or must retake the quiz until achieving this grade to ensure that an understanding of the handbook is confirmed.

The Technical Standards are in place to answer student questions about technical standards and/or performance expectations before matriculation and during enrollment in the Program. The faculty have the responsibility to review the standards regularly and to work with students and Accessibility Resources to ensure that our program is providing an overarching, equitable learning environment. Therefore, Technical Standards may be used by faculty for reference during classroom instruction, clinical rotations, or advising sessions to identify areas for improvement in both academic and non-academic behaviors.

Affirmation of Ability to Meet Technical Standards

Physical therapy students must demonstrate the ability to perform at least the functions/abilities listed in the Technical Standards document in a safe, reliable, and efficient way, in compliance with legal and ethical standards, throughout their entire physical therapy education. Therefore, I affirm that I, ______, am able to perform the activities listed in (Student's Name) the technical standards, with or without reasonable accommodation, within the parameters listed above.

Student's Signature:	Date:	

Acknowledgment of the Accommodation Process

I understand that if accommodations are necessary to meet the Technical Standards, it is my responsibility to contact Accessibility Resources at 513-556-6823 or AccessResources@uc.edu to request and coordinate them.

Initials: _____

Appendices

Appendix C: Consent Form



PTProgram - Activity Release

Realizing that during my course of instruction in the Physical Therapy Program, I will be involved in various class activities or activities to fulfill course requirements, I will not hold the University of Cincinnati, any of its employees, any facility affiliated with the University through a clinical contract, or any employee of these facilities responsible for any injuries or loss which might occur while participating in these activities.

Print Name	DPT Class
Signature	Date
Witness	Date
PT Program - Travel Release	
Realizing that during my course of instruction in the Physical Therapy Pro	gram I will be transported from one facility to

Realizing that during my course of instruction in the Physical Therapy Program, I will be transported from one facility to another to work or observe in various facilities. I do not hold the facility in which I am studying, the driver of the vehicle, or the University of Cincinnati or any of its employees responsible for any injuries or loss of property which might occur while being transported.

DPT Class

Date

Date

Print Name

Signature

Witness

Video/Photography Consent Release

give my consent to have a faculty, staff or other representative of the University of Cincinnati videotape/photograph me on <u>(as needed)</u>. I consent to the taping/photographs and release the University of Cincinnati, its authorities, and personnel from any responsibility in the taking of my picture. I realize that the videotape/these pictures may be shown to students and/or faculty of the Physical Therapy Program and consent to its/their use for educational and or marketing purposes. I know that I will receive no payment for this video/these pictures.

Print Name	DPT Class	
Signature	Date	
Witness	Date	-

Appendices

Appendix D: Acknowledgement of Clinical Education and Vaccine Form

Acknowledgment of Clinical Education and Vaccine Requirement Policies and Procedures

Overview

Certain programs at the University have clinical and/or external placements that are a requirement for program completion. To the extent permitted by law, students enrolled in such programs will be expected to comply with all rules, policies, guidelines, and requirements of any third-party placement, including but not limited to vaccination and background check requirements. Any student's failure to comply with such third-party rules, policies, guidelines or requirements may result in the student not being able to complete and graduate from their program

In addition, it is important to note that there are specific governmental policies in place with respect to the COVID-19 vaccine. Specifically, the Omnibus COVID-19 Health Care Staff Vaccination Interim Final Rule was issued on November 5, 2021 by Center for Medicare and Medicaid Services (CMS). CMS now mandates that most clinical partners report health care provider vaccination data into the Centers for Disease Control and Prevention's National Healthcare Safety Network (NHSN) surveillance system. This rule requires clinical partners to report data for all health care personnel in its facilities, including students and faculty. Clinical partners with unvaccinated health care personnel in their facilities could encounter incremental penalties that could result in the loss of federal funding.

In alignment with the CMS guidelines, at this time, clinical partners require proof of one of the following COVID-19 vaccinations: two-dose series of Pfizer vaccines, two-dose series of Moderna vaccines, single-dose of Johnson & Johnson vaccine, or an approved exemption.*

If, during your time enrolled in a University of Cincinnati Doctor of Physical Therapy program, any of our clinical partners change their COVID-19 compliance requirements, you will be held to that requirement, and we cannot guarantee that an approved exemption will be accepted as a form of compliance at the clinical site. All policies relating to the COVID-19 vaccination are subject to change and without warning. To ensure your successful completion and graduation from the University of Cincinnati College of Allied Health Sciences, you will be required to satisfy COVID-19 vaccine requirements.

Hence, with your acceptance into the University of Cincinnati Doctor of Physical Therapy Program (Program), you are making a commitment to fulfill all Program requirements, including those related to the clinical rotation component. Clinical rotations are required to fulfill UC DPT program's accreditation and prepare program graduates to be eligible to sit for the National Physical Therapy Examination (NPTE).

We want to ensure that students entering into our program and those who are currently enrolled in our Program are aware of these requirements and are making an informed decision to join and/or remain in a program where it may not be possible to completely fulfill the clinical education requirements as set by clinical sites for clinical rotations if a student chooses not to receive a required vaccine. **To be clear, students who choose not to receive a required vaccine will likely not be able to complete the Program**.

Exemptions

At this time, CMS guidelines allow medical and religious exemptions. However, not all clinical sites allow students to submit for an exemption. Please note: If you are granted an approved exemption, you must follow the testing requirements outlined by the clinical partner (if applicable). All financial obligations associated with required testing are the responsibility of the student.

You must be compliant with all requirements to engage in clinical activity. Vaccination requirements and exemption protocols are at the discretion of the facility where clinical activity is occurring.

Acknowledgements

Students are required to initial next to each statement, sign, date and submit this document to demonstrate their understanding and commitment to comply with program policies and procedures:

Acknowledgment of Clinical Education and Vaccine Requirement Policies and Procedures

_____ I acknowledge that if I do not receive the vaccine that I may not be able to participate with in-class activities when community volunteers decline interaction with students who are not vaccinated. The instructors in these classes will require an alternative assignment as they are able so as to assist with meeting the learning objectives of the community volunteer experience.

_____ I acknowledge that if I do not receive the vaccine that I may not get to participate in community-based events if the community partner determines that a vaccine is required of attendees.

_____ I acknowledge that I have read the Clinical Education Overview section of the DPT Program Handbook and have noted that the clinical education aspect of the curriculum centers on clinical sites offering clinical slots about one year in advance and are subject to cancellation. (See Clinical Education Overview section, DPT Program Handbook)

_____ I acknowledge that the Director of Clinical Education will investigate up to three sites for site selection outside of the current clinical offerings provided by clinical sites in any given year in the program. (See Clinical Education Overview section, DPT Program Handbook)

_____ I acknowledge that I am unable to experience a clinical rotation where I have a previous relationship with the clinical site and/or the therapists that work there. And I will inform the Director of Clinical Education of these relationships on the clinical education planning form as requested throughout the program. (See DPT Program Handbook, page 35)

_____ I acknowledge that it is the Director of Clinical Education's role to contact and communicate clinical sites for placement and that as a student, I am not permitted to do so in any fashion. (See Clinical Education Overview section, DPT Program Handbook)

_____ I acknowledge that to successfully complete the required clinical rotations that are a part of the Program's curriculum that I may be required to travel more than two hours out of town. (See Clinical Education Overview section, DPT Program Handbook)

_____ I acknowledge that if I request a vaccine exemption and am unable to be placed in accordance with the current plan of study for my cohort, due to no current clinical site who offered a placement for that cycle allowing a vaccine exemption, that I will need to request a leave of absence from the program until the same clinical course is offered again, which will likely be one year later. (See Policy 7, DPT Program Handbook)

_____ I acknowledge that successful completion of all clinical rotations is required to graduate from the Program. (See Policy 4, DPT Program Handbook)

_____ I acknowledge that I will be able to be in the program up to 2 years past my original graduation date in order to attempt to satisfy the clinical education requirement of the curriculum. (See Policy 6, DPT Program Handbook)

_____ I acknowledge that the COVID-19 vaccination is recommended by the Centers for Disease Control and Prevention (CDC) for all healthcare personnel in order to prevent infection and transmission of SARS-CoV-2 and its complications, including death, to my patients, my coworkers, my family, and my community.

By signing and submitting this Acknowledgment, I acknowledge that I have reviewed and understand all the University of Cincinnati Physical Therapy Program's policies and the statements contained in this Acknowledgment.

Print Name: ______Signature: ______Signature: ______

Date: _____

Appendices

Appendix E: Vaccination Exemption Forms Medical Exemption

University of Cincinnati Standard Exemption Form

Vaccination Requirement - Medical Exemption

You may exempt for medical reasons. Complete and sign this form. Your medical provider must complete the bottom section of this page.

First Name	Last Name	
M#	DOB	
UC Email	Starting Semester	

The above-named student requests an exemption from the following vaccine (only one vaccine per form).

Vaccine _

The above-named student understands that by submitting the University of Cincinnati General Exemption form for one or more required vaccines, s/he exempts at his/her own risk. The student releases the University of Cincinnati, its faculty, staff, and students from any and all claims connected with an outbreak of disease or other public health immunization emergency on campus. Additionally, the student understands that based on public health and other expert guidance, under certain circumstances, limitations may be placed on the use of campus facilities by unvaccinated individuals regardless of exemption status.

I understand that I am submitting these records to the University of Cincinnati and University Health Services. The records will be maintained in a system that is compliant with applicable privacy regulations. I authorize representatives of the University of Cincinnati and University Health Services to access these records for medical and public health purposes.

Student Signature ____

___ Date _____

TO BE COMPLETED BY LICENSED MEDICAL PROVIDER (MD, DO, PA, NP)

Medical Reason (<i>required</i>):	
	-
	_
	-

Healthcare Professional Signature/Credentials		Date
Printed Name		
Professional License #		
Title]
Street Address		Office Stamp
City, State, Zip Code		onice stamp
Phone Number	() Ext	
Fax Number	()	
Email Contact		

Last revised April 2023

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Appendix E: Vaccination Exemption Form <u>Non – Medical Exemption Form</u>

University of Cincinnati Standard Exemption Form

Vaccination Requirement - General (Non-Medical) Exemption

You may exempt for religious, good cause, philosophical, or moral reasons. Complete this form and sign in the presence of a Notary Public. The Notary Public will need to complete the bottom section.

First Name	Last Name	
M#	DOB	
UC Email	Starting Semester	

The above-named student requests an exemption from the following vaccine (only one vaccine per form).

Vaccine ____

Statement of Belief (<i>required</i>):		
· · · · · · · · · · · · · · · · · · ·		

The above-named student understands that by submitting the University of Cincinnati General Exemption form for one or more required vaccines, s/he exempts at his/her own risk. The student releases the University of Cincinnati, its faculty, staff, and students from any and all claims connected with an outbreak of disease or other public health immunization emergency on campus. Additionally, the student understands that based on public health and other expert guidance, under certain circumstances, limitations may be placed on the use of campus facilities by unvaccinated individuals regardless of exemption status.

I understand that I am submitting these records to the University of Cincinnati and University Health Services. The records will be maintained in a system that is compliant with applicable privacy regulations. I authorize representatives of the University of Cincinnati and University Health Services to access these records for medical and public health purposes.

Student Signature ____

Date___

TO BE COMPLETED BY NOTARY PUBLIC

Seal of Notary:

같아		
nted first and last name of Notary		
ature of Notary		

Subscribed and sworn before me on the _____ day of _____, 20_____.

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Appendix F: Incomplete Grade Form

PT Incomplete Grade Form

Student Name:	M#:
Faculty:	Course Name:
Course Number:	Semester/Year:
	vel of performance necessary, if appropriate
Date Assignment Must Be Completed By	у
Consequences of Non-Completion, Late	Completion and/or Performance Below the Indicated Level for Assignments
listed above	
Student Signature:	Date:
Faculty Signature:	Date:
Student Activity Performed, Date Perfor	rmed and/or Level of Performance:
Action Taken:	
Comments:	
** Copy should be sent to student via er	mail and placed in the student's PT file



Appendix G: Student Incident Report



Student Incident Report

Date incident occurred:
Date report filed:
Location of incident:
Names of individuals involved in the incident:
Names of individuals who witnessed the incident:
Please describe the incident including as many details as possible:
Did the individuals involved in the incident require medical care? If so, where was the care provided and by
whom?

Please submit this form to the PT Program Director within 24 hours of the incident or on the next business day if the incident occurs on a weekend or holiday.

Appendix H: Injury Report

4. Female Ma 5. UCID number Ma 6. Date Hired 6. Date Hired 7. Home Address (# and street, city, state, and zip code) 8. Home Phone (9. Job Title 10. Dept, Phone (11. Department 12. Time employee began 13. Date of injury or illness 14. Time of injury or illness occur 16. Is this a new injury or illness(=) 17. Did injury or illness occur 19. Name(s) and Phone(s) of Witness(es) 20. Name of Supervisor Notified 20. Name of Supervisor Notified Yes 21. Did employee receive medical Yes 22. Medical Facility (name, phone, and address) Date & Time No 23. Name of physician/health care professional 24. Was employee treated in Yes 25. Was employee hover only no evernight as an i an emergency room? No 23. Name of physician/health care professional 24. Was employee treated in Leg (R / L) Leg (R / L) 23. Name of physician/health care professional 24. Was employee treated in an emergency room? No No 24. Other Head (R / L) Face and Neck (R / L) Leg (R / L) Eye (R / L) Eye (R / L) 25. Check Specific Type Fracture Foreign Body Bruise	IESS
employer are the worker was at fault or that an OSHA Standard was violated. TYPE OR PRINT IN INK. ATTACH ADDITIONAL PAGES IF YOU NEED EXTRA SPACE 1. Has a fatality occurred? No Yes If yes, date of death (mo./day/yr.) / 2. Employee Name (last, first, middle) 3. Date of Birth (mo./day 4. Genate 5. UCID number M 6. Date Hired 6. Date Hired 7. Home Address (# and street, city, state, and Zip code) 8. Home Phone (10. Dept. Phone (11. Department 12. Time employee began 13. Date of injury or illness (mo./day/yr.) / 14. Time of injury or illness (mo./day/yr.) / / 14. Time of injury or illness occur Pres 18. Location of Incident (mo./day/yr.) / / 17. Did injury or illness occur Pres 18. Location of Incident (mo./day/yr.) 19. Name of Supervisor Notified Yes 12. Medical Facility (name, phone, and address) Date of Treatme treatment following this incident? No 20. Name of physician/health care professional 24. Was employee treated in Pres 25. Was employee treated in an emergency room? No State (R/L) Eye (R/L) 21. Did employee receive medical Pres 25. Was employee treated in an emergency room? No <th></th>	
TYPE OR PRINT IN INK. ATTACH ADDITIONAL PAGES IF YOU NEED EXTRA SPA4 1. Has a fatality occurred? No Yes. If yes, date of death (mo./day/yr.) / 2. Employee Name (last, first, middle) 3. Date of Birth (mo./day 4. Female Ma 5. UCID number M	elow does not necessarily mean that the
2. Employee Name (last, first, middle) 3. Date of Birth (mo/day 4. Female Ma 5. UCID number M 6. Date Hired 7. Home Address (# and street, city, state, and zip code) 8. Home Phone (9. Jøb Title 10. Department 11. Department 12. Time employee began 13. Date of injury or illness 14. Time of injury or illness 15. Is this a new injury or illness? 16. Is this a new injury or illness? 17. Did injury or illness occur 18. Name of Supervisor Notified 19. Name(s) and Phone(s) of Witness(es) 20. Name of Supervisor Notified 19. Name of physician/health care professional 24. Was employee treated in an emergency room? 25. Mas end physician/health care professional 26. Check Part(s) of Body Affected 19. Head (R / L) 27. Check Specific Type 28. What was the employee doing jast before the incident occurred? 29. What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 fer chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time." 30. What object or substance directly harmed the employee? Examples: "c	ACE.
4. Female Ma 5. UCID number M A 6. Date Mires M A 7. Home Address (# and street, city, state, and zip code) 8. Home Phone (9. Job Title 10. Dept. Phone (10. 11. Department 12. Time employee began 13. Date of injury or illness 4. Time of injury or illness a.m. 15. Was employee began 16. Is this a new injury or illness? Yes 17. Did injury or illness occur Yes 18. Location of Incident on UC premises? 19. Name of Supervisor Notified Yes 12. Medical Facility (name, phone, and address) Date & Time No 21. Did employee receive medical Yes 22. Medical Facility (name, phone, and address) Date of Treatme treatment following this incident? No No O O O Dep (P(L) Leg (R/L) Leg	
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8. Home Phone (9. Job Title	ed (mo_/day/yr.) /
11. Department 12. Time employee begat 13. Date of injury or illness a.m. 14. Time of injury or illness a.m. 15. Was employee on dut (mo./day/yr.) / 16. Is this a new injury or illness? Yes 17. Did injury or illness? D.m. 18. Name(s) and Phone(s) of Witness(cs) Date & Time No 20. Name of Supervisor Notified Yes 21. Did employee receive medical Yes 12. Time employee bagat Yes 23. Name of physician/health care professional 24. Was employee treated in an emergency room? Date of Treatme treatment following this incident? 26. Check Part(s) of Body Affected Head (R / L) Esc and Neck (R / L) Eye (R / L) 21. Did engleyee doing just before the incident occurred? Describ Body Bruise overnight as an i circle Right/Left 26. Check Specific Type Fracture Foreign Body Bruise Dite (R / L) Eye (R / L) 27. Check Specific Type Bruins Bruins Other Dite (R / L) Eye (R / L) 28. What was the employee doing just before the incident occurred? Describ Rody Bruise C 29. What happened? Tell us how the in)
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20. Name of Supervisor Notified	t (Building & Rm.)
21. Did employee receive medical Yes treatment following this incident? 22. Medical Facility (name, phone, and address) Date of Treatment overnight as an incident? 23. Name of physician/health care professional 24. Was employee treated in Some an emergency room? No 25. Was employee how overnight as an incident? 23. Name of physician/health care professional 24. Was employee treated in Some an emergency room? No No 23. Check Part(s) of Body Affected Arm (R/L) Face and Neck (R/L) Eye (R/L) Eye (R/L) 24. Man directed Right/Left Arm (R/L) Hand (R/L) Eye (R/L) Eye (R/L) 27. Check Specific Type of Injury or Illness Fracture Foreign Body Bruise Eve (R/L) 28. What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipme using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand spraye 29. What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 for chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time." 30. What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." I the incident, leave it blank. 31. Who completed this form? Injured employee Supervisor Other 32. Date 1 certify the information I have furnished on	No Witnesses
treatment following this incident? No 23. Name of physician/health care professional 24. Was employee treated in an emergency room? Yes 25. Was employee h overnight as an i overnight as an i an emergency room? 24. Max employee for the level of the l	otified
an emergency room? No overnight as an i 26. Check Part(s) of Body Affected Head (R / L) Face and Neck (R / L) Eye (R / L) and circle Right/Left Upper Back (R / L) Hand (R / L) Eye (R / L) Ege (R / L) 27. Check Specific Type Fracture Foreign Body Bruise Ege (R / L) 28. What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipme using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand spraye 29. What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 fc chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time." 30. What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." I the incident, leave it blank. 31. Who completed this form? Injured employee Supervisor Other 32. Date I certify the information I have furnished on this form is true, correct, and complete to the best of my knowledge. Furthermore, I understan durited by the University or its representatives. I understand that falsifying this document may be grounds for disciplinary action up to and it	ent
and circle Right/Left Arm (R/L) Hand (R/L) Leg (R/L) Upper Back (R/L) Lower Back (R/L) Other 27. Check Specific Type of Injury or Illness Fracture Foreign Body Bruise 28. What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipme using. Be specific. Examples: "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand spraye 29. What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 for chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time." 30. What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." I the incident, leave it blank. 31. Who completed this form? Injured employee Supervisor Other 32. Date 1 certify the information I have furnished on this form is true, correct, and complete to the best of my knowledge. Furthermore, I understant waited by the University or its representatives. I understant that falsifying this document may be grounds for disciplinary action up to and it	hospitalized Yes in-patient? No
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audited by the University or its representatives. I understand that falsifying this document may be grounds for disciplinary action up to and in	te completed
In addition, I may be in violation of Federal and/or State laws and subject to prosecution.	
33	
Employee's Signature Date	

Supervisor's Signature	Date	Phone number
SEND REPORT TO: Original - Environmental Health & Safety, ML 0218 Copy - Retain in Departmental Business Office Fax - Human Resources, 513-558-0676 Copy - Provide to Employee	ENVIRONMENTAL HEALTH & SAFETY OFFICE USE ONLY	FORM A-1352 (a) Rev. 03/20

ALL WORK-RELATED INJURIES AND ILLNESSES ARE INVESTIGATED BY ENVIRONMENTAL HEALTH & SAFETY

Appendix I: Absences Appeal Form



Physical Therapy Program Absence Appeal Form

Attendance during a clinical education experience is mandatory. The program recognizes professional, religious, and life events occur that may impact the student's ability to report to clinic. Students can submit this form to the DCE during clinical education experiences for permission to have an absence to be considered excused.

Section I: Student				
Students Name:	Click or tap here to enter text.			
Date:	Click or tap to enter a date.			
Provide description and rationale for proposed absence:	Click or tap here to enter text.			

Section II: DCE to Complete									
Current Competency from Clinic	cal Instru	ctor:	-						
Will proposed absence impact t to pass the rotation?	he stude	nt's ability]	No	1		Yes	
Please Explain:				Click or tap here to enter text.					
Current Competency from Clini	cal Paper	work:		Click or tap here to enter text.					
Comments from Faculty:				Click or tap here to enter text.					
Previous Didactic Remediation:	□Yes		No			ng	R	Resolved	
Previous Clinical Education Yes No.		No			ng	□R	Resolved		
Faculty Decision:			ce A	e Approved Absence Denied					
DCE Signature:	DCE Signature:			Clic	k or tap here	to ente	er text		
Date:				Clic	k or tap to er	nter a da	ate.		

Appendix J: Student Professional Behavior Assessment

Development of Student Physical Therapists Professional Behaviors

The development of professional behaviors is an important dimension in the process of becoming a competent physical therapist. Professional behaviors are attributes, characteristics and behaviors that are not explicitly part of the physical therapist core knowledge or technical skill training, but nonetheless, they are required for success in our profession. During the eight semesters you are enrolled in the graduate physical therapy program at the University of Cincinnati, a systematic process of evaluation will occur to assess your development of the 10 professional behaviors. A steady progression from the beginning level to the entry level should be evident. For successful completion of the program, you will need to meet the entry-level of behavior in all 10 categories by the end of semester eight (8). As a student physical therapist at the University of Cincinnati you will follow the evaluation schedule outlined below related to your professional development as a physical therapist.

Schedule

Year 1	Year 2	Year 3
Professional Roles I: Introduction to Professional Behaviors and Complete Self- Assessment	Clinical Seminar I: Complete Self-Assessment	
	PTP I: Self-reflection on progress of professional behavior development	PTP III: Self-reflection on progress of professional behavior development
	Clinical Seminar II: Complete Self-Assessment	

**Faculty will complete professional behavior assessments of students as needed throughout the program.

PROFESSIONAL BEHAVIORS ASSESSMENT

General Instructions

- 1 Read description and definitions of professional behavior.
- 2. Become familiar with behavioral criteria for each level.
- 3. Assess student performance continually relative to professional behavior using the behavioral criteria.
- 4. Complete assessment according to the schedule
- 6. Student and advisor to review assessment form during annual advisor meeting.

PLEASE NOTE:

- 1. The criteria provide examples of behaviors required for competence at a given level.
- It is NOT necessary for the student to demonstrate all the criteria to be considered competent at a given level.

Professional Behaviors

Professional Behaviors are attributes, characteristics or behaviors that are not explicitly part of the professions' core of knowledge and technical skills but are nevertheless required for success in the profession. The ten abilities and definitions developed are:

PROFESSIONAL BEHAVIORS	DEFINITION
1. Critical Thinking	The ability to question logically; identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information.
2. Communication Skills	The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
3. Problem-Solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. Interpersonal Skills	The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.
5. Responsibility	The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.
6. Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.
7. Use of Constructive	The ability to manage time and Feedback resources effectively to obtain the maximum possible benefit.
8. Effective Use of Time and Resources	The ability to obtain the maximum benefit from a minimum investment of time and resources.
9. Stress Management	The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.
10. 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.

PROFESSIONAL BEHAVIORS

Instructions: Highlight all criteria that describe the student's performance and determine level of rating.

Professional Behavior	Beginning Level Behavioral Criteria	Intermediate Level Behavior Criteria	Entry Level Behavioral Criteria
1. Critical Thinking	Raises relevant questions; Considers all available information; Articulates ideas; Understands the scientific method; States the results of scientific literature but has not developed the consistent ability to critically appraise findings (i.e. methodology and conclusion); Recognizes holes in knowledge base; Demonstrates acceptance of limited knowledge and experience	Feels challenged to examine ideas; Critically analyzes the literature and applies it to patient management; Utilizes didactic knowledge, research evidence, and clinical experience to formulate new ideas; Seeks alternative ideas; Formulates alternative hypotheses; Critiques hypotheses and ideas at a level consistent with knowledge base; Acknowledges presence of contradictions	Distinguishes relevant from irrelevant patient data; Readily formulates and critiques alternative hypotheses and ideas; Infers applicability of information across populations; Exhibits openness to contradictory ideas
2. Communication Skills	Demonstrates understanding of the English language (verbal and written): uses correct grammar, accurate spelling and expression, legible handwriting; Recognizes impact of non-verbal communication in self and others; Recognizes the verbal and non- verbal characteristics that portray confidence; Utilizes electronic communication appropriately	Utilizes and modifies communication (verbal, non-verbal, written, and electronic) to meet the needs of different audiences; Restates, reflects, and clarifies message(s); Communicates collaboratively with both individuals and groups; Collects necessary information from all pertinent individuals in the patient/client management process; Provides effective education (verbal, non-verbal, written and electronic)	Demonstrates the ability to maintain appropriate control of the communication exchange with individuals and groups; Presents persuasive and explanatory verbal, written or electronic messages with logical organization and sequencing; Maintains open and constructive communication; Utilizes communication technology effectively and efficiently

Professional Behavior	Beginning Level Behavioral Criteria	Intermediate Level Behavior Criteria	Entry Level Behavioral Criteria
3. Problem-Solving	Recognizes problems; States problems clearly; Describes known solutions to problems; Identifies resources needed to develop solutions; Uses technology to search for and locate resources; Identifies possible solutions and probable outcomes	Prioritizes problems; Identifies contributors to problems; Consults with others to clarify problems; Appropriately seeks input or guidance; Prioritizes resources (analysis and critique of resources); Considers consequences of possible solutions	Independently locates, prioritizes and uses resources to solve problems; Accepts responsibility for implementing solutions; Implements solutions; Reassesses solutions; Evaluates outcomes; Modifies solutions based on the outcome and current evidence; Evaluates generalizability of current evidence to a particular problem
4. Interpersonal Skills	Maintains professional demeanor in all interactions; Demonstrates interest in patients as individuals; Communicates with others in a respectful and confident manner; Respects differences in personality, lifestyle, and learning styles during interactions with all persons; Maintains confidentiality in all interactions; Recognizes the emotions and bias that one brings to all professional interactions	Recognizes the non-verbal communication and emotions that others bring to professional interactions; Establishes trust; Seeks to gain input from others; Respects role of others; Accommodates differences in learning styles as appropriate	Demonstrates active listening skills and reflects back to original concern to determine course of action; Responds effectively to unexpected situations; Demonstrates ability to build partnerships; Applies conflict management strategies when dealing with challenging interactions; Recognizes the impact of non-verbal communication and emotional responses during interactions and modifies own behaviors based on them
5. Responsibility	Demonstrates punctuality; Provides a safe and secure environment for patients; Assumes responsibility for actions; Follows through on commitments; Articulates limitations and readiness to learn; Abides by all policies of academic program and clinical facility	Displays awareness of and sensitivity to diverse populations; Completes projects without prompting; Delegates tasks as needed; Collaborates with team members, patients, and families; Provides evidence-based patient care	Educates patients as consumers of health care services; Encourages patient accountability; Directs patients to other health care professionals as needed; Acts as a patient advocate; Promotes evidence-based practice in health care settings; Accepts responsibility for implementing solutions; Demonstrates accountability for all decisions and behaviors in academic and clinical settings

Professional Behavior	Beginning Level Behavioral Criteria	Intermediate Level Behavior Criteria	Entry Level Behavioral Criteria
6. Professionalism	Abides by all aspects of the academic program honor code and the APTA Code of Ethics; Demonstrates awareness of state licensure regulations; Projects professional image; Attends professional meetings; Demonstrates cultural/ generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers	Identifies positive professional role models within the academic and clinical settings; Acts on moral commitment during all academic and clinical activities; Identifies when the input of classmates, co-workers and other healthcare professionals will result in optimal outcome and acts accordingly to attain such input and share decision making; Discusses societal expectations of the profession	Demonstrates understanding of scope of practice as evidenced by treatment of patients within scope of practice, referring to other healthcare professionals as necessary; Provides patient & family centered care at all times as evidenced by provision of patient/family education, seeking patient input and informed consent for all aspects of care and maintenance of patient dignity; Seeks excellence in professional practice by participation in professional organizations and attendance at sessions or participation in activities that further education/professional development; Utilizes evidence to guide clinical decision making and the provision of patient care, following guidelines for best practices; Discusses role of physical therapy within the healthcare system and in population health; Demonstrates leadership in collaboration with both individuals and groups
7. Use of Constructive Feedback	Demonstrates active listening skills; Assesses own performance; Actively seeks feedback from appropriate sources; Demonstrates receptive behavior and positive attitude toward feedback; Incorporates specific feedback into behaviors; Maintains two-way communication without defensiveness.	Critiques own performance accurately; Responds effectively to constructive feedback; Utilizes feedback when establishing professional and patient related goals; Develops and implements a plan of action in response to feedback; Provides constructive and timely feedback	Independently engages in a continual process of self- evaluation of skills, knowledge, and abilities; Seeks feedback from patients/clients and peers/mentors; Readily integrates feedback provided from a variety of sources to improve skills, knowledge and abilities; Uses multiple approaches when responding to feedback; Reconciles differences with sensitivity; Modifies feedback given to patients/clients according to their learning styles
8. Effective Use	Comes prepared for the day's activities& responsibilities;	Utilizes effective methods of searching for evidence for practice	Uses current best evidence; Collaborates with members of the team to maximize the impact of treatment

Professional Behavior	Beginning Level Behavioral Criteria	Intermediate Level Behavior Criteria	Entry Level Behavioral Criteria
of Time and Resources	Identifies resource limitations (i.e. information, time, experience); Determines when and how much help/assistance is needed; Accesses current evidence in a timely manner; Verbalizes productivity standards and identifies barriers to meeting productivity standards; Self- identifies and initiates learning opportunities during unscheduled time	decisions; Recognizes own resource contributions; Shares knowledge and collaborates with staff to utilize best current evidence; Discusses and implements strategies for meeting productivity standards; Identifies need for and seeks referrals to other disciplines	available; Has the ability to set boundaries, negotiate, compromise, and set realistic expectations; Gathers data and effectively interprets and assimilates the data to determine plan of care; Utilizes community resources in discharge planning; Adjusts plans, schedule etc. as patient needs and circumstances dictate; Meets productivity standards of facility while providing quality care and completing non-productive work activities
9. Stress Management	Recognizes own stressors; Recognizes distress or problems in others; Seeks assistance as needed; Maintains professional demeanor in all situations	Actively employs stress management techniques; Reconciles inconsistencies in the educational process; Maintains balance between professional and personal life; Accepts constructive feedback and clarifies expectations; Establishes outlets to cope with stressors	Demonstrates appropriate affective responses in all situations; Responds calmly to urgent situations with reflection and debriefing as needed; Prioritizes multiple commitments; Reconciles inconsistencies within professional, personal and work/life environments; Demonstrates ability to defuse potential stressors with self and others
10. Commitment to Learning	Identifies problems; formulates appropriate questions; identifies and locates appropriate resources; demonstrates a positive attitude (motivation) toward learning; offers own thoughts and ideas; identifies need for further information.	Prioritizes information needs; analyzes and subdivides large questions into components; seeks out professional literature; sets personal and professional goals; ID's own learning needs based on previous experiences; plans and presents an in- service, or research or case studies; welcomes and/or seeks new learning opportunities	Applies new information and re-evaluates performance; accepts that there may be more than one answer to a problem; recognizes the need to and is able to verify solutions to problems; reads articles critically and understands limits of application to professional practice; research and studies areas where knowledge base is lacking

Semester 1 2 3 4 5 6 7 8

Professional Behaviors

Final Assessment Instructions: Rate each behavior based on your own self-assessment. Do so by circling the appropriate level of your own performance at the end of each semester or professional experiences. You are required to provide comments to support your ratings-give *specific* examples of your accomplishments. Use the What, So What, Now What Framework. Please sign and date the assessment below.

B - Beginning Level	I -Intermediate		E - Entry Level
Critical thinking	В	Т	E
Comments:			ora incente antonomia
Communication Skills	В	I	E
Comments:			
Problem Solving	В	T	E
Comments:			
Interpersonal Skills	в	Т	E
Comments:			
Responsibility	В	I	E
Comments:			
Professionalism	В	T	E
Comments:			

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	Use of Constructive Feedback				
	Comments:				
	Effective Use of Time and Resources Comments:		Т		
	Stress Management	В	I	E	
	Comments:		1	E	
	comment to Learning				
	Comments:				
IAF		tic, Timeboun	l, Resource(s) n		
IAF	Comments: RTR: Specific, Measurable, Attainable, Realis your goal from where you are coming from	tic, Timeboun	l, Resource(s) n		
IAF	Comments: TR: Specific, Measurable, Attainable, Realis your goal from where you are coming from 1. SMARTR GOAL	stic, Timebound to where you	l, Resource(s) n		
IAF	Comments: RTR: Specific, Measurable, Attainable, Realis your goal from where you are coming from 1. SMARTR GOAL 2. SMARTR GOAL	stic, Timebound to where you	l, Resource(s) n		

Appendix K: COVID-19 and Clinical Education

Requirements for participation in clinical education experiences during the COVID-19 Pandemic. The following requirements are in addition to the program's usual clinical education requirements and any additional requirements/onboarding assigned by your clinic site:

The Doctor of Physical Therapy Program at University of Cincinnati recognizes the unique and unprecedented challenges caused by the COVID-19 pandemic faced by our clinical partners. We also recognize our responsibility to continue to advance the training and education of the workforce of tomorrow. Although CAPTE has provided some flexibility to clinical education expectations and duration, there is still a fundamental need to provide sufficient opportunity for students to practice, apply and demonstrate competency of entry-level performance skills prior to graduation.

In an effort to preserve clinical education learning opportunities for our students, the program has identified the following actions and student expectations to support our clinical partners. The program also recognizes the critical need for flexibility for start dates and duration of clinical experiences based on the unique circumstances of each clinical site while at the same time keeping accreditation standards top of mind.

Finally, we know that guidelines may change as we continue to navigate the impact of the pandemic. We will remain in communication throughout the clinical experiences and encourage you to contact the Director of Clinical Education (DCE) and/or the Program Director (PD) if you have any thoughts, questions, concerns, or suggestions. We are in this together to continue to grow our profession and maintain high academic and professional standards.

COVID-19 SPECIFIC TRAINING

- PPE review and practice:
 - o UC Health COVID Training
- Bloodborne Pathogens online training
 - o Review CDC resources related to PPE
 - o Best Practices for Personal Protective Equipment
- COVID-19 Training students will be required to complete the following free, online modules from the APTA Learning Center. Once you have completed all modules, submit a copy of the certificates of completion for all modules at one time to your Exxat profile under "Required Documents.
 - o Covid-19: Clinical Best Practices in Physical Therapy Management
 - o Overview of Prone Positioning: Why it Works and Lessons Learned
 - Students may be participating in services delivered via telehealth and are highly encouraged to complete courses housed within the APTA Learning Center "Telehealth Catalog of Courses"
 - Complete at least one module most relevant to the practice setting you are going to for your clinical education experience. Prior to each rotation, you must select a new course to complete and upload the certification to: "COVID Training" in Exxat under the "Required Documents" section. Below are a few examples and not an exhaustive list. It is your duty as a professional to select the most relevant topic(s) to your clinical setting.
 - PACER series: Geriatric Considerations ii. PACER series: Home Health Considerations
 - PACER series: Pediatric Considerations

- PACER series: Pelvic Health Considerations
- Physical Therapy Considerations for Inpatient Rehab with COVID-19
- Physical Therapy Considerations of COVID-19 in the Post-Acute Setting
- Acute Care Physical Therapy and COVID-19: How Can We Add the Greatest Value (2-part series)
- PACER series: Outpatient PT for COVID-19 Part 1 and Part 2
- PACER series: Vital signs
- Others as appropriate—more topics are consistently added to the Learning Center

SELF-REPORTING ILLNESS

- Students will be expected to IMMEDIATELY self-report signs or symptoms of illness. Students should notify the program Director of Clinical Education (DCE), the Clinical Instructor, and the site Employee Health (or Rehab Supervisor if appropriate) or other site personnel as deemed appropriate by the clinical site. The students are to follow the clinical site policy and procedures related to reporting illness.
- <u>Symptoms of COVID-19</u>, COVID-19 symptoms to be monitored and reported include:
 - o Cough
 - o Shortness of breath or difficulty breathing
 - o Fever
 - o Chills
 - o Repeated shaking with chills
 - o Muscle pain
 - o Headache
 - o Sore throat
 - New loss of smell
- <u>Exposure</u>: If student is informed that they were exposed to someone who tests positive to COVID-19 at any time during the clinical experience, either in or out of the facility, the student will immediately contact DCE, clinical instructor, and the SCCE.
- <u>Testing considerations</u>: If a student requires testing to be "cleared" to begin a clinical experience or because they present with symptoms, they will first seek options through their primary care provider, city- or state-sponsored testing, or university testing.
- <u>Insurance</u>: While on clinical rotations, students maintain personal health insurance and the school maintains professional liability insurance. At this time, there is no indication for a change in this original policy.

MENTAL HEALTH

Considerations in today's healthcare environment – the COVID-19 pandemic has created significant burden and stress in the current healthcare environment. Students must recognize how this impacts their own stress and be prepared to manage it. They also must understand the professional behavior expectations and possible restrictions that may be placed on them during and outside clinical work hours. To prepare students for coping with the added stress and heightened professional behavior expectations, students must:

- Review the following resources:
 - o <u>CDC: Coping & COVID-19</u>
 - <u>American Psychiatric Association Coronavirus & Mental Health: Taking Care of Ourselves During</u> <u>Infectious Disease Outbreaks</u>
 - <u>Understanding and Addressing Sources of Anxiety Among Health Care Professionals During the</u> <u>COVID-19 Pandemic. JAMA</u>
 - o Underlying Conditions and the Higher Risk for Severe COVID-19

SITE-SPECIFIC DETERMINATIONS

- Students will follow site-specific guidance on what specific PPE should be worn when engaged in patient care and during time in the clinic.
- Students are NOT fit-tested for N-95 masks by the university. Therefore, clinical sites will determine if and when a student will be fit tested for a N-95 mask.
- Students will be compliant with temperature checks upon clinical site entry if indicated.
- The student may be asked to keep a list of patients treated if contact tracing is later needed.
- If traveling from out-of-state for a clinical experience, the student will seek guidance by the site coordinator if they are expected to self-quarantine for a period of time (typically 14-days) prior to starting clinical experience.

STUDENT EXPECTATIONS

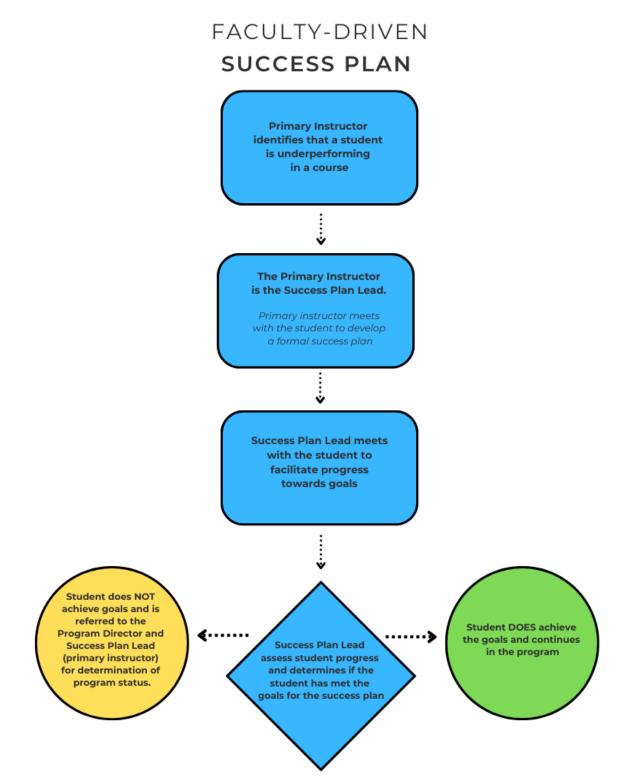
- Students are expected to demonstrate Professional Behaviors as defined by the APTA at all times. However, when dealing with challenges caused by the current pandemic, it is particularly important to recognize the need for the following student behaviors:
 - Flexibility- Plans made for clinical experiences may change abruptly and without warning. Likewise, policies and requirements for our clinical partners are continuously evolving based on new information and data. We must be flexible and adaptable to these changes.
 - Respect- Our clinical partners are facing unique and unprecedented challenges, and we must be respectful and aware of those challenges.
 - Open-mind- Students are expected to be open and adaptable to alternative learning experiences (which may include multiple clinical instructors, multiple students, simulations, etc.)
 - Problem solvers- Students are encouraged to actively engage in how our profession addresses and identifies solutions to new problems.

ADDITIONAL RESOURCES

- <u>The American Council of Academic Physical Therapy</u>
- PT Program Faculty: meet with the DCE (or designated faculty member as assigned by DCE) to review expectations and discuss any concerns or issues you may have. Students will have the opportunity to opt out of completing their clinical education experience at this time if they have concerns. Students will complete the following acknowledgement form to communicate their preference about proceeding with their clinical education experience at this time.

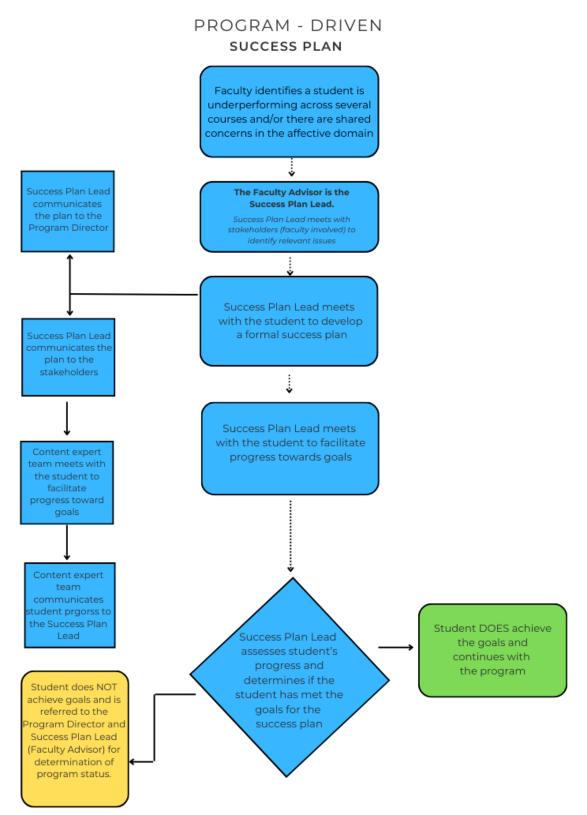
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Appendix L: Flow Chart Representations of the Success Plan Processes On Campus Success Plan: Faculty-Drive Success Plan



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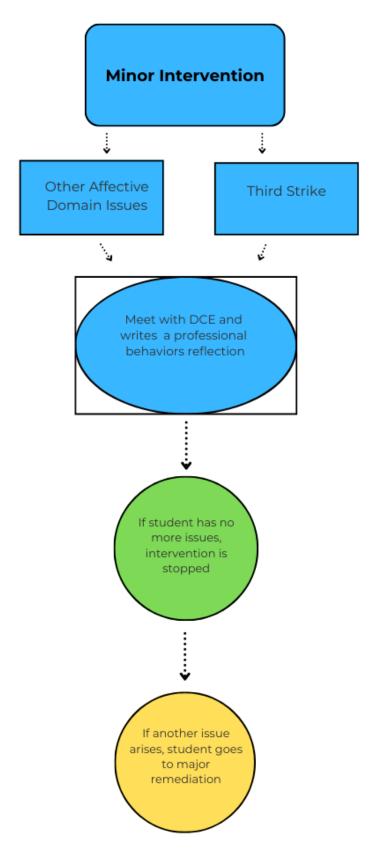
On Campus Success Plan: Program-Driven Success Plan



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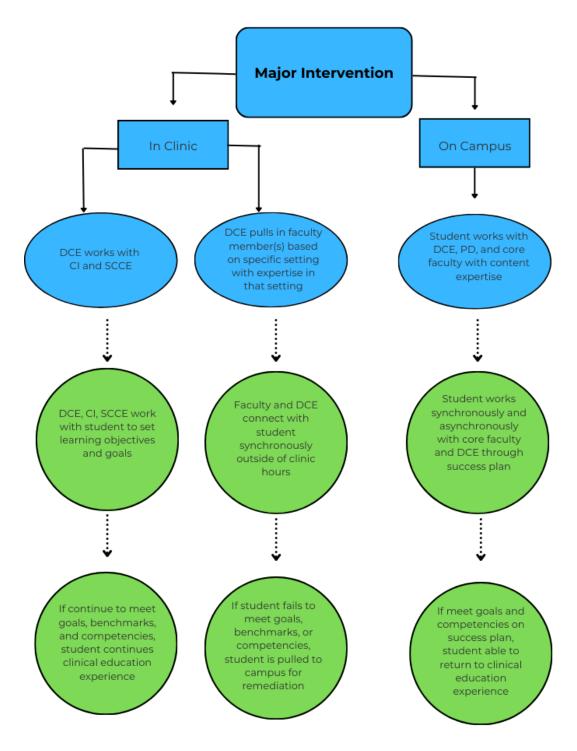
In Clinic - Intervention Process: Minor Intervention

IN-CLINIC REMEDIATION PLAN



In Clinic - Intervention Process: Major Interventions

IN-CLINIC REMEDIATION PLAN





Department of Rehabilitation, Exercise, & Nutrition Sciences Box 670394 Cincinnati, OH 45267

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