Preface

Students in the Doctor of Physical Therapy Program (DPT) are officially considered to be students of West Coast University (WCU). Therefore, DPT students are expected to comply not only with the regulations and academic standards in this handbook (including the clinical education component), but also with those specified in the most current edition of the WCU University Catalog and Student Handbook. Please be advised that the University Catalog contains policies and procedures that apply to all students and is the primary source of reference. If there are any discrepancies in policies or procedures that are contained in the University Catalog with those contained in the DPT Programmatic Student Handbook, the University Catalog will be followed. Students enrolled in the DPT program are expected to be familiar with the information in this handbook, and must acknowledge such by signing the following forms found in the Appendix after having reviewed the material:

- Student Acknowledgment of DPT Program Policies and Procedures (Appendix A)
- Student Release, Informed Consent and Waiver (Appendix B)
- Student Informed Consent Form (Appendix C)
- Health Insurance Statement (Appendix D)

WCU reserves the right to change any provision or requirement, including fees, contained in this informational document at any time with or without notice.

Please read this handbook carefully. Questions related to the content of this manual should be directed to Director of Clinical Education (DCE) or the Program Director:

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Welcome

Welcome to the Doctor of Physical Therapy (DPT) program and West Coast University (WCU). We are glad that you have chosen to pursue your education with us. Your selection into the program reflects our acknowledgement of your past achievements and confidence in your future potential. The academic and clinical demands of this program require high standards of performance from you. We also have a strong commitment to you, the student, to help you in your education and development as a professional in the field of physical therapy.

Please let any of your faculty know if you are having trouble in any course and need tutoring or other help. We also encourage you to help one another, studying cooperatively, rather than competitively, while taking responsibility for your own work, knowledge and skill development. We want you to succeed.

We invite you to set your goals high and become a valued part of the DPT program and the profession of physical therapy.

Description of the Profession of Physical Therapy

“Physical therapists provide services to patients/clients who have impairments, functional limitations, disabilities, or changes in physical function and health status resulting from injury, disease, or other causes; interact and practice in collaboration with a variety of professionals; address risk; provide prevention and promote health, wellness and fitness; consult, educate, engage in critical inquiry and administrate; and direct and supervise the physical therapy service, including support personnel.” ¹

“Physical therapists assume leadership roles in rehabilitation: in prevention health maintenance, and programs that promote health wellness and fitness; and in professional and community organizations.

The practice of physical therapy necessitates that the individual physical therapist engages in specific and complex cognitive, psychomotor and affective behaviors when providing services to patients/clients, families, or caregivers. Using their body of knowledge, physical therapists integrate five elements of care in a manner designed to maximize the patient’s outcome: examination, evaluation, diagnosis, prognosis and intervention.”

Physical therapists practice in a broad range of inpatient, outpatient and community based settings ² and treat age groups ranging from newborns to geriatric patients.

²
Program Mission

The mission of the Doctor of Physical Therapy program is “to provide a student-centered education that prepares graduates for caring, innovative, interdisciplinary, and evidence-based approaches to physical therapy patient-centered care.”

The DPT program strives to attract a dynamic and diverse faculty who possess a common desire to shape the physical therapists of tomorrow by modeling both clinical and teaching excellence. WCU recognizes that even with the best technology and curriculum, the heart and soul of the program is the student. Our program will cater to highly motivated students who wish to be active participants in their education.

In keeping with both the University and Program Missions, WCU graduates will be prepared to enter the physical therapy work force as skilled and ethical members of the healthcare community.

The DPT curriculum foundationally rests in the current literature on adult learning, including:

- Learning is enhanced in a learner-centered model of education, where students are actively involved in the teaching/learning process. This model of education recognizes multiple methods for effectively engaging students in their learning. Curricular methods include internet/online learning, lecture, skills laboratories, group discussions and inquiry, case-studies, student presentations, independent study, writing components, and clinical experience. Students are expected to increasingly accept personal responsibility for their success in achieving excellent educational outcomes.

- Practical application and clinical education occur at intervals throughout the curriculum, for a variety of practice environments. This sequencing of learning recognizes the importance of active and clinically relevant learning for the adult.

- Student learning is enhanced when the faculty model and encourage critical reflection. In discussions of clinical cases, the faculty actively considers interpretations, develop hypotheses, and present intervention strategies that are integrated into existing or new cognitive frameworks or schemes. A balance of open-mindedness and questioning is demonstrated using varied teaching strategies and patient management approaches.

- Course content builds on the student’s existing knowledge base, progressing from simple to complex conceptualization and advancing from concrete to abstract analysis.

- Program activities and curricular content are not focused solely on technical skills and knowledge, but also facilitate the development of the student as a professional. Student development of core values and skills is enhanced through appropriate faculty interaction and modeling of professional behaviors and attitudes.

- Assessment of student learning and preparation for clinical practice is an intentional and integrated component of student learning. Assessment methods attempt to facilitate understanding rather than rote memorization and include a variety of evaluation methods including ability-based assessment utilized to facilitate the use of knowledge and psychomotor skills.

References:

Arnold-Garza, S. The flipped classroom teaching model and its use for information literacy instruction. *Communications in Information Literacy* 8(1), 2014.

Goals and Expected Outcomes

Program goals flow out of the DPT program’s mission statement and the University’s core values. Student goals as they progress through the program include the following:

- All students will demonstrate academic excellence by meeting or exceeding the academic requirements of the Doctor of Physical Therapy Program.
- All students will engage in service by participating in a minimum of one community or professional volunteer event annually.
- All students will demonstrate professional engagement by joining the American Physical Therapy Association and participating in at least one State of California APTA event (e.g. G.L.A.D., CPTA Conference, Student Conclave, etc.)

The expected program learning outcomes flow from our mission statement, philosophical base, and programmatic goals. They reflect the practice management expectations found in the APTA Standards of Practice for Physical Therapy.

Graduates should be able to:

- Provide professional physical therapy services to diverse populations consistent with American Physical Therapy Association (APTA) standards.
- Perform autonomous entry-level skills in a safe manner.
- Facilitate culturally sensitive communication using consultative and collaborative skills as a part of the healthcare team.
- Design evidence-based physical therapy treatment plans using clinical reasoning for optimal patient-centered care.
- Exercise professional conduct that is consistent with the ethical and legal practice of physical therapy.

Professionalism

Students are expected to act in a professional and responsible manner at all times inside and outside of the learning environment. Professionalism in the DPT program is defined as:

“Physical therapists consistently demonstrate core values by aspiring to and wisely applying principles of altruism, excellence, caring, ethics, respect, communication and accountability, and by working together with other professionals to achieve optimal health and wellness in individuals and communities.”

Core Performance Standards

Students in the DPT program are likely to achieve success when they come prepared to participate fully in the educational process. This preparation includes and assumes that students enter the program with a minimum level of ability in specific areas, termed technical standards, and will continue to develop those and additional skills and attitudes, called the generic abilities. The generic abilities in particular will be assessed periodically throughout the program. Inability to meet any of the technical standards and generic abilities which are integral components of the core performance standards may result in the need for remediation, probation, suspension or dismissal from the program. The core performance standards are listed below.

Technical Standards for Admission, Promotion and Graduation

Physical therapy is an intellectually, physically, and psychologically demanding profession. Students acquire the foundation of knowledge, attitudes, skills and behaviors needed throughout the physical therapist’s career. Those abilities that physical therapists must possess to practice safely are reflected in the technical standards that follow.

For successful completion of degree requirements, students must be able to meet minimum technical standards with or without reasonable accommodation. Technical standards include the following:

Observation Skills

Observation requires the functional use of vision, hearing, somatic sensations, and the use of common sense. Students must have visual perception which includes depth and acuity. A student must be able to observe lectures, laboratory dissection of cadavers, and lecture and laboratory demonstrations. The student must be able to observe a patient accurately, observe digital and waveform readings and other graphic images to determine a patient’s condition. Students must be able to observe patients and be able to obtain an appropriate medical history directly from the patient or guardian. Examples in which these observational skills are required include: palpation of peripheral pulses, bony prominences and ligamentous structures; visual and tactile evaluation for areas of inflammation and visual and tactile assessment of the presence and degree of edema. A student must be able to observe a patient accurately at a distance and close at hand, noting nonverbal as well as verbal signals.

Communication Skills

Communication includes: speech, language, reading, writing, computer literacy and informatics. Students must be able to communicate effectively, sensitively, and convey a sense of compassion and empathy with patients to elicit information regarding mood and activities, as well as perceive nonverbal communications. Physical Therapy education presents exceptional challenges in the volume and breadth of required reading and the necessity to impart information to others. Students must be able to communicate quickly, effectively and efficiently in oral and written English with all members of the healthcare team. Students must be able to complete forms according to directions in a complete and timely fashion. Students are expected to demonstrate effective written skills.
Motor/Psychomotor Skills
Students must possess sufficient motor function to elicit information from the patient examination, by palpation, auscultation, tapping and other evaluation maneuvers. Students must be able to execute movements required to provide general and therapeutic care, such as positioning large or immobile patients, gait training using therapeutic aids and orthotics, positioning, and performing manual mobilization techniques, performing non-surgical wound debridement, and placing surface electrodes. Students must have the physical strength to perform cardiopulmonary resuscitation and emergency treatment to patients. These skills require coordination of both gross and fine muscular movement, equilibrium, and the integrated use of touch and vision.

Intellectual – Conceptual Integrative and Quantitative Analysis Abilities
To effectively solve problems, students must be able to measure, calculate, reason, analyze, integrate and synthesize information in a timely fashion. For example, the student must be able to synthesize knowledge and integrate the relevant aspects of a patient's history, physical examination, and laboratory data, provide a reasoned explanation for likely therapy, recalling and retaining information in an efficient and timely manner. The ability to incorporate new information from peers, teachers, and the medical literature in formulating treatment and plans is essential. In addition, students must be able to comprehend three dimensional relationships and to understand spatial relationships of structures. Candidates must have the ability to use computers for searching, recording, storing, and retrieving information.

Behavioral/Social Attributes and Professionalism
Students must possess the psychological ability required for the full utilization of their intellectual abilities, for the exercise of good judgment, for the prompt completion of all responsibilities inherent to diagnosis and care of patients, and for the development of mature, sensitive, and effective relationships with patients. Students must be able to tolerate physically and mentally taxing workloads and function effectively under stress. They must be able to adapt to a changing environment, display flexibility and learn to function in the face of uncertainties inherent in the clinical problems of patients. As a component of their education, students must demonstrate ethical behavior.

Specifically, students should be able to:

1. Attend and participate in classes for 30 or more hours per week during each academic semester. Classes consist of a combination of face to face and online lecture, discussion, laboratory, and clinical activities.

2. Use auditory, tactile, and visual senses to receive classroom instruction and to evaluate and treat patients.

3. Read, write, speak, and understand English at a level consistent with successful course completion and development of positive patient-therapist relationships.

4. Complete readings, assignments, and other activities outside of class hours.

5. Apply critical thinking processes to their work in the classroom and the clinic.

6. Exercise sound judgment in class and in the clinic.
7. Participate in clinical experiences which typically require students to be present 40 or more hours per week on a schedule that corresponds to the operating hours of the clinic.

8. Gather decision-making pieces of information during patient assessment activities in class or in the clinical setting without the use of an intermediary (classmate, aide, etc.).

9. Perform treatment activities in class or in the clinical setting by direct performance or by instruction and supervision of intermediaries.

10. Sit for two to 10 hours daily, stand for one to two hours daily, and walk or travel for two hours daily.

11. Frequently lift weights less than 10 pounds and occasionally lift weights between 10 and 100 pounds.

12. Occasionally carry up to 25 pounds while walking up to 50 feet.

13. Frequently exert 75 pounds of push/pull forces to objects up to 50 feet and occasionally exert 150 pounds of push/pull forces for this distance.


15. Occasionally squat, crawl, climb stools, reach above shoulder level, and kneel.

16. Frequently move from place to place and position to position and must do so at a speed that permits safe handling of classmates and patients.

17. Frequently stand and walk while providing support to a classmate simulating a disability or while supporting a patient with a disability.

18. Occasionally climb stairs and rarely negotiate uneven terrain.

19. Frequently use their hands repetitively with a simple grasp and frequently use a firm grasp and manual dexterity skills.

20. Frequently coordinate verbal and manual activities with gross motor activities.

**Generic Abilities**

The program expects DPT students to develop and demonstrate 10 generic abilities important to the practice of physical therapy. These are adopted from the work of Warren May, PT³, and colleagues, and Jette and Portney (2003).³ Generic abilities are behaviors, attributes, or characteristics that are not necessarily an explicit part of a profession’s core knowledge and technical skills, but nevertheless are required for success in that profession.

<table>
<thead>
<tr>
<th>Commitment to learning</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpersonal skills</td>
<td>The ability to interact effectively with patients, families, colleagues, other healthcare professionals and the community and to deal effectively with cultural and ethnic diversity issues.</td>
</tr>
<tr>
<td>Communication skills</td>
<td>The ability to communicate effectively (i.e., speaking, body language, reading, writing, listening) for varied audiences and purposes.</td>
</tr>
<tr>
<td>Effective use of time and resources</td>
<td>The ability to obtain the maximum benefit from a minimum investment of time and resources.</td>
</tr>
<tr>
<td>Use of constructive feedback</td>
<td>The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.</td>
</tr>
<tr>
<td>Problem solving</td>
<td>The ability to recognize and define problems, analyze data, develop and implement solutions and evaluate outcomes.</td>
</tr>
<tr>
<td>Professionalism</td>
<td>The ability to exhibit appropriate professional conduct and to represent the profession effectively.</td>
</tr>
<tr>
<td>Responsibility</td>
<td>The ability to fulfill commitments and to be accountable for actions and outcomes.</td>
</tr>
<tr>
<td>Critical thinking</td>
<td>The ability to question logically; to identify, generate and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions and hidden assumptions; and to distinguish the relevant from the irrelevant.</td>
</tr>
<tr>
<td>Stress management</td>
<td>The ability to identify sources of stress and to develop effective coping behaviors.</td>
</tr>
</tbody>
</table>


Academics

Academic standards specific to the Doctor of Physical Therapy Program are listed below. Refer to the University Catalog and Student Handbook for institutional standards and policies.

Academic Advisement

Academic advisement is an important part of the educational process in the DPT program. Once a student is enrolled, he/she will be assigned to a DPT faculty member who will serve as the student’s mentor. All new first year students are expected to meet with their academic advisor within the first eight weeks of the first semester they are enrolled and a minimum of once each semester throughout the program.

Curriculum

The course sequence flows from the mission and goals of the DPT program and is designed to facilitate the education of our students. The program is a traditional, campus-based program consisting of nine continuous semesters of classroom and clinical experiences. By design, the DPT program curriculum relies on a progressive clinical and academic model. The DPT program curriculum and clinical education component incorporate technological and clinical advances as well as contemporary educational theory. Student courses are not only traditional face-to-face and also are online web-enhanced courses.

Progression in the DPT Program

(Refer to the Academic Action Plan flow-charts in Appendix A)

Each course within the DPT curriculum uses the West Coast University grading scale located in the University catalog.

- Courses are graded with letter grades (A–F) with the exception of Physical Therapy Experiences & Clinical Internships, which are graded as Pass or No Pass.
- A minimum of a 3.0 cumulative GPA (cGPA) is required at all times in the DPT; failure to maintain a 3.0 cGPA will result in development of an Academic Action Plan (see next section).
- A minimum of a 3.0 term GPA (tGPA) is required at all times in the DPT; failure to obtain a 3.0 tGPA for any given semester will result in an Academic Action Plan (see next section).
- Students must earn a minimum grade of “C+” or a Pass in all DPT courses using the scale outlined in the Grading section of the University catalog and DPT Syllabi. Due to the didactic and clinical practice requirements for licensure, progression in the DPT program from one term to the next is imperative to student success and for patient safety; therefore, DPT students who do not earn a minimum grade of “C+” or a Pass in each DPT course in each term will be dismissed from the program.
- If a student receives a non-passing grade on any midterm examination or a student is receiving a failing grade in a course, it is suggested that student immediately meet with the course instructor, their faculty mentor and the Student Success Coordinator.
- Students should comply with technical standards; and appropriate performance in generic abilities.
- Students must complete 100% of all credits attempted each semester.
DPT Academic Action Plan (Related to Satisfactory Academic Progress)

- To return to good academic standing, the student must satisfy the dictates of the faculty and possess a cGPA of 3.0 or better.

- A student will be placed on Academic Action Plan if the cGPA falls below 3.0 at any point in the student’s academic progression.
  - The DPT student on academic action plan will have a maximum of two (2) consecutive semesters to restore the cGPA to a 3.0; failure to restore the cGPA to 3.0, following two consecutive semesters will result in dismissal from the program.
  - If a student’s tGPA (term GPA) falls below a 3.0, while on academic action plan, the student will be dismissed from the program.

- A student must achieve a minimum of cGPA 3.0 prior to entering any clinical experience. A student currently on probation because of cGPA or tGPA < 3.0 will be evaluated on a case by case basis in terms of eligibility to enter into a clinical experience. The DCE has the right to notify any clinical site of the academic status of a student on probation.

- A student will be placed on an academic action plan if a term GPA (tGPA) falls below 3.0.
  - Failure to achieve a tGPA on the next subsequent term will result in dismissal from the program.

- If a student fails any clinical, the student will be dismissed from the program.

- A student will be placed on an Academic Action Plan as a result of repetitive or serious professional behavior issues as defined by the expected student behaviors and generic abilities. This student is required to develop a successful strategy for professional growth.
  - Further professional behavior issues, while on an academic action plan will result in dismissal from the program.

- A student may only be placed on an Academic Action Plan one time during his/her academic progression. A second occurrence requiring academic action plan, for any reason, will result in dismissal.

Successful completion of the DPT Program will require satisfactory fulfillment of all program requirements, including clinical internships, a minimum cumulative GPA of 3.0, and adherence to the standards for professional conduct upheld by the Program, University, and the DPT profession.

At the completion of each academic term, the DPT faculty will review each student's performance to determine if academic and core performance standards are met to allow progression in the program or graduation. The student who meets all of his/her academic and core performance standards will progress and graduate.
Graduate Academic and Financial Aid Warning
The University has an academic and financial aid warning policy. Please see University Catalog for details.

Incomplete Work
The University has an incomplete work policy. Please refer to the University Catalog.

Academic Dismissal
The University has an academic dismissal policy. Please refer to the University catalog.

Continuation in the graduate program in physical therapy is dependent on the following:

1. Satisfactory progress in removing any conditions imposed at the time of admission.
2. Satisfactory progress in restoring the cGPA to 3.0 during a probationary period of two (2) semesters.
3. Satisfactory completion of all clinical affiliations.
4. Satisfactory progress in removing any conditions imposed on the student as a result of professional behavior issues.

A student will not be allowed to continue in the Doctor of Physical Therapy Program as a result of academic, clinical, or professional infractions. A student will be dismissed from the program if any of the following conditions exist:

1. The student receives a grade of C or below in any course.
2. If, at the discretion of the Faculty, student conduct or professional behaviors are deemed inappropriate, inadequate, compromising, or unsafe. This could include a breach of policies stated in this handbook or breach of a professional behavioral contract.
3. The student fails a PT Experience or Clinical Internship.
4. The student on academic probation is unable to raise his/her cumulative GPA to 3.0 or above after two (2) consecutive semesters.
5. The student, while on academic probation, receives a tGPA below 3.0.
6. A student may not be placed on academic probation more than one time in his/her academic progression; any conditions resulting in a second academic probation will result in dismissal.

The Physical Therapy program pledges to ensure due process to all students equitably, regardless of age, color, religion, national origin, race or gender, when carrying out the policies.

Any student dismissed from the DPT program for academic (clinical or didactic) or behavioral reasons has the right to appeal this decision with West Coast University. Please see University Catalog for more information related to the appeal process and policy.


Practical Exam Competency

For courses involving clinical skills labs, a student must achieve competency in each clinical skill specified by the instructor to pass the course. Laboratory practical examinations for each course have defined scoring and grading criteria. Students must demonstrate appropriate safety measures in the performance of critical elements correctly. On each practical examination all critical elements must be passed and a score of 80% or better achieved in order to successfully complete each laboratory examination and pass the course. If a student does not achieve the standard of competence (80%) or if a student fails any item related to safety (as identified on the practical grading form for the courses with specific lab components), the student fails the practical examination. In either case, the student will have an opportunity to remediate and re-take the practical exam once in order to demonstrate competence of the material. The original score earned by the student will be retained for final grade computation. The practical re-take policies are as follows:

- A student who fails a practical exam for a safety item, will not be informed at that time, but will be allowed to complete the practical examination and be graded on the other portions of the examination.
- When the student is informed that they have failed the practical exam, either for a safety item or for failure to achieve the standard of competence (80%), it is recommended that the student contact their faculty and determine a plan to remediate and re-take the exam with the course instructor.
- If the lab practical safety items are performed appropriately in the second examination, the student will earn no higher than the numerical score achieved on the first examination.
- If the practical examination safety items or minimum standard of competence (80%), are not achieved in the second practical examination the student will receive a “zero” for the practical examination and an “F” in the course and will be dismissed from the DPT program.
- All retakes of the exam with the course instructor must occur within one week of the end of the semester.

Students should review specific course syllabi for additional information on requirements pertaining to any given course.
**Competency Prior to DPT Clinical Education Participation**

All students must demonstrate readiness to engage in clinical education, based upon the criteria listed in the University Catalog and all applicable handbooks.

- Completion of all previous academic coursework with a minimum grade of C+ and cumulative GPA of 3.0 or higher. A student currently on an Academic Action Plan because of cGPA or tGPA < 3.0 will be evaluated on a case by case basis in terms of eligibility to enter into a clinical experience. The DCE has the right to notify any clinical site’s SCCE as to the academic status of a student on probation.

- Completion of all Laboratory Practical exam components with a minimum of 80% grading with no safety concerns.

- Satisfactory demonstration of generic abilities and technical standards with no concerns from Core faculty prior to clinical placement.

**APTA Code of Ethics**

It is also expected that DPT students and faculty will comply with the ethical standards of the profession. These are as follows:

**Preamble**

The Code of Ethics for the Physical Therapist (Code of Ethics; 2010) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice inpatient/client management, consultation, education, research, and administration.

2. Provide standards of behavior and performance that form the basis of professional accountability to the public.

3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.

4. Educate physical therapists, students, other healthcare professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.

5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.
The APTA Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the APTA Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

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

**PRINCIPLE 2:**
Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.
(Core Values: Altruism, Compassion, Professional Duty)

**PRINCIPLE 3:**
Physical therapists shall be accountable for making sound professional judgments.
(Core Values: Excellence, Integrity)

**PRINCIPLE 4:**
Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other healthcare providers, employers, payers, and the public.
(Core Value: Integrity)

**PRINCIPLE 5:**
Physical therapists shall fulfill their legal and professional obligations.
(Core Values: Professional Duty, Accountability)

**PRINCIPLE 6:**
Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.
(Core Value: Excellence)

**PRINCIPLE 7:**
Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society.
(Core Values: Integrity, Accountability)

**PRINCIPLE 8:**
Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally.
(Core Value: Social Responsibility)
Additional DPT Program Policies

Classroom Attendance
Class attendance, preparation, and participation are integral to a student’s academic success. It is the student’s responsibility to communicate with the instructor directly, in person or by phone or email, prior to the scheduled class if possible, if an absence from class, lecture or laboratory session occurs. The maximum percent of absences for the didactic and lab portion of courses is 10% and 0% for clinical experiences.

Drug Screening / Background Check
Many states require that individuals working in healthcare facilities must consent to and be cleared through a criminal background investigation and/or a drug screening. This may also be a policy of a corporate entity or individual facility depending on the practice setting. Usually state agencies conduct these investigations and oftentimes a list of problematic offenses is available. Many state professional licensing agencies require reporting of misdemeanor and felony charges.

All students in the WCU DPT program must undergo a criminal background check prior to admissions and may be required to undergo additional criminal background checks prior to clinical education experiences, depending on the individual facility policy. The criminal background check upon admission to the program will be at the student’s expense. All follow up background checks required by a clinical site will be covered by WCU. More than one may be required depending on the individual facility’s policies. Students should be aware that a history of criminal offenses will likely impact the ability of a student to participate in clinical education and/or obtain employment in the healthcare field. If a student is unable to complete clinical education, they will be dismissed from the program.

All students in the WCU DPT program are required to undergo drug screening prior to admissions and may be required to undergo additional drug screening prior to clinical education experiences, depending on individual facility policy. Drug screenings upon admission to the program will be at the student’s expense. All follow up drug screenings required by a clinical site will be covered by WCU. Should a student test positive for an illicit or illegal substance, the student would not be allowed to participate in clinical education and would be referred to the program director, DCE, and school administration for further action. Please see drug and alcohol policy in the University catalog for additional details.

Criminal background checks and drug screens are conducted per University policy.
Health Insurance

DPT program students are responsible for all of their own healthcare costs during their education at WCU. DPT program students are required to carry and maintain personal health insurance during their entire tenure at WCU to include coverage in any state they have a clinical experience in. Students are required to submit a health insurance statement and sign a waiver assuming all financial responsibility for any illness or medical bills that occur while enrolled (see Appendix D) and are responsible for updating this information regularly.

I understand that it is my responsibility to maintain current continuous medical (including hospitalization and emergency care) coverage while enrolled at the University due to contractual agreements between the West Coast University and all clinical education sites. It is my responsibility to obtain and maintain coverage for all states where I am a student, and the states in which I will be practicing in during my clinical education experiences.

In consideration of my clinical education participation sponsored by the University, I hereby assume all responsibility involved with providing medical insurance coverage and indemnify, release, and hold harmless from all liability, the West Coast University, its directors, officers, representatives, volunteers, participants, employees, students and all other person acting in any capacity on their behalf.

I understand heath care coverage is required so that I have access to necessary care should an incident occur on campus or in the clinical site that requires medical attention, as all healthcare costs are my responsibility. A copy of my health insurance card has been provided acknowledging my understanding and responsibilities regarding healthcare coverage.

Laboratory Policies and Procedures

The DPT laboratory facilities provide an environment suitable to demonstrate, learn, and practice physical therapy examination, evaluation, and treatment procedures and techniques in a setting that simulates a clinical patient care setting. As such, it is expected that students will maintain the laboratory and display professional behaviors. In addition, the department will assure that all equipment, electrical or otherwise, are annually serviced, calibrated, and assured to be of safe working order for student instructional purposes. The DPT office maintains a record of all annual calibration and safety checks for all pertinent lab equipment.

Lab Participation Policy

In general, personal healthcare practitioners are expected to be skilled and to give us the best care possible. Your patients and clients will expect the same of you. Take advantage of every opportunity to practice and develop the skills you will need to become a valuable healthcare professional.

It is both necessary and customary that physical therapy students participate as both a healthcare professional and as a subject or patient simulator. Common laboratory activities may include observation, and palpation (touching) of various parts of the body, exercise, application of various physical agents and manual techniques. It is anticipated that every student will work with all genders. Details of the clinical activities that you will be asked to participate in may be obtained from course instructors and course syllabi. It is the student’s responsibility to become familiar with the clinical procedures and laboratory activities for each course and to resolve any concerns you may have about those procedures with your instructor. Any concerns regarding this should be discussed with the instructor, student advisor, director of student affairs, and/or program director. Prior to participation in lab activities, all students must sign and return the following forms found in the Appendix of this handbook.
Personal Health Requirements for Lab Participation

All physical therapist students should maintain proper hygiene and good health habits, as well as good grooming and personal cleanliness.

Students must sign, date and turn in to your course faculty instructor the Health Insurance Statement found in the Appendix D. Students with special personal health needs or Americans with Disabilities Act concerns please refer to the University Catalog and Student Handbook for more information.

Dress and Grooming Standards for Lab Participation

Laboratory dress standards vary between courses and the student will be instructed accordingly in individual course syllabi. In general, clean, shorts, t-shirts, tank tops, sports bras, and tennis shoes are commonly required for lab sessions. The use of university approved logo apparel is expected. Dress should be modest; however, students must be able to expose areas for observation and palpation applicable to the specific laboratory experience.

Loose fitting gym clothes with appropriate undergarments are required for all students. One set of laboratory attire should be available on campus at all times.
General Lab Policies
WCU is dedicated to providing you with a clean, professional and safe laboratory experience. All faculty, staff and students must work together to maintain our laboratories. Students should review and comply with the following rules:

1. No food or drink is allowed in any lab at any time.
2. Maintain a professional attitude and conduct as expected in the clinic at all times.
3. Cell phones are not allowed to be turned on in labs and classroom. Phones distract others and may interfere with electronic equipment. If you have an emergency, please notify the instructor.
4. Store your personal items in a safe place such as in a locker while in lab.
5. All waste materials must be promptly placed in an appropriate waste receptacle.
6. Abide by and maintain safety precautions at all times.
7. The laboratory will be open during all scheduled course laboratory periods.
8. Properly clean and store all equipment after each session.
9. Students will be allowed to use any modality or electrical equipment after review of correct use in class by a faculty member.
10. The laboratory will only be used for the study or practice of DPT procedures. Other activities in the laboratory such as meetings, general study or unrelated classes must be approved by the program director.
11. DPT students are permitted to use all clinical skills labs outside of scheduled class times during normal campus operating hours.
12. It is the program’s expectation that the lab will be maintained in a safe, clean, and orderly manner. Out of respect and as a professional responsibility to all who use the labs, everyone must:
   - Replace equipment in its proper location;
   - Fold and put away linens and pillows; and
   - Put refuse in receptacles available.
   - Wipe down all mat surfaces, clean chairs and all equipment used during the session.

Guests in WCU Laboratories
Outside guests can be a valuable resource to the learning experience in our lab classes, both as guest lecturers and as volunteer subjects. However, no guests are allowed without the specific consent and supervision of your instructor. Guests who are to participate in clinical activities must be referred to the program director or faculty member prior to participating. Additional information on the University’s Visitors on Campus policy can be found in the Student University Handbook located on the WCU website.
Use of Human Subjects and Informed Consent

Individuals who serve as demonstration or practice subjects for any component of the DPT program will acknowledge their voluntary participation after being briefed regarding the contraindications, risks and benefits of the physical therapy procedure to be performed. Written informed consent will be obtained from any person, student, or patient volunteer who participates in a demonstration or practice session on the University campus. Informed consent will be obtained from patients/clients in the clinical setting appropriate to facility policy. All patients have the risk-free right to not participate in clinical education.

Use of Chemicals and Lab Substances

Liquids and substances used in laboratory exercises must be used with caution, safely stored and properly marked. Each chemical or substance in the lab has a Material Safety Data Sheet (MSDS) on file at a location identified by your instructor. MSDS’s provide specific information pertaining to each hazardous chemical. Students should familiarize themselves with the properties, precautions and risks of these substances.

Universal precaution standards are to be followed at all times, including the use of gloves when appropriate.*Please comply with the following:

- Follow all directions for use of substances exactly as prescribed.
- Be aware of all precautions and contraindications for use before opening any container.
- Tightly close all containers immediately after use.
- Return substances to their properly labeled storage location after each use.
- Inform the instructor of supplies that need replenishing.

Note: A small number of people develop an allergic reaction to latex gloves. You may read about latex sensitivity in the MSDS file in the lab. If you suspect latex sensitivity, inform your instructor.

Licensure

It is the goal of the DPT program to assist students in every way to help prepare them to practice as physical therapists. Licensure is not required for student clinical education experiences. However, following graduation, licensure of physical therapists is required by every U.S. jurisdiction. Complete information on practice acts and regulations may be obtained from the individual state licensing boards. Candidates should contact the licensing organization in the state of choice to determine work requirements. Graduates of the DPT program will be encouraged to take state and nationally recognized licensing examinations as soon after graduation as possible. Further information regarding the national physical therapy examination (NPTE) can be obtained at [www.fsbpt.com](http://www.fsbpt.com).

Providing Safe Patient Care

Students are to notify the Program Director/Dean or Director of Clinical Education immediately if there is a change to their health status that requires any special attention or medications. At no time is a student to be providing direct patient care while under the influence of any medications, legal or illegal, that can impair the student’s ability to provide safe patient care. At times, a student may be need to take medications that impair his/her ability to think clearly, cause tremors or other symptoms that may interfere with a student’s reasoning or ability to perform with appropriate judgment and safety; medical clearance may be required to return to school.
Student Pregnancy Policy

Students are strongly encouraged to carefully evaluate the strenuous physical and mental demands and the strict attendance requirements of the physical therapy program when considering pregnancy. Although the program adheres strictly to OSHA and CDC guidelines for patient care, the student must consult their physician regarding their possible exposure to physical and chemical agents while attending the program.

Students must obtain, in writing, their physician's comments and recommendations for the continuation in the program. The document must address whether the student may participate fully in all the scheduled learning activities for each semester.

Following post-delivery, students must again obtain and submit to the Program Director/Dean a physician's written orders that the student may return to the program to fully participate in all learning activities.

Mandated Reporting

Physical therapists play an important role in the identification of suspected abuse and neglect and in some states, including California, have an obligation to report it to the authorities. Mandatory reporting requires that physical therapists be cognizant of the reporting regulations in the state(s) in which they practice and the mechanisms available for reporting suspected abuse in those states.

There are four basic types of abuse: physical, sexual, emotional, or neglect. Physical Therapists, as Mandated Reporters, are required to:

- Recognize signs and symptoms of abuse/neglect.
- Ask direct, non-judgmental questions with compassion.
- Document all findings.
- Assess patient safety.
- Review, refer, and report to appropriate authorities.
- All students are required to report any suspicion of abuse and/or neglect to their clinical faculty. Faculty will take the appropriate steps to refer or report to the appropriate authorities.

Professional Organization Membership

All DPT students are required to become members of the American Physical Therapy Association (APTA). The APTA is the national organization dedicated to serving the physical therapy profession. By becoming a member, students gain access to a large number of benefits and professional opportunities. One significant benefit is access to the Physical Therapy Journal (which will be needed for many course assignments) and online access to research resources with many full text articles which may not be available through the University databases. The student will gain automatic membership in the Student Assembly which functions as a forum for future Physical Therapists and Physical Therapist Assistants. The National Student Conclave also provides the student with access to the latest trends and issues in the profession. Membership applications and information will be given to each student at the beginning of the DPT program. Information may also be found at www.APTA.org.

Students are also encouraged to become active in the California State Chapter of the APTA. The chapter typically sponsors conferences, and offers other opportunities for professional service, networking, skill development and promotion of the profession. This is a very useful way for students to become more acquainted with the physical therapy profession, visit: www.ccapta.org.
Clinical Education Manual

Introduction

This manual provides guidelines for the Clinical Education component of the Doctor of Physical Therapy curriculum at West Coast University. This Handbook serves as a reference for the University’s faculty, the Clinical Education Team, Site Coordinators of Clinical Education (SCCEs), Clinical Instructors (CIs), and students at the development of their clinical learning experiences and the evaluation of their clinical performance. Additional information to include rights, responsibilities, and risk management (orientation of clinical faculty and students, confidentiality of student records, communication requirements, and Clinical Education policies and procedures) is provided throughout. This handbook is reviewed annually by the DPT Program’s Clinical Education Team, who seeks approval for revisions from the University’s Administration and Curriculum Committee as needed.

If clarification is needed, please contact one of the members of the Clinical Education Team:

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Welcome Letter to Clinical Partners

Dear Clinical Partner,

The West Coast University Doctor of Physical Therapy (DPT) Program is proud to partner with selected clinical centers across the US in providing quality clinical education experiences for our students. Our DPT Program is part of the West Coast University (WCU) Center for Graduate Studies (CGS) and is located at WCU's CGS Campus. The Physical Therapy Program at West Coast University is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE):

3030 Potomac Ave., Suite 100
Alexandria, VA, 22305-3085
703-706-3245
accreditation@apta.org
www.capteonline.org

West Coast University is accredited by WASC Senior College of University Commission (WSCUC), a regional accreditation body recognized by the U.S. Department of Education (USDOE) and the Council on Higher Education Accreditation (CHEA):

1001 Marina Village Parkway, Suite 402
Alameda, CA 94501
510-748-9001
www.wscuc.org

We appreciate your willingness to supervise our students while evaluating their clinical performance, and welcome feedback regarding our Clinical Education Department and DPT curriculum. Without your assistance and support, we would not be able to provide students with enriching clinical experiences to meet the requirements for graduation.

The privilege of teaching future physical therapy professionals is both a rewarding and challenging endeavor. Our Clinical Education Department and DPT program will provide you with all of the information and assistance you may need during our students’ clinical experiences. We are available and prepared to ensure that each learning experience is positive and mutually beneficial for you, your patients, the student, the clinic, and the University.

The information found in this handbook and on the WCU DPT Program website will answer most of your questions. If at any time a student is not achieving the anticipated objectives, or you have any concerns regarding their performance, please contact us immediately. We will provide support to best facilitate a resolution of any potential problems or barriers to our students’ successful performance.

With your willingness to provide these essential learning experiences, the WCU DPT Program can reach our goal to graduate caring, competent, culturally sensitive, and exceptional physical therapists.

Thank you for your participation during this important phase of our students’ education.

The WCU DPT Clinical Education Department
Welcome Letter to WCU DPT Students

Dear Student,

This Clinical Education manual is a supplement to the West Coast University (WCU) and the Doctor of Physical Therapy (DPT) Program Student Handbooks, and serves to govern the actions of students, clinical instructors, and other parties involved in clinical education. The facility of our clinical partners is an extension of the WCU DPT campus during clinical experiences, and therefore, students are subject to all the policies and procedures contained in the current WCU and DPT Student Handbooks.

Students are invited guests of each clinical facility and representatives of West Coast University and the physical therapy profession. Therefore, discretion and professional behavior are required at all times throughout your clinical experiences. Professional conduct includes, but is not limited to, punctuality, reliability, dependability, attendance, appropriate dress, respectful and polite interaction with others, and remaining free from the influence of drugs and alcohol.

During this learning opportunity, students should demonstrate adult learning attributes including active learning, intellectual curiosity and initiative, participation in clinical discussions and activities, and integration of constructive feedback into practice. Ultimately the successful completion of a clinical experience is the responsibility of the individual student. The core values of our professional association should be used as a guide to the expectations for students and physical therapists alike.

APTA Core Values

- **Accountability** is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist including self-regulation and other behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.
- **Altruism** is the primary regard for or devotion to the interest of patients/clients, thus assuming the fiduciary responsibility of placing the needs of the patient/client ahead of the physical therapist’s self-interest.
- **Compassion/Caring:** Compassion is the desire to identify with or sense something of another’s experience; a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.
- **Excellence** is physical therapy practice that consistently uses current knowledge and theory while understanding personal limits, integrates judgment and the patient/client perspective, embraces advancement, challenges mediocrity, and works toward development of new knowledge.
- **Integrity** is steadfast adherence to high ethical principles or professional standards; truthfulness, fairness, doing what you say you will do, and “speaking forth” about why you do what you do.
- **Professional Duty** is the commitment to meeting one’s obligations to provide effective physical therapy services to patients/clients, to serve the profession, and to positively influence the health of society.
- **Social Responsibility** is the promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.
Clinical Education Terminology

**Advanced Beginner Performance**
A student who requires clinical supervision 75%–90% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions. At this level, the student demonstrates consistency in developing proficiency with simple tasks (eg. Medical chart review, goniometry, muscle testing, and simple interventions), but is unable to perform skilled examinations, interventions, and clinical reasoning skills. The student may begin to share a case load with the clinical instructor.

**Advanced Intermediate Performance**
A student who requires clinical supervision less than 25% of the time managing new patients or patients with complex conditions and is independent managing patients with simple conditions. At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning. The student is capable of maintaining 50% of a full-time physical therapist’s caseload.

**Beginning Performance**
A student who requires close clinical supervision 100% of the time managing patients with constant monitoring and feedback, even with patients with simple conditions. As this level, performance is inconsistent and clinical reasoning is performed in an inefficient manner. Performance reflects little or no experience. The student does not carry a caseload.

**Clinical Education**
A formal supervised experiential learning focused on development and application of patient/client-centered skills and professional behaviors. It is designed so that students gain substantial, relevant clinical experience and skills, engage in contemporary practice, and demonstrate competence before beginning independent practice.

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

**Clinical Education Site**
A health service delivery agency or other setting in which clinical education experiences are provided for physical therapist students. The clinical education site may be, but is not limited to, a hospital, agency, clinic, office, school, or home and is affiliated with the educational program(s) through a contractual agreement.

**Clinical Education Facility (CEF)**
An accredited or approved healthcare facility that provides physical therapy students with learning experiences and patient access for the development of professional competencies.
Clinical Experience
Experiences that allow students to apply and attain professional knowledge, skills, and behaviors within a variety of environments. Experiences include those of short and long duration (e.g., part-time, full-time), provide a variety of learning opportunities, and include physical therapy services for patients/clients across the lifespan and practice settings.
While the emphasis is on the development of patient/client physical therapy skills, experiences may also include inter-professional experiences and non-patient/client service delivery such as research, teaching, supervision, and administration. Clinical education experiences are a part of the professional curriculum and include formal student assessment.

Clinical Instructor (CI)
The physical therapist employed by the clinical education facility who is designated by the SCCE to supervise and evaluate the performance of physical therapy students.

Clinical Performance Instrument (CPI)
The on-line evaluation tool developed by the APTA. It is completed by the student and the CI at mid-point and final week of the full time clinical experiences. The CPI is the primary grading tool of the clinical education program.

Clinical Site Information Form (CSIF)
An American Physical Therapy Association (APTA) document which is completed by the SCCE providing information about such things as patient service areas, number of beds, background of staff members, etc. as well as pertinent student information such as availability of housing, work hours etc.

Direct Supervision
The physical therapist is physically present and immediately available for direction and supervision. The physical therapist will have direct contact with the patient/client during each visit that is defined in the Guide to Physical Therapist Practice as all encounters with a patient/client in a 24-hour period. Telecommunications does not meet the requirement of direct supervision.

Director of Clinical Education (DCE)
The physical therapy faculty members who develop, organize, supervise, coordinate and evaluate the clinical education component of the physical therapy curriculum. The academic faculty member is responsible for planning, directing and evaluating the clinical education program for the academic institution, including facilitating clinical site and clinical faculty development.

Entry-Level Performance
A student who is capable of functioning without guidance or clinical supervision managing patients with simple or complex conditions. At this level, the student is consistently proficient and skilled in simple and complex tasks for skilled examinations, interventions, and clinical reasoning. The student consults with others and resolves unfamiliar or ambiguous situations, and is capable of maintaining 100% of a full-time physical therapist’s caseload in a cost-effective manner.
Full-Time Clinical Experience
A clinical education experience in which a student is engaged for a minimum of 35 hours per week. Full-time clinical education experiences designated to achieve the minimum number of weeks set forth by CAPTE and are directed by a physical therapist clinical instructor. An integrated clinical education experience may be a full-time clinical education experience.

Intermediate Performance
A student who requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions. At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning. The is capable of maintain 50% of a full-time physical therapist’s caseload.

Physical Therapist Student Evaluation: Clinical Experience and Clinical Instruction (PTSE)
An APTA document completed by the student at the completion of each full-time clinical experience. This provides valuable feedback to the academic program and future students about the quality of their clinical education experience.

Site Coordinator of Clinical Education (SCCE)
The physical therapist employed and designated by the clinical education site to organize, direct, supervise, coordinate, and evaluate the clinical education program in that facility.

Terminal Full-time Clinical Experience
A single, or set of, full-time clinical education experience(s) designated to achieve the minimum number of weeks set forth by CAPTE that occurs after the student has completed the didactic curriculum of a physical therapist professional education program. Students may return to the academic program for didactic instruction that does not require additional clinical education experiences. The expected outcome of the final, or terminal experience is entry-level performance.
**Philosophy of Clinical Education**

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

Clinical education experiences are designed to provide students with opportunities for professional role modeling, for observation, for patient care and teaching in a wide variety of settings. Clinical experiences are planned to coincide with coursework and the students’ level of experience. As students’ progress through the clinical education program they will be expected to manage increasingly complex patients with an increased level of independence. Students completing the physical therapy program will be expected to practice at the entry-level.

**Competency Prior to DPT Clinical Education Participation**

All students must demonstrate readiness to engage in clinical education, based upon the criteria listed in the University Catalog and all applicable handbooks.

- Completion of all previous academic coursework with a minimum grade of C+, and cumulative GPA of 3.0 or higher. A student currently on an Academic Action Plan because of cGPA or tGPA < 3.0 will be evaluated on a case-by-case basis in terms of eligibility to enter into a clinical experience. The DCE has the right to notify any clinical site’s SCCE as to the academic status of a student on probation.
- Completion of all Laboratory Practical exam components with a minimum of 80% grading with no safety concerns.
- Satisfactory demonstration of generic abilities and technical standards with no concerns from Core faculty prior to clinical placement.

**APTA Clinical Instructor Credentialing**

This voluntary program is designed primarily for people interested in or involved with clinical education (clinical instructors, site coordinators of clinical education, academic coordinators of clinical education) and is recognized by APTA as a Clinical Instructor (CI) Education and Credentialing Program.

The program addresses issues of:

- Planning and preparing for physical therapy students during their clinical education experiences
- Developing learning experiences
- Supporting ongoing learning through questioning and effective feedback
- Developing skills of performance evaluation
- Identifying and managing students with exceptional situations
- Identifying legal implications for clinical educators, including issues presented by ADA legislation

The APTA offers both Basic and Advanced credentialing courses. Though it is not a requirement of our Clinical Partners to be Credentialled Clinical Instructors, the faculty of the WCU DPT Program feel strongly in favor of this valuable training and recommends it highly. Additionally, in the state of California, clinical instructors may not receive CEU credit unless they have obtained the CI Credentialing certification.

For more information and dates of upcoming courses please visit the APTA website at: [www.apta.org/search?q=clinical+instructor+credentialing](http://www.apta.org/search?q=clinical+instructor+credentialing)
Clinical Education Curriculum

The overall curriculum has been designed so that the student has a variety of Physical Therapy Clinical Education Experiences. These will include experiences across the lifespan and for various practice settings. The Policies and Procedures of the academic program related to the Physical Therapy Clinical Education Experiences are available to the SCCE/CI upon request and are outlined in this document. Related program goals and expected outcomes will be communicated with the student and SCCE/CI for each experience. A course syllabus and objectives for the experience are provided to the SCCE/CI and student. The syllabus will be sent to the SCCE/CI with the confirmation of the student placement.

Clinical experiences consist of four full-time experiences totaling 48 weeks. Students must practice under the direct supervision of a licensed physical therapist within a variety of settings with patients experiencing a range of conditions throughout the lifespan. These clinical education courses are designed to provide learning opportunities in diverse patient care settings with progressing complexity in clinical reasoning and critical thinking throughout. The goal of clinical experiences is to ensure that students are prepared to pass the NPTE licensure exam and enter into clinical practice as entry level clinicians.

Possible Practice Settings

- Skilled Nursing Facilities
- Transitional Care Hospital (TCH)/Long-Term Acute Care Hospital (LTACH)
- In-Patient Hospital/Critical Care Units
- Inpatient Acute Rehab Units (ARU)
- Outpatient clinics
- Private practice
- School settings
- Research settings
- Pediatrics (inpatient or outpatient)
- Government models (VA, military, county or state-run facilities)
- Home Health
- Outpatient Occupational Health
**Patient Lifespan**

- Children
- Adolescents
- Adults
- Geriatrics

The Commission on Accreditation in Physical Therapy Education (CAPTE), our accrediting agency, requires us to demonstrate that each student has practiced in a variety of settings. Therefore, each student will be required to participate in a minimum of three different clinical education experiences that allow for progression in their knowledge and performance and the opportunity to collaborate with other members of the interdisciplinary team.

Students must have at least 1 outpatient ortho rotation, at least 1 acute or post-acute rotation, and at least 1 rotation in a setting that is different from the Outpatient Ortho and the acute or post-acute rotation the student has experienced.

**Affiliation Agreements/Contracts**

A signed copy of the duly executed active affiliation agreement/contract must be on file in the clinical education department prior to student involvement in patient contact. The DCE will initiate the original agreement and the renewal process prior to the contract’s expiration.

**Certificate of Insurance/Medical Malpractice Insurance**

WCU maintains a medical malpractice plan. A copy of this policy is furnished with initial contracts and each subsequent clinical experience.

All students are provided protection by West Coast University against general and professional liability claims. A certificate of this protection is submitted to each utilized clinical site on an annual basis, or more frequently if requested by the site. Should a clinical site require additional evidence of insurance on an individual student, it is the responsibility of the student to provide that information.
**Site Recruitment**

WCU invites facilities to become a clinical education site when they meet the standards and needs of both the University and its students. All communications and relationships between the site and the academic program is formalized through the clinical experience affiliation agreement. Students will only be placed in sites that have a duly executed affiliation agreement in place with the DPT Program. Any and all communication with clinical education sites must be coordinated through the Clinical Education Departments.

Under no circumstances should the students, their friends or family, initiate contact with an existing or proposed clinical education site before the Clinical Education Department makes the official assignment. Any violations of this policy will be forwarded to the Judicial Committee. If a student desires to select a site that does not have an agreement with WCU, the student will meet, discuss and coordinate this possibility with the DCE first.

The following criteria are most important to WCU in establishing an affiliation agreement with a clinical education site:

- Clinical instructors (CI) must have at least one year of clinical practice experience
- The therapy services at the clinical education site provide an active and encouraging environment that is conducive to staff and student interaction and promotes the learning requirements of the students
- The CI has release time to work with the student on an individual and regular basis
- The clinical education site offers a variety of learning experiences available to students
- The therapy staff practice within the ethical and legal scope of their professions
- The CI and the SCCE have created appropriate and realistic learning objectives and experiences to reflect the learning outcomes set forth by the academic program
- Students are given a reasonable length of time to work with their assigned patients, have quality, direct supervision at all times by an appropriately credentialed professional and are not considered to be supplemental staff
- The clinical education site is willing to complete all forms and reports appropriately and in a timely manner
- The clinical education site is committed to the principle of Equal Opportunity and Affirmative Action as required by federal legislation

The annual March Mailer is forwarded to all of our clinical education sites on March 1st of each year, and indicates the academic program’s clinical education schedule for the following year. The University invites the clinical education sites to complete and return the form specifying the time periods they are able to offer.

The Clinical Education team will meet with students frequently to discuss the selection process to include student input on site preferences, and the accreditation and academic policies that guide selections. The Clinical Education Team makes the final decision regarding clinical selections and student placements.
Health Policy and Medical Requirements

Health records must be submitted to the clinical education department upon University registration per the academic admissions policies. These documents are required for the University to remain in compliance with all clinical education sites. Additionally, these documents must not expire during the students’ clinical education experience otherwise the student may not be able to begin their rotation or may be asked to leave the facility, leading to an increased possibility of not passing the clinical rotation, and a delay in graduation.

The completion, timely submission, and associated costs with all documents are the responsibility of the student. A copy of each is required in the clinical education department on or before the first day on campus and all forms must be in compliance 45 days prior to the start of each clinical experience.

Clinical education sites may also request additional documentation prior to participating in a clinical experience at their facility and it is the student’s responsibility to comply with the requesting sites’ policies. Records may not be released to any third party by the clinical education department unless the student has signed the “Consent for Release of Information” within the WCU DPT Student Handbook.

Required health information includes the following:

- Physical/Health examination forms (annually)
- Personal health insurance forms with copy of front and back of insurance card (annually)
- Influenza vaccine (annually)
- Two-step PPD (TB)/QuantiFERON blood test OR chest x-ray if previously positive for PPD (annually)*
- Proof of immunity to Measles, Mumps, Rubella to include vaccine records and titer within last 5 years**
- Proof of immunity to Varicella to include vaccine records and titer within last 5 years**
- Proof of immunity to Hepatitis B to include vaccine records and titer within last 5 years**
- Proof of immunity for Tetanus and Diphtheria (Tdap) with vaccine within last 10 years
- A copy of the student’s current Fire Safety, and American Heart Association (AHA) BLS (CPR & AED) and First Aid certifications (Will be completed during PT 719)
- A copy of certificate of completion for training in Blood Borne Pathogens, HIV-AIDS and Universal Precautions, and HIPAA (provided in coursework, as part of the curriculum)

* A positive TB test may result in the need for further x-ray follow-up for clearance or being unable to attend certain clinical sites pending facility policies
** Negative titers may result in the students need for further immunization or being unable to attend certain clinical sites pending facility policies

Note: A facility has the right to refuse any student who has not completed the required medical documents or who is not able to submit proof of current immunity.

The student should understand there are certain potential risks associated with working in a healthcare environment. Patients may potentially transmit diseases or infections to health professionals. These infections may include those of viral, bacterial, or parasitic nature such as HIV/AIDS, Hepatitis A, B, or C, rubella, measles, mumps, influenza, varicella, herpes, tuberculosis, salmonella, pertussis, respiratory tract infections, Staphylococcus infections, scabies, or any other infections. The student should practice the principles of Universal Precautions and Blood Borne Pathogen and follow clinic safety procedures to minimize this risk.
DPT students may be injured from violent or unpredictable patients. There is the risk of injury from transferring or lifting patients. DPT students may be exposed to hazardous chemicals. A small percentage of the population has allergies to latex. DPT students should be aware of the risk of exposure to hazardous radiation from ultrasound, diathermy, or ultraviolet equipment. Students should follow clinic procedures, use precautions when using modalities, and perform an equipment check prior to use.

Students who are pregnant should consult with clinical faculty and the DCE concerning any potential hazards from physical tasks and clinically related infections previously mentioned. The DPT student may be exposed to psychological stresses when working with patients who are disabled or ill in the clinical environment. DPT students are encouraged to maintain open and honest communication with their SCCE/CI and the DCE to discuss any concerns. The DPT student should understand when certain critical situations should be reported and addressed immediately and without delay, in order to minimize further injury or risk.

**Criminal Background Checks and Drug Screen reports**

A criminal background check and drug screen report must be completed by the student prior to the admissions department deadline upon enrollment to the program. Failure to submit these required documents will prevent students from being considered for clinical education placements. All associated costs for additional background checks and drug screens requested by a clinical facility are covered by WCU.

Clinical education sites will only receive verification of completion and attestation to the absence of disqualifying offenses. Students have an ongoing obligation to report any criminal arrests or convictions to the Director of Clinical Education within 30 days of its occurrence.

A facility will likely request an updated background check and/or drug screen test prior to offering a clinical experience placement.

**Medical Insurance During Rotation**

It is the student’s responsibility to maintain current continuous medical (including hospitalization and emergency care) coverage while enrolled in the University. It is the student’s responsibility to obtain and maintain coverage for all states where they are a student, and all states in which they will be practicing in during their clinical education experiences. Students are responsible for all costs associated with maintaining this coverage.

**Emergency Medical Care**

Each student is responsible for any and all expenses that result from emergency care required during their clinical experiences when not participating in the clinical experience itself. Should a student suffer from an accident or injury while participating in their clinical education experience, appropriate emergency action should be taken and the DCE is to be notified.

Students should alert the SCCE and CI of any potential medical problems and action that may be needed due to an existing condition. Students will be required to fill out the West Coast University Student Incident Report, and will also be required to follow any policies the facility has in place. Students must follow all policies and procedures as outlined on the West Coast University Student Incident Report.

Policies and Procedures concerning exposure to communicable illness or blood-borne pathogens must be in place in every clinical facility. Should an injury or exposure occur, students should know the policy and procedure in each assigned clinical facility and comply with all requirements. In the event of an exposure to blood or other potentially infectious bodily fluids, the student should immediately notify the SCCE and DCE.
COVID-19 Vaccination Policy

COVID-19 is a highly transmissible respiratory illness that the World Health Organization (WHO) has declared a pandemic. It causes symptoms ranging from mild to severe and can lead to life-threatening illness, hospitalization, and death. COVID-19 vaccines have been carefully evaluated in clinical trials and authorized by the Food and Drug Administration (FDA) for emergency use. These vaccines make it substantially less likely an individual will contract COVID-19 and become seriously ill or die, and they protect not only the individuals vaccinated, but also others in the community, particularly those who are at increased risk for severe illness from COVID-19.

Due to the pandemic, many clinical partners displaced student clinical rotations, preventing students from receiving direct patient clinical education. As the pandemic wanes and clinical partners invite WCU students back for this essential part of their education, it is imperative that students are prepared to step into any clinical facility with whom we partner. As has always been the case, our students need to meet our clinical partner’s rules and regulations which includes adhering to their requirements for immunizations.

Not surprisingly, many sites are now requiring any student in attendance to be fully vaccinated against COVID-19.

While WCU does not require students to have received a COVID-19 vaccination, and while our institutional perspective is that obtaining the vaccination remains a personal choice, this is not the case for a growing number of our clinical partners.

As such, WCU students enrolled in programs involving clinical, lab, practicum, experiential, or fieldwork experiences are required to complete health and safety requirements in alignment with individual program and clinical partner expectations, including getting vaccinated against COVID-19 if that is what is required by the clinical partner.

This policy language is in alignment with the clinical partner requirements policy shared with and acknowledged by students during the admission process:

A student’s failure to comply with clinical packet requirements may result in the inability to enroll in or removal from required courses or programs, potentially resulting in delay in/inability to successfully achieve degree completion and/or additional financial cost of degree completion. The university and its associates do not have an obligation to guarantee the availability of clinical rotations of students who do not meet university or clinical partner requirements according to the established timelines, processes, and policies.

While WCU will make every effort to locate a clinical site for students that are unwilling to get vaccinated, the University cannot guarantee site placement.

In addition to providing evidence of previously required immunizations, the University must also provide proof that students are fully vaccinated, to those clinical partners who require COVID-19 vaccination before participating in clinical rotations at their facilities.
Incident Reporting
All students must report all occurrences or incidents that occur during a clinical experience, regardless of whether or not someone is harmed or property is damaged. The following procedure should be followed:

1. The student must immediately notify the CI of the incident.
2. The student must immediately notify their DCE of the incident.
3. The student will submit the WCU CGS Student Incident Report to the DCE
4. The student will promptly comply with any and all requirements of the WCU University Administration and facility regarding the incident.

Travel and Living Expenses
Students should anticipate traveling outside of the immediate area of their campus, and potentially out of the state for some of their full-time clinical experiences. All expenses associated with completion of the clinical experiences are the responsibility of the student, including but not limited to transportation, relocation, and housing expenses. In some instances, the SCCE or CI may be able to assist the student in locating housing. However, students are expected to plan for and be able to meet all financial obligations while out on their clinical experiences.

Employment
During all full-time clinical experiences, students should not plan to hold outside employment. Doing so may critically impact a student’s chance of success in the clinic. Employment is not considered a hardship by the Clinical Education Department and no effort will be made to try and place a student in a location that would allow the student to work.

Clinical Education Site Information
The Clinical Education Department collects and stores information regarding clinical education sites for student review. This information includes the following:

- Clinical Site Information Form (CSIF): Provides information regarding the clinical facility, the staff members, available training programs, patient/client population, dress code, housing, typical work schedule, along with parking, transportation, meals, and housing if available.
- Physical Therapist Student Evaluation (PTSE): Assessment completed by the students who were previously placed at the facility regarding the clinical experience and the clinical instruction they received.
- Miscellaneous: Additional information such as maps, brochures, pamphlets, community events, tourist information, etc. may be provided by some sites.
Placement Process

The Director of Clinical Education (DCE) makes all final decisions concerning student placement in selection of each clinical experience site with WCU DPT. Clinical experiences are an integral part of the curriculum and may require that a student temporarily relocate. Students may, and most likely will, have to leave the local area, or the state, for some or all of their clinical experiences. Students are responsible for the cost of the travel and other related expenses.

The goal of clinical education is to provide students with hands on opportunities to apply the practical application of their acquired skills. This is an integral component of a student’s education and an opportunity to practice the skills acquired in the didactic curriculum. Students should refer to their course in Blackboard, along with any additional software utilized by the Clinical Education Department, for all required forms.

Students will be allowed to participate in their clinical placement selection process. The Clinical Education Department with meet with each cohort several times prior to their clinical experiences to review the placement process, including all required documents and due dates, and allow for student involvement.

Students will be given an opportunity to research potential clinical facilities and review the Clinical Site Information Form (CSIF) and the Physical Therapy Student Evaluations when available. The students will complete a Student Preference Form, which provides information regarding the students’ clinical interests and previous experiences.

Faculty will determine the students’ readiness for the clinical experience through continual team and faculty conferences, students’ performance in the didactic portion of the curriculum and in previous clinical experiences, while also adhering to specific clinical site requirements such as GPA, interviews, previous experiences etc.

In making the clinical assignments, the DCE will take into consideration each clinical site’s specialties and patient population, student preferences and academic performance, and any prior clinical placements when applicable to ensure a well-rounded clinical experience.

Every effort will be made to assign the student to one of their preferred choices or settings. However, final decisions depend on ensuring that each student receives the best possible clinical experience to ensure they receive the required breadth and depth of experiences. The placement will be made in consideration of the students’ needs, goals, and accreditation requirements. If possible, the student will be given one of their choices, settings, or locations. In the case this is not possible, or the DCE deems that the student would excel in another setting, then another placement will be given at the discretion of the DCE.

The Clinical Education Department will notify the student and facility in a timely fashion regarding clinical placement. Once the site is determined, the student and Site Coordinator of Clinical Education (SCCE) and/or Clinical Instructor (CI) will be notified of the student placement by email and/or letter and/or phone. The SCCE will confirm that the clinical placement slot is still available and the Clinical Education Department will provide them with the student’s information.

Prior to the start of the clinical experience, the student will complete the paperwork needed to comply with and adhere to all of the requested documentation and preparation for participation in the experience. In addition to the WCU DPT program requirements, each facility has different requirements, so if the student is unclear, then it is the responsibility of the student to determine which requirements are needed for the clinical experience by contacting the SCCE/CI directly. The student will then begin the process of contacting the SCCE/CI at each facility to complete the necessary requirements 8 weeks prior to arrival at the site once instructed by the Clinical Education Department.
Students should not select a site where they have had previous employment, or where they currently have family employed. If the student is inadvertently assigned to a site where they have had previous employment, it is the student’s responsibility to notify the DCE immediately.

Students will also have the opportunity to submit a **Hardship Request Form** or a **New Site Request Form**.

Student clinical and facility files will be maintained by the Clinical Education Department and accessible only to faculty and administrative staff as deemed necessary. Confidentiality of records will be maintained.

### Hardship Request

A Hardship may be granted for students experiencing difficulties beyond what is inherent in a clinical experience assignment and may request consideration to be placed closer to a specific area. A Hardship will not be approved for financial considerations, a desire to maintain employment during clinical experience, or a long commute to the site.

A Hardship may be approved for the following reasons:

- Child under the age of 1 during clinical experience
- You or spouse are active military deployed out of area
- You are the sole provider for a family member
- Extenuating medical and health considerations on a case by case basis

Students must provide supporting documentation for the Hardship request. If approved, the student will be placed within 40 miles, or approximately a 1.5-hour drive during peak hours, from their place of residence, and will relinquish their ability to select a specific facility or setting type.

### New Site Request

A New Site Request is an opportunity for students to request clinical placement at a site where the University does not currently have a contract. New Site Requests will not be approved based on location alone, and priority will not be given for an OP Ortho location. The student must provide appropriate rationale for the reason of the request, and can only submit one during their time at WCU.

Priority will be given to the following requests:

- Inpatient
- Home health
- Outpatient Specialties
  - Pediatric
  - Neurologic
  - Cardiopulmonary
  - Pelvic Health

Communication between the clinical education site and the University is encouraged to discuss the student’s performance and progress, to develop learning objectives, to handle conflict resolution, and to receive support and to discuss and questions or concerns on behalf of the clinical education site.
A member of the Clinical Education Team or faculty representative may visit clinical education facilities during and in between student clinical experiences, with appropriate notice and planning with the clinic and Clinical Education Team.

**Site Changes/Cancellations**

The DPT program reserve the rights to change a student’s clinical education experience assignment at any time. Each clinical education experience is arranged in agreement with the clinical facility based on a student’s needs. These facilities have entered into a voluntary agreement with WCU.

Due to the continual transformations in healthcare, availability of clinical supervisors, and patient census, students may be relocated to a different facility at any time. Additionally, a clinical site may cancel a clinical education offer after a student has been confirmed or placed. In this case, a student will be notified by the University within 48 hours. The DCE will work with the Clinical Education Department to reassign the student based on the needs of the student. The DCE will attempt to keep the student in close proximity to the original assignment, although the student may be required to travel for reassignment based on availability of the clinical education sites.

The DCE will notify the student of the new site at the earliest possible time so that the student can initiate communication with the facility and complete the necessary paperwork. The student is responsible for financial support, transportation, and housing at their new location.

Students are not allowed to cancel their clinical education experience for any reason.

**Change in Clinical Instructor**

The student will immediately notify the DCE as soon as he or she is notified of a CI’s planned or unexpected extended absence, along with the plan for temporary or permanent substitution of the CI. Notification should occur via email or phone call during work hours and include contact information for the substitute CI. The DCE is responsible for any follow-up with the new CI and/or SCCE. In the event of a short, temporary absence (for example a ½ day off) of an assigned Clinical Instructor, the CI or his/her designee will identify a qualified substitute CI to supervise the student, or pre-arrange for another educational activity pertinent to the student’s learning goals. It is the student’s responsibility to inform the DCE of the CI’s absence and the alternative learning experiences that occurred. The DCE is responsible for any follow-up with the student, CI, or SCCE, particularly if a pattern of these substitutions emerges.

At no time will the student provide patient care without having a qualified, licensed CI clearly identified as his or her CI and physically present to directly supervise the student.
Reassignment of Clinical Sites
Students are allowed to request reassignment during their clinical education experience due to the following circumstances:

- Unethical or illegal practices are occurring
- The CI lacks the required credentials or experience to function as a mentor
- The patient case load, or variety of patient diagnoses/experiences, is inadequate according to the University requirements

Communication to the DCE regarding a request for reassignment should be initiated by the student as soon as a problem is identified. The DCE will handle all requests for reassignment on an individual basis. If a reassignment is approved and deemed necessary by the DCE, the DCE will work in collaboration with the student and Clinical Education Department in locating another appropriate clinical education site.

Student requests for leave or reassignment for any other personal or professional reason will be handled on an individual basis.

The clinical education site reserves the right to request a student be removed from the site. These requests will be handled by the University, DPT Program, and DCE on an individual basis. The student may be reassigned at the discretion of the DCE based upon the nature of the site’s request.

All efforts will be made by the University to maintain the clinical experience via student, CI, and SCCE advising and education.
Clinical Education Experience Assessment

We recognize that self-assessment is a key component in fostering a self-directed plan for professional development and lifelong learning. As students are introduced to the process of self-assessment early on in the curriculum, they are expected to develop the ability to reflect upon their performance/behaviors and to develop strategies to improve performance. They are provided with opportunities for ongoing assessment and feedback throughout the curriculum. In addition, they work with their advisors to develop individualized goals and development plans. Self-assessment will continue throughout the clinical curriculum with the CPI and weekly planning sheets among other tools.

Students are expected to complete weekly planning forms to help structure their learning experiences. If the site does not utilize its own form, the WCU Weekly Planning Form should be utilized. Students will be expected to complete a self-assessment at both the midterm and final using the online CPI. At the end of each clinical placement they will also complete the Physical Therapy Student Evaluation (PTSE) of the clinical site and submit a reflection paper on their experience.

All clinical experience courses are Pass/No Pass. Students should refer to the individual course syllabus for additional information regarding the requirements needed to receive a “Pass” in each course. The Clinical Education Faculty will work closely with the clinical site, the student, the program faculty, the Program Director, the faculty advisor, and the Director of Student Services when determining whether a student will receive a “Pass” or “No Pass”.

Failure to submit all required documentation or assignment(s) by the required deadline may result in the cancellation or delay of the clinical, early termination of the clinical, issuance of an incomplete or failing grade for the clinical experience, or potential delay of graduation.

All required documentation and certifications should be completed and submitted prior to the start of the clinical experience. Formal evaluations of the student by the clinical instructor in consultation with the DCE should occur at midterm and at/near the end of each clinical experience. Identified deficits in student performance occurring during these assessments may result in the addition of student assignments, the extension of clinical practice hours, and/or the establishment of additional goals/expectations for student performance.

The DCE utilizes the clinical instructor’s comments, documentation, and grading/scoring information related to the student’s performance to objectively assign the Pass/No Pass grade as appropriate.

Performance is evaluated throughout the clinical experiences and is formally assessed at midterm and during the final week of the course using the APTA PT CPI Web®. The APTA PT CPI Web® requires the student to be an active participant in the evaluation process through self-assessment. Marks on the APTA PT CPI Web® and written comments by both the CI and student are considered when determining a Pass/No Pass grade for clinical experiences.

All Students, SCCEs and CIs are required to take a 2 hour, APTA tutorial online prior to the use of the Web CPI. Training is free and a link to the APTA site can be found in the CI Welcome Packet provided to the site during each student’s first week of rotation. Once the tutorial has been completed for any PT program, it does not have to be repeated.

Additionally, more frequent informal feedback is considered an essential part of the learning process and may be communicated verbally or in writing during the clinical education course. This may include weekly planning sheets, anecdotal records, incident reports or in-service evaluations. Failure to comply with course syllabi and policies within the University Catalog, Student and DPT Handbooks may be grounds for failure of the clinical education course and dismissal from the program.
If there are areas identified for improvement, the DCE in concert with the Dean/Program Director, faculty, SCCE/CIs, and students will take appropriate and reasonable actions to correct any deficiencies identified. These actions may include items that reflect the overall goals and mission of the program and curriculum so to best serve the needs of all parties concerned.

At the conclusion of the clinical experience, grading decisions made by the DCE, may also consider the:

- Complexity of the clinical setting
- Experiences with patients or clients in that setting
- Relative weighting or importance of each performance criterion
- Expectations for the clinical experience
- Progression of performance from midterm to final evaluations
- Level of experience and performance within the didactic and clinical components

**Pass/No Pass**

A grade of “P” (Pass) in a Clinical Experience will be awarded when:

1. Student’s performance meets minimum level acceptable performance for the current level of education.
2. No concerns are articulated in red flag areas of the CPI.
3. Documented progression of performance from midterm to final.
4. Any areas of significant concerns identified during the clinical experience course need to meet course expectations by the final assessment (which may be met by successful completion of an Action Plan).
5. SCCE/CIs comments on the criteria match the rating scale mark.
6. All required paperwork has been submitted to the Clinical Education Department by the deadline previously determined for each clinical.

A grade of “NP” (No Pass) will be given when:

1. Student performance is below minimum level of acceptable performance.
2. The students grade for online assignments is below 76%.
3. The student demonstrates unprofessional or unsafe behaviors.
4. SCCE/CI comments with examples support low performance quality.
5. SCCE/CI comments articulate deficient performance regardless of the marking.
6. The student has not met criteria established in an action plan.
7. The site documents safety concerns regarding patient care.
8. The site asks the student to terminate the placement before the expected end date of the course due to performance deficits.
9. The student fails to submit all required paperwork to the Clinical Education Department by the deadline previously determined for each clinical.
The SCCE, CI, and/or student should contact the DCE as soon as it is apparent that the student is not performing at a satisfactory level to achieve course objectives. It is not recommended to wait until midterm to discuss issues involving student performance. A plan for addressing concerns will be developed by the CI in collaboration with the DCE and/or SCCE within 24 hours. Students are expected to take primary responsibility for the management and resolution of identified performance concerns through this established plan.

If student issues with performance cannot be resolved satisfactorily, and the student does not meet the requirements for successful completion of an experience course, the student will fail the experience and will receive an “NP” grade for the clinical education course. The student will be referred to the Program Director and may be dismissed from the DPT program.

The student may be allowed, if deemed eligible by the Program Director and DCE, to engage in additional learning experiences, including retaking a portion of or the entire clinical experience. Any student who is permitted a retake an experience may also be required to complete additional learning experiences as part of a remediation plan prior to starting the retake. The plan to retake any part of the Clinical Experience Course is at the discretion of the DCE and subject to the availability of clinical sites and CI’s. This will result in a grade of “Incomplete” and may delay the student’s graduation and possibly delay sitting for the licensure exam.

**Incomplete**

A grade of an incomplete will be handled on a case-by-case basis. Students who receive an “Incomplete” during their clinical experience will not be allowed to progress in the program until the grade is remediated to a “Pass”. A grade of “Incomplete” may or may not prevent a student from continuing onto the next experience.

If extension of the experience is deemed appropriate by the DCE, the extension may occur at the same facility or another facility with a similar patient population and setting based on clinic and clinical instructor availability. Length of the extension will be determined by the DCE based on input from the CI. Placement dates for this extension will begin and end based on availability of the experience site and may result in a delay in graduation.

If an “Incomplete” grade is received, a specific documented plan for passing will be established by the DCE and communicated with the student. Once these requirements have been fulfilled, the DCE will submit the grade change to the University to award the passing grade. If these requirements are not fulfilled, it will result in a not passing grade and the policy on not passing a course will apply.

Some reasons why a student may receive an “Incomplete”:

- The need for reassignment to another facility.
- Late submission of clinical experience documentation (CPI assessments, Weekly Planning Forms, end of the term evaluation forms etc.).
- Inability to meet clinical experience performance standards without additional time spent in the clinic. Student may receive an “Incomplete” at the end of the scheduled experience and remain in the clinic for an additional set amount of time in attempts to receive a grade of a “Pass”.
- A remediation plan is deemed appropriate by the Clinical Education Faculty and Program Director after the clinical experience. This may be done to provide the student with additional learning opportunities needed to meet the clinical experience performance standards.
The Clinical Education Faculty will work closely with the clinical site, the student, the program faculty, the Program Director, the student faculty advisor, and the Director of Student Services when creating and implementing an appropriate and individualized remediation plan.

Students will either receive a “Pass” or “No Pass” after any remediation or grade of “Incomplete”.

**Leave of Absence (LOA)**

Students may request and be granted a leave of absence (LOA) from a minimum of one term up to a maximum one year. If a student does not return from a LOA within the specified timeframe and no prior arrangements have been made to extend, then the individual will be withdrawn from the university.

Student should refer to the “Withdrawal and Refund Policy” and the “Return of Title IV Funds Policy” in the University catalog for a full explanation of the financial consequences of Withdrawal or Leave of Absence. Students should contact the Director of Student Services, Registrar, and the Director of Financial Services to discuss options regarding a LOA. A “Leave of Absence Request Form” must be completed, signed, and submitted to the Student Services Department.

If a student begins a LOA after the Add/Drop deadline or before the completion of the course, the student will be considered withdrawn from the course for satisfactory academic progress purposes. The course from which the student took leave will be regarded as attempted but not completed.

If a student takes a LOA during their clinical education experiences, a return from LOA will be handled on a case by case basis based on when in the curriculum the leave was taken, and when the student intends to return.

**Removal from Clinical Learning Experience**

A clinical experience may also be terminated prior to the scheduled date of completion at the request of the clinical site, CI, SCCE, or the DCE. Grounds for termination may include a student’s engaging in unethical, illegal or unprofessional behavior. The DCE, SCCE or CI may immediately remove any student who commits any act or omission endangering the life, health, or well-being, or violates any established rights or reasonable expectation of confidentiality of a patient or other person while on a clinical learning experience.

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

Early termination is most often associated with a student’s inability to demonstrate that sufficient learning is taking place during the clinical experience, or inability to perform in a safe and effective manner.

Students are expected to adhere to the APTA Code of Ethics, Guide for Professional Conduct and Standards of Practice, and to consistently behave in a professional manner. Early termination may result in a failing grade.

Depending on the nature of the situation, the student may also be referred to the Student Conduct Committee.
Clinical Education Experience Policies

In-service Requirement
All students are required to complete an in-service presentation or project during each clinical education experience. It is expected that students work collaboratively with their CI’s and other clinical staff members to develop the in-service presentation or project topic that is of benefit to the clinical site and student. All in-services must utilize best practices through evidence-based research. Topics may include, but are not limited to: treatment techniques, surgical techniques, differing diseases, diagnoses or impairments, staff training on the implementation and use of functional tools, and the development of patient handouts to be utilized by the facility. It is expected that the in-service presentation or project will provide an opportunity for student and clinical staff learning.

Students and CIs should brainstorm potential topic ideas during first half of the clinical experience. The student will present the selected topic to the Clinical Education Faculty near the mid-term of their clinical experience. The final product of the in-service project (PowerPoint, handout, etc.) along with evaluations from CI must be submitted by the end of day on the last day of the experience in order to avoid a grade of “incomplete” for the course.

Attendance Policy
Students must be prepared to be at the clinic during the times and days agreed upon with the clinical instructor for a minimum of 40 hours/week on average. Students must complete the Absence Approval form if they must miss any time in the clinic. To do so, they must obtain signatures from the CI and DCE. In the event of sudden illness or need for absence with short notice, the DCE, CI, and SCCE must still be notified. Students are allowed a total of 3 approved absences throughout all 4 clinical rotations combined, which do not need to be made up. Absences that do not need to be made up will be approved for the following:

- Illness (need medical note if >2 days)
- Illness or death of close family member or close friend
- Attendance at a PT/medical conference (if notified 2 months in advance)
- Student’s personal wedding (if notified 2 months in advance)
- Birth of a child (if notified 2 months in advance)

Any absences that are not approved by the clinical site or DCE will need to be made up. Any approved absences over 3 days throughout all 4 clinical experiences will also need to be made up.

Dress Code and Appearance
Students are expected to dress in a professional manner while on clinical affiliations. The student will adhere to the dress code of each facility. It is the student’s responsibility to determine the dress code of the facility prior to the first day of their clinical experience and to abide by this for the entire experience. West Coast University name tags are required at all times. Additionally, many facilities will require the student to obtain a facility name badge. Lab coats may also be required. Socks or hosiery are required in addition to slip resistant, professionally appropriate closed-toed shoes. Students may be required to wear ties. In certain settings, students will be required to wear a watch with a second hand or carry a stop watch. Cell phones will not be considered appropriate timing devices and are prohibited during patient care unless authorized by the clinical site.
Unless specifically directed to the contrary, jeans, shorts, T-shirts (collarless shirts) and open-toed or high heeled shoes are unacceptable. If the student is in doubt, the student should contact the SCCE prior to the affiliation to confirm the requirements.

Students are expected to be neatly groomed at all times. Hair must be worn in a fashion that does not interfere with patient care. Facial hair must be short and well maintained. Fingernails must be short and neat; artificial nails are not acceptable. Jewelry which might interfere with the safety or effectiveness of patient treatments is prohibited. Piercing(s) must be removed. Tattoos must be covered at all times. Students are asked to refrain from the use of colognes or scented cosmetics, as patients may be sensitive to fragrances. In addition, no gum chewing is allowed. Eating is allowed in designated facility areas only (no eating or food is allowed when providing patient care). Drinking water in containers with lids is allowed as per facility approval. Specific sites may have additional dress code/grooming requirements that students must adhere to throughout the duration of their clinical experiences.

Please note the “appropriateness” of student grooming and attire is determined by the SCCE and/or CI at each clinical facility. If the student does not meet the dress requirements of the clinical facility, then the SCCE and/or CI may ask the student to leave and return with the appropriate attire; this missed time must be made up.

Confidentiality Policy
All parties involved in clinical education must maintain the confidentiality of all information that is of a sensitive or personal nature. This policy minimally applies to patient information, student information, CI information, and clinical site information. The following excerpt from the APTA Guide for Professional Conduct is emphasized:

1. Information relating to the physical therapist-patient relationship is confidential and may not be communicated to a third party not involved in the patient’s care without the prior written consent of the patient, subject to applicable law.

2. Information derived from component-sponsored peer review shall be held confidential by the reviewer unless written permission to release the information is obtained from the physical therapist that was reviewed.

3. Information derived from working relationships of physical therapists shall be held confidential by all parties.

4. Information may be disclosed to appropriate authorities when it is necessary to protect the welfare of an individual or the community. Such disclosure shall be in accordance with applicable law.

Social Media
Students, CI’s, and SCCE’s should refrain from putting information about the clinical education experience, patients, or individuals on any form of social media including, but not limited to, Facebook, Twitter, Snapchat, and Instagram. Doing so could result in violation of HIPPA or FERPA.
Use of Cell Phone

Cell phone use and other personal technology devices are prohibited during working hours during your clinical experience including calls, texts, picture and video, and/or other telecommunication now known or developed in the future unless previously approved by the SCCE/CI or in case of emergency. At any point in time during the program, students are prohibited from sharing any information about a patient or patient case. Failure to comply with this policy may result in early termination of clinical rotation, probationary status from the DPT program, or program dismissal.

Patient/Client Refusal

The SCCE/CI will explain to patients/clients that the student is in a Doctor of Physical Therapy (DPT) professional program of study. The patients/clients at a facility have a choice to refuse to participate in the examination and/or treatment by the student and in the student’s experience. The patients/clients may select to change their mind to participate at a later date or not to participate if the experience is not what was expected. No reason needs to be given. The decision, either way, will not affect the care of the patients/client.

Physical Therapy Student Evaluations of the Clinical Experience (PTSE)

Feedback about the clinical education experience will be completed by both the student and SCCE/CI. The student will submit their evaluation of the clinical site and SCCE/CI to the DCE by end of day on the last day of the experience. Once reviewed, these evaluations will be available for other students to view while researching available sites.

The effectiveness of communication will be evaluated both during and after completion of the clinical education experience. If there are areas identified for improvement, the DCE in concert with the SCCE/CIs, and students will take appropriate and reasonable actions to correct any deficiencies identified. These actions may include items that reflect the overall goals and mission of the program and curriculum so to best serve the needs of all parties concerned.

ADA Accommodations in the Clinic

Students with disabilities requesting reasonable accommodation will be referred to the University ADA coordinator. Per the WCU handbook, each student should discuss his or her needs with the disability service representative before the start of classes. Please refer to the WCU handbook for additional information.

Students who have been approved for reasonable accommodations during their clinical experiences must meet with the DCE within one week of receiving their clinical assignment(s) or sooner. Students must also provide written consent for the DCE to discuss the approved accommodations and their potential implications during their clinical experience with the SCCE of the clinical site prior to the student’s arrival. The requests and final placement confirmations are subject to the approval of the SCCE at the assigned clinical site. Clinical sites have the right to refuse clinical placement for a student requesting approved accommodation, or informal requests for accommodations.

If a student has a disability that may impact clinical performance and their success throughout a clinical course, it is strongly encouraged that the student also discloses any pertinent information to the SCCE and/or CI at the assigned clinical site, in order to make accommodations that may maximize a student’s chances for success in the clinical course. The DCE, WCU DPT Program Director, and the student’s Academic Advisor can assist students to prepare for such conversations.

If a student chooses to not disclose a disability prior to the clinical course, that student waives the right to appeal any course decisions on the grounds of disability after the fact.
Rights and Privileges of Clinical Faculty

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

Responsibilities of the Site Coordinator of Clinical Education (SCCE)

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

Responsibilities of Clinical Instructor (CI)

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

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

Responsibilities include but are not limited to the following:

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

Appendix A  Academic Action Flow Charts
Appendix B  Catalog and Handbook Acknowledgement
Appendix C  Student Informed Consent
Appendix D  Health Insurance Statement
Appendix E  Consent for Release of Information
Appendix F  Multimedia Consent/Release Form
Appendix G  Guest Participant Informed Consent
Appendix H  Authorization for Electronic Use of Signature
APPENDIX A:

Academic Action Flow Charts Exams And Assessments

Difficulty on a Single Exam (Grade Below C)

Student Receives a Letter from the Program

Meet with Course Faculty Member

In Addition, Meet with Faculty Mentor and Student Success Coordinator to Develop a Plan of Action to Improve Potential for Success
Term Grade Point Average (GPA)

Term GPA Below 3.0

Student is Placed on an Academic Action Plan

Student Must Meet with Faculty Mentor and Student Success Coordinator to Develop a Plan of Action to Improve Potential for Success

Failure to Achieve the Required Term GPA on the Immediate Subsequent Term will Result in Dismissal from the Program
Cumulative (GPA)

Cumulative GPA Falls Below 3.0

Student is Placed on an Academic Action Plan

Student Must Meet with Faculty Mentor and Student Success Coordinator to Develop a Plan of Action to Improve Potential for Success

Failure to Restore the Cumulative GPA to Greater Than 3.0 Within Two Consecutive Trimesters will Result in Dismissal from the Program
Course Or Clinical Education Experience

Failure of a Course or Clinical Education Experience

Student is Dismissed from the Program

Student May Appeal for Continuation in the Program
APPENDIX B

DPT Program

Catalog and Handbook Acknowledgement

By signing below, I, ________________________________, agree that I have received, read, and understand all information contained in the West Coast University Catalog, the West Coast University Student Handbook, the DPT Student Handbook and the Clinical Education Manual. I also agree that I will adhere to and abide by the policies and regulations contained therein, which include, but are not limited to, the Academic Honor Code. I am aware of the consequences of violations of specific policies and standards, including plagiarism and dishonesty.

Student Signature: ________________________________ Date ____________________

Student Printed Name ________________________________ Year Admitted ______

University Representative: ________________________________ Date ________________
APPENDIX C

DPT Program

Student Informed Consent Form

Initial next to each line to indicate your understanding and acceptance of these terms:

_____ I understand that laboratory sessions are a required element in my education at WCU and that this informed consent form applies to my participation in all laboratory sessions.

_____ I understand that it is my responsibility to inform the instructor if I have medical concerns that may interfere with my participation in any laboratory exercise, and that it is my responsibility to consult with my physician if there are questions pertaining to my full participation in laboratory sessions.

_____ I acknowledge that I am participating voluntarily, and that it is my responsibility to learn of indications, contraindications and precautions in advance of allowing any clinical technique or procedure to be performed on me.

_____ To the best of my knowledge, I am safe to perform the assigned procedures and have the procedures performed on me by fellow students and instructors. I confirm that I have disclosed all pertinent information to West Coast University and can safely participate in the laboratory sessions.

_____ I release my fellow students, instructors, WCU and its representatives and employees from all claims and liability arising out of, or relating in any way to, my participation in laboratory sessions, whether I may be acting as student, subject, clinician, or otherwise.

_____ I also understand that WCU instructors will help me understand the indications, contraindications, precautions, and techniques of all procedures in which I will be asked to participate, either as clinician or subject.

Student Name (please print): ________________________________________________

Student Signature: _________________________________________________________ Date ________________
APPENDIX D

DPT Program

Health Insurance Statement

The practice of physical therapy may have certain occupational risks. Students are required to carry their own health insurance and sign a waiver assuming all financial responsibility for medical expenses incurred while enrolled in WCU DPT Program.

Please read the following information and initial next to each line to indicate your understanding and acceptance of these terms:

_______ I have read the health insurance statement above. I am presently insured and will maintain coverage for all stated where I am a student, and the states in which I will be practicing in during my clinical education experiences.

_______ I declare to the best of my knowledge that I do not have and/or have not been exposed to any serious communicable diseases.

_______ I understand that I assume all liability for any injury caused while performing laboratory or technical skills.

_______ I understand that the performance of these procedures is required in order to graduate from this program.

_______ I understand that any information discussed with the Program Director/Dean may be discussed with appropriate personnel including other faculty and administrators on an as needed basis.

Student Name (please print): _______________________________________________________

Student Signature: ___________________________________________ Date _____________

Name of Health Insurance Company: ________________________________________________

Health Insurance Phone #: __________________________________________________________

Health Insurance Policy #: __________________________________________________________

University Representative Signature: ____________________________ Date ________________
APPENDIX E

DPT Program

Consent for Release of Information

As a student/graduate of WCU, there will be occasions when WCU is requested to provide information concerning your academic and clinical education performance to third parties, including, but not limited to employers, licensing boards, or personnel from clinical facilities. Additionally, I allow for WCU to release my health, medical, background check, and drug screening information to clinical facilities where I may participate in my clinical experiences upon their request.

The purpose of this form is to provide consent for the release of all such information.

Please initial below which information may be released and to whom:

- [ ] Health, medical, background check, and drug screening information
- [ ] Grades
- [ ] Class participation
- [ ] Clinical education performance information
- [ ] Current and/or permanent address to prospective employers
- [ ] All of the above
- [ ] Other (specify): 

- [ ] Do not release any information about me

Student/Graduate Name (please print): __________________________

Student Signature: __________________________ Date ________________
APPENDIX F

DPT Program

Multimedia Consent/Release Form

I do hereby consent to be photographed and/or videotaped, and have my voice and image recorded or otherwise by students, staff, or faculty of WCU.

I understand that these recordings will be utilized for educational purposes only and as such will not be made available for public viewing.

This authorization extends from __________ to __________ (Indefinitely, if not otherwise)

Name (please print): ___________________________________________________________

Student Signature: ________________________________ Date _______________
APPENDIX G

DPT Program

Guest Participant Informed Consent Form

I willingly volunteer to participate as a clinical subject in one or more class or laboratory sessions at WCU and agree to the following:

I may be asked questions pertaining to the details of my health and healthcare.

I may be asked to expose an area of my body for inspection by students and faculty but may expect my dignity and modesty to be protected.

I may refuse to participate in any way I feel necessary.

I understand that this is a student educational laboratory and that the quality of care I receive may be less than that received from a graduate professional.

I waive any claims against WCU, its representatives, employees, and students arising from my participation, excluding such claims as may be the result of gross negligence or willful misconduct.

I understand that I will not be compensated for my participation.

Name (please print): ____________________________________________________________

Student Signature: ___________________________ Date ______________
APPENDIX H

DPT Program Authorization for Electronic Use of Signature

Notice Regarding E-Mail Communications

In order for WCU to operate as a distance learning institution, the use of electronic communication is an integral part of our design and structure. To that end, we have developed an e-mail network and avenues for inquiries and response through this e-mail network. It is our intention to provide you with excellent service, and for our communications and responses to you to be expeditious, while adhering to legal requirements.

In order for that to be possible, we need your acknowledgment of your e-mail address, i.e. electronic mail signature (digital signature), as a valid and binding signature on your part for the transmission of electronic communication by you. It is particularly important that you understand the necessary confidentiality of your e-mail log in and password. Share it with NO ONE. Should you suspect or become aware of another person gaining access to your e-mail password or login ID, change it, and notify us of your new e-mail signature immediately. Please be advised that WCU assumes no liability for the event or the consequences of another party gaining access to your e-mail account, and electronically “impersonating” you.

Should you choose not to return this form, we will not be able to respond to requests for information, or updates to information that are received via e-mail. Regardless of the effects upon you caused by delays or other unforeseen consequences, WCU assumes no liability, and will not respond to e-mail requests or updates without your signed “Authorization for Use of Electronic Signature” on file. WCU assumes no liability for late or misdirected mail.

I hereby authorize WCU to accept all correspondence transmitted by me via electronic mail from the e-mail address submitted herein, as a valid electronic message from me and I agree that until my e-mail address is changed, all communications sent from this address shall be upon my signature, acceptable as a replacement for my written signature, including but not limited to financial transactions. I understand that I am responsible to notify the WCU in the event that my valid digital signature changes, by mailing an updated signed “Authorization for Use of Electronic Signature” form to WCU.

I understand that I am not guaranteed confidentiality of information that is transmitted electronically (by e-mail or by FAX), by WCU, others, or myself. In the event that I request, either by valid electronic signature or in writing, that confidential information be transmitted, I release WCU from all liability related to the release of the requested confidential information. WCU will do its utmost to insure total confidentiality of all communication between you and the university.

By signing below, I release WCU from any liability for consequences pertaining to this request.

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<th>Last</th>
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<td>Secondary E-mail address (digital signature)</td>
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Date of Birth (MO/DAY/YR) | Signature | Date

By signing this Authorization for Use of Electronic Signature, all other previous submissions of this form received by WCU become invalid.