



Metropolitan
Community College
Penn Valley

Physical Therapist Assistant

Physical Therapist Assistant Program
Student Handbook
Classes Beginning Fall 2023 and Spring 2024



Accredited by:



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Welcome and Congratulations

On behalf of the Physical Therapist Assistant Program faculty, I would like to congratulate you on your acceptance to the PTA program. The program faculty encourages excellence and feels a personal commitment to your level of performance.

The program is academically challenging and rewarding. Expectations for the program are that you:

1. Devote considerable effort and time in learning the material because the patients you will be treating deserve the very best that you have to offer every day.
2. Develop professional qualities that make you an effective member of the health care team such as being on time, demonstrating a desire to learn, effectively interacting with others, and being responsible for your own behavior.
3. Learn for a lifetime. Learn material with the focus on being an effective PTA rather than for achieving a particular grade.

This handbook is provided to clarify the program expectations, policies and procedures prior to your entry to the program. By entering the program, you voluntarily commit yourself to the challenge and reward ahead.

Respectfully,

A handwritten signature in black ink that reads "Leighton PT". The signature is stylized and includes a horizontal line extending from the end of the name.

Randy Leighton, PT, PhD
PTA Program Coordinator

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FREQUENTLY CALLED NUMBERS

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Program Fax	(816) 759-4646
Financial Aid	(816) 604-4067
Records Office	(816) 604-4100
Bookstore	(816) 604-4189
Library	(816) 604-4080
Security	(816) 604-1200 Emergency (816) 604-1111 Non- Emergency
Allied Health Student Advisor	An Academic Advisor can be reached at T(816) 604-1000 F(816) 759-4161
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I. PTA Program Overview

Mission Statement

The mission of the Metropolitan Community College is to prepare students, serve communities and create opportunities. Consistent with this mission, the Physical Therapist Assistant Program's mission is to serve as a resource for physical therapy and the community and educate effective, compassionate individuals in contemporary practice as a physical therapist assistant that embrace the core values of physical therapy.

In order to achieve this mission, the program will:

- Recruit qualified students from diverse backgrounds
- Provide instruction in a supportive learning environment utilizing a variety of teaching methods
- Clearly delineate role expectations of an effective physical therapist assistant to enhance student learning and retention.
- Provide effective instruction and experience in physical therapy in order to graduate physical therapist assistants that:
 - A. Demonstrate the ability to effectively and safely carry out the plan of care as established by the physical therapist, understanding their scope of practice and supervisory relationships
 - B. Communicate effectively using verbal, written, and non-verbal communication
 - C. Possess skills which allow them to practice in a managed care environment
 - D. Demonstrate the ability to evaluate personal strengths and weaknesses and implement professional development
 - E. Reflect the core values of the physical therapy profession: accountability, altruism, compassion and caring, cultural competence, duty, integrity, and social responsibility.
- Encourage an environment of excellence founded on the principles of continuous quality improvement and lifelong learning.
- Foster relationships within the college and community that promote the goals of the PT profession, college mission or provide community service

Physical Therapist Assistant Statement of Philosophy

To enable individuals to successfully pursue lifelong educational career goals, the faculty encourages students to engage in active learning by focusing on thinking and problem solving skills in a supportive environment. Graduates of the program will provide assistance to physical therapists, treatment to physical therapy clients; and interact effectively with clients, families, and members of the health care team in a manner which is consistent with APTA Standards of Practice, APTA Code of Conduct for the PTA and state law. Graduates will value self-assessment and development and contribute positively to the community.

Metropolitan Community College-PV-HSI Physical Therapist Assistant Program *Program Objectives*

1. The program admits approximately 22 qualified Traditional students each fall and 14 qualified Web based students each spring of diverse backgrounds.
2. Program policies and prospective student information are reviewed annually, are effective in achieving the mission and goals of the program, facilitate student success and retention, and meet standards of equal opportunity, confidentiality, safety and due process.
3. Program graduation rates will be greater than or equal to accreditation thresholds.
4. Program resources are adequate to effectively educate students in contemporary physical therapy practice.
5. The program educates effective physical therapist assistants that demonstrate the competencies required by the Commission on Accreditation in Physical Therapy Education, including, but not limited to:
 - Uses verbal and nonverbal communication effectively to develop rapport and provide and receive information
 - Completes health care documentation consistent with health care standard
 - Demonstrates behavior consistent with core values of physical therapy
 - Follows the APTA's Standards of Ethical Conduct for the Physical Therapist Assistant
 - Explains laws related to physical therapy and practices legally
 - Demonstrates an understanding of the physical therapy plan of care
 - Demonstrates competency in performing interventions within the role of the physical therapist assistant
 - Demonstrates competency in performing data collection consistent with the role of the physical therapist assistant
 - Modifies interventions to meet the needs of the individual patient consistent with the role of the physical therapist assistant.

- Determines when consultation with the supervising physical therapist is appropriate
- Interacts effectively with others to achieve organizational goal
- Assists with aspects of organizational evaluation, planning and operation
- Provides information accurately for billing and reimbursement purposes.

6. The program effectively utilizes a quality improvement plan each spring semester to assess the effectiveness of the administrative, didactic and clinical aspects of the program and plan for improvement. The plan includes a faculty development plan that related to the overall mission and objectives of the program.

7. The core faculty participates in college and community activities that promote awareness of physical therapy and advocate for health issues, which may include: collaborating to offer one continuing education meeting year, participation in physical therapy month activities, participation in recruitment activities/year aimed to recruit diverse populations, and college committee membership.

8. The program will maintain compliance in all Commission on Accreditation in Physical Therapy Education (CAPTE) criteria.

9. Results on the National Physical Therapist Assistant Examination shall exceed accreditation thresholds, averaged over 2 years

10. Employment rates after successful of the Licensing exam will meet or exceed the accreditation thresholds.

II. Conduct

This *Guide for Conduct of the Physical Therapist Assistant* (Guide) is intended to serve physical therapist assistants in interpreting the *Standards of Ethical Conduct for the Physical Therapist Assistant* (Standards) of the American Physical Therapy Association (APTA). The Guide provides guidelines by which physical therapist assistants may determine the propriety of their conduct. It is also intended to guide the development of physical therapist assistant students. The Standards and Guide apply to all physical therapist assistants. These guidelines are subject to change as the dynamics of the profession change and as new patterns of health care delivery are developed and accepted by the professional community and the public. This Guide is subject to monitoring and timely revision by the Ethics and Judicial Committee of the Association.

[Click here to view the entire APTA Code of Ethics for the PTA](#)



APTA

Guide for Conduct of the Physical Therapist Assistant

Purpose: This Guide for Conduct of the Physical Therapist Assistant (Guide) is intended to serve physical therapist assistants in interpreting the Standards of Ethical Conduct for the Physical Therapist Assistant.

(Standards) of the American Physical Therapy Association (APTA).
The APTA House of Delegates in June of 2009 adopted the revised Standards, which became effective on July 1, 2010.

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

Interpreting Ethical Standards

The interpretations expressed in this Guide reflect the opinions, decisions, and advice of the Ethics and Judicial Committee (EJC). The interpretations are set forth according to topic. These interpretations are intended to assist a physical therapist assistant in applying general ethical standards to specific situations. They address some but not all

topics addressed in the Standards and should not be considered inclusive of all situations that could evolve.

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

Preamble to the Standards

The Preamble states as follows:

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of 2 physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life. No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

Interpretation:

Upon the Standards of Ethical Conduct for the Physical Therapist Assistant being amended effective July 1, 2010, all the lettered standards contain the word “shall” and are mandatory ethical obligations. The language contained in the Standards is intended to better explain and further clarify existing ethical obligations. These ethical obligations predate the revised Standards. Although various words have changed, many of the obligations are the same. Consequently, the addition of the word “shall” serves to reinforce and clarify existing ethical obligations. A significant reason that the Standards were revised was to provide physical therapist assistants with a document that was clear enough such that they can read it standing alone without the need to seek extensive additional interpretation. The Preamble states that “[n]o document that delineates ethical standards can address every situation.” The Preamble also states that physical therapist assistants “are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.” Potential sources for advice or counsel include third parties and the myriad resources available on the APTA Web site. Inherent in a physical therapist assistant’s ethical decision-making process is the examination of his or her unique set of facts relative to the Standards.

Standards

Respect

Standard 1A states as follows:

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

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

Altruism

Standard 2A states as follows:

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

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

Sound Decisions

Standard 3C states as follows:

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

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

Supervision

Standard 3E states as follows:

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

Interpretation: Standard 3E goes beyond simply stating that the physical therapist assistant operates under the supervision of the physical therapist. Although a physical therapist retains responsibility for the patient/client throughout the episode of care, this standard requires the physical therapist assistant to take action by communicating with the supervising physical therapist when changes in the patient/client status indicate that modifications to the plan of care

may be needed. Further information on supervision via APTA policies and resources is available on the APTA Web site.

Integrity in Relationships

Standard 4 states as follows:

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

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

Reporting

Standard 4C states as follows:

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

Interpretation: When considering the application of “when appropriate” under Standard 4C, keep in mind that not all allegedly illegal or unethical acts should be reported immediately to an agency/authority. The determination of when to do so depends upon each situation's unique set of facts, applicable laws, regulations, and policies. Depending upon those facts, it might be appropriate to communicate with the individuals involved. Consider whether the action has been corrected, and in that case, not reporting may be the most appropriate action. Note, however, that when an agency/authority does examine a potential ethical issue, fact finding will be its first step. The determination of ethicality requires an understanding of all of the relevant facts, but may still be subject to interpretation.

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

Exploitation

Standard 4E states as follows:

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

Interpretation: The statement is fairly clear –sexual relationships with their patients/clients, supervisees or students are prohibited. This component of Standard 4 is consistent with Standard

4B, which states:

4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees). Next, consider this excerpt from the EJC Opinion titled Topic: Sexual Relationships With Patients/Former Patients(modified for physical therapist assistants):A physical therapist [assistant] stands in a relationship of trust to each patient and has an ethical obligation to act in the patient's best interest and to avoid any exploitation or abuse of the patient. Thus, if a physical

therapist [assistant] has natural feelings of attraction toward a patient, he/she must sublimate those feelings in order to avoid sexual exploitation of the patient. One's ethical decision making process should focus on whether the patient/client, supervisee or student is being exploited. In this context, questions have been asked about whether one can have a sexual relationship once the patient/client relationship ends. To this question, the EJC has opined as follows: The Committee does not believe it feasible to establish any bright-line rule for when, if ever, initiation of a romantic/sexual relationship with a former patient would be ethically permissible.

.....

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

Colleague Impairment

Standard 5D and 5E state as follows:

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

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

Interpretation: The central tenet of Standard 5D and 5E is that inaction is not an option for a physical therapist assistant when faced with the circumstances described. Standard 5D states that a physical therapist assistant shall encourage colleagues to seek assistance or counsel while Standard 5E addresses reporting information to the appropriate authority. 5D and 5E both require a factual determination on the physical therapist assistant's part. This may be challenging in the sense that you might not know or it might be difficult for you to determine whether someone in fact has a physical, psychological, or substance-related impairment. In addition, it might be difficult to determine whether such impairment may be adversely affecting someone's work responsibilities. Moreover, once you do make these determinations, the obligation under 5D centers not on reporting, but on encouraging the colleague to seek assistance. However, the obligation under 5E does focus on reporting. But note that 5E discusses reporting when a colleague is unable to perform, whereas 5D discusses encouraging colleagues to seek assistance when the impairment may adversely affect his or her professional responsibilities. So, 5D discusses something that may be affecting performance, whereas 5E addresses a situation in which someone is clearly unable to perform. The 2 situations are distinct. In addition, it is important to note that 5E does not mandate to whom you report; it gives you discretion to determine the appropriate authority.

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

Clinical Competence

Standard 6A states as follows:

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

Interpretation: 6A should cause physical therapist assistants to reflect on their current level of clinical competence, to identify and address gaps in clinical competence, and to commit to the maintenance of clinical competence throughout their career. The supervising physical therapist

can be a valuable partner in identifying areas of knowledge and skill that the physical therapist assistant needs for clinical competence and to meet the needs of the individual physical therapist, which may vary according to areas of interest and expertise. Further, the physical therapist assistant may request that the physical therapist serve as a mentor to assist him or her in acquiring the needed knowledge and skills. Additional resources on Continuing Competence are available on the APTA Web site.

Lifelong Learning

Standard 6C states as follows:

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

Interpretation: 6C points out the physical therapist assistant's obligation to support an environment conducive to career development and learning. The essential idea here is that the physical therapist assistant encourage and contribute to the career development and lifelong learning of himself or herself and others, whether or not the employer provides support.

Organizational and Business Practices

Standard 7 states as follows:

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

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

7.2 Organizational Employment

A. A physical therapist assistant shall inform his/her employer(s) and/or appropriate physical therapist of any employer practice that causes him or her to be in conflict with the Standards of Ethical Conduct for the Physical Therapist Assistant.

B. A physical therapist assistant shall not engage in any activity that puts him or her in conflict with the Standards of Ethical Conduct for the Physical Therapist Assistant, regardless of directives from a physical therapist or employer

C. Confidentiality

Documenting Interventions

Standard 7D states as follows:

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

Interpretation: 7D addresses the need for physical therapist assistants to make sure that they thoroughly and accurately document the interventions they provide to patients/clients and

document related data collected from the patient/client. The focus of this Standard is on ensuring documentation of the services rendered, including the nature and extent of such services.

Support -Health Needs

Standard 8A states as follows:

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

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

Issued by the Ethics and Judicial Committee
American Physical Therapy Association
October 1981
Last Amended
November 2010

Last Updated:
9/4/13 Contact:
ejc@apta.org

Privacy and Confidentiality

1. Changing rooms are available to students for lab classes. When performing techniques which require exposure of a body part, appropriate draping techniques will be utilized. Curtained booths are available for privacy.
2. Students will adhere to patient care competencies.
3. The student will respect patient and classmate privacy and confidentiality.
4. Student will acquire a patient's written informed consent prior to seeking participation in videotapes, slides, photos, or other projects.
5. Students will remove any identifying information when presenting patient case histories.
6. Students will be expected to complete a HIPAA examination and to sign a confidentiality statement (See Appendix)

Professionalism

The physical therapist assistant student is expected to act in a professional way while a student at Metropolitan Community College-Penn Valley or its clinical sites. The student will be required to self-evaluate their performance in this area at the mid-term of second semester and meet with a faculty advisor to discuss the evaluation and any need for improvement. Self-evaluation will include qualities such as tact, communication, responsibility for behavior, learning, dress, etc. (See Appendix for Self-Evaluation form)

Ethics

All physical therapists assistants are expected to abide by the Guide for Conduct of the Physical Therapist Assistant as outlined in the American Physical Therapy Association Document located above

Academic Honesty

Cheating is an act of deception which will not be tolerated in the classroom, laboratory or clinic.

Evidence of cheating on any given project, lab activity or examination may result in a "0" grade being recorded in the grade book for the activity or failure of the course. If there is evidence of cheating more than once, a student will be dismissed from the PTA program. A significant act of dishonesty may result in immediate expulsion from the program or college.

Unilateral Instructor Action: The "Code of Student Conduct" states that all forms of academic dishonesty, including but not limited to the following are prohibited:

- Plagiarism
- Cheating during an exam (including but not limited to written, computerized or demonstrative) by copying from another student, speaking to students that have completed exams, quizzes, practical demonstrations or by using information in the form of unauthorized aids, electronic or otherwise.
- Submission as one's own work, an assignment, or test, prepared by another.
- Submitting coursework from a previous or concurrent course without instructor prior approval.

If the instructor feels that a more severe action is appropriate, the complaint may be referred to the division chair and the Dean of Instruction. The Dean has the authority to recommend an action to the president, or the student may request a hearing.

For more complete information concerning the Code of Student Conduct, please consult District Regulation 7.35010 in the Metropolitan Community Colleges manual of Policies, Regulations, and Procedures, copies of which are available in the campus library.

Test Taking Procedures

During an exam students:

- will spread out as much as possible
- work with a cleared desk
- keep all papers on the table
- will not wear billed hats
- will not talk during exams
- If a student is late to an exam they will be considered tardy with appropriate point deductions at the instructor's discretion
- A tardy student will not receive extra test taking time
- All cell phones and smart watches will be placed on the instructor's desk
- All other materials including water will be placed in an area designated by the instructor
- A student may have a writing utensil, eraser and approved scratch paper
- For exams using Scantron forms the student is expected to obtain their own Scantron. Scantron forms can be purchased at the Penn Valley Bookstore. Plan ahead the vending machine in the HSI Lobby is not a reliable source for Scantron forms.

As an Allied Health student and member of the professional community, it is expected that all students will:

- Demonstrate honesty, integrity, high ethical standards, and behave in a manner consistent with that of a professional nurse.
- Take full responsibility for personal actions before, during, and after testing.
- Remain in the recorded area at all times until testing is complete.
- Neither give nor receive unauthorized assistance during testing.
- Will not store, receive, and/or access course materials (lecture notes, textbooks, or learning aids) by any means during testing. All study materials will be placed where they are inaccessible during testing.
- Not copy any portion of the test by any method.
- Abide by the exam policies as listed in the course syllabus and Student Handbook, including late entry, exam times, penalties, rescheduling exams, absences, etc.
- Support the highest academic standards and not intentionally or knowingly engage in any activities supporting academic dishonesty.
- Be held accountable for any violation of academic honesty, including actions up to failure of the exam and/or course and including potential dismissal from the program.

Continuing with all testing in the Program indicates acknowledgment by the student of the above guidelines/expectations and agreement to abide by the statements contained therein.

A. *Testing Accommodations*

Students who require testing accommodations in accordance with the Americans with Disabilities Act (ADA) must provide a Letter of Accommodation to each instructor each semester from Penn Valley's Disability Support Services (DSS) office. These steps must be followed when your instructor notifies you of an exam:

- It is the student's obligation, not the Testing Center's to understand and follow the instructions below. Failure to follow these guidelines may result in exam failure. Any questions regarding these guidelines should be addressed with the instructor.
- The student will contact the Testing Center at least three business days in advance to schedule each test. Tests should be scheduled at your regular class time in most cases. If extended test time cannot be arranged at your usual class time because it will interfere with another class, please notify the Testing Center to arrange a different time as close to the regular class time as possible.
- The Testing Center and the student will notify the instructor of the time. If the test will not be taken at the regular class time, the instructor must approve the scheduled time.
- Once approved, the testing time will not be changed without permission from the instructor.
- If instructor permission is not received prior to taking the exam, it will begin at the previously accepted time.
- All tests scheduled in the Testing Center will begin at the scheduled time. A student who is late to the exam will be considered tardy and will receive the appropriate point deduction at the instructor's discretion. The time for test taking is deducted from the total amount of time for testing as with students not receiving accommodations. If the late start is due to issues at the Testing Center and not due to the student's tardiness, full testing time will be given. Example: If a test is to last 1 hour and the student is given 2 hours to complete and they show up 30 minutes late, they will be considered tardy and will now have 1 ½ hours to complete the exam. If the delay is due to Testing Center issues they will still receive the full 2 hours.
- The student will follow all Testing Center guidelines.

Test Score Appeal

- A student wanting to appeal the grading of a test question has five business from the day the grades are released to turn in a written appeal.
- The student should fill out the Exam Question review (VIII.U) form provided in the Canvas and give the form to the instructor. Appendix U
- After the five-day window, grades are final and cannot be appealed. Although the student can still ask for clarification of the answer.

III. Facilities and Student Support

A. *Faculty Conferences/ Student Use of Information*

1. Students are encouraged to meet with faculty regarding coursework or other issues that may impact their success in the program. The Program Coordinator, Academic Coordinator of Clinical Education (ACCE) and all appropriate instructors discuss student issues to better advise students on goal setting and other issues. If the student designates, the

- information he/she is sharing should be held confidentially, the information will not be shared with other program faculty.
2. Student program files are locked in the program coordinator's office with access limited to program coordinator. Academic files are routinely provided to the Academic Advising office to help students plan for enrollment. Students may ask that information not be shared in this manner by placing a written request in his/her file.
 3. Student demographic information is provided to the American Physical Therapy Association and the MCC-PV assessment office. Use of student information for any other purpose would require the written consent of the student.

B. *PT-OT Labs*

Labs shared by the OTA and PTA programs in the Health Sciences Institute are 309, 313, 314, 315. Students are allowed to use the labs when they are not in use. To use labs and equipment there must be a member of the PTA faculty present and available in the HSI. Students may practice supervised skills at times designated by the instructor of a particular course. Students are not allowed to remove materials from the room and should leave the room as they found it.

Two treatment tables are also available in the Health Resource Center (HRC) (room 206) on the 2nd floor of the Health Science Institute. Faculty members may opt to leave supplies in the HRC dependent on amount of supervision deemed necessary to perform the procedure and safety requirements.

c. *Student Tutoring*

The Biology Tutoring lab is available for students in taking courses in the Life Sciences division at hours designated outside the door. The tutoring lab is located in ST 205 and has access to anatomical models and computer software.

The Student Success Center is on the second floor of the library on the main campus. In the Success Center student can receive assistance generalized tutoring including advising students on writing research papers.

D. Library
1. Databases

The library has access to the following databases for research on health related issues. Students may access these databases from home. In order to do so:

To use the database from home, go to <http://www.mcckc.edu> and click on library services.

The Library has access to the following health related databases.

[Alt Health Watch \(EBSCOhost\)](#) Full-text articles from 160+ international journals plus hundreds of pamphlets offering holistic perspectives on health care and wellness

[Clinical Pharmacology \(EBSCOhost\)](#)

Information on US prescription drugs, plus herbal and nutritional supplements.

[Health Reference Center \(Facts on File\)](#)

Encyclopedic database containing over 20,000 hyperlinked entries on health and social issues. Defines causes, cures, key research, medical terms, symptoms, treatments and trends of each field of study.

[Health Reference Center Academic \(Gale Group\)](#)

Indexes articles on fitness, pregnancy, medicine, nutrition, diseases, public health, occupational health and safety, alcohol and drug abuse, HMOs, prescription drugs, etc. from 1980 to present.

[Health Source : Consumer Edition \(EBSCOhost\)](#)

Full text for 190 journals plus abstracts for 205 general health and nutrition publications.

[Health Source : Nursing/Academic Edition \(EBSCOhost\)](#)

Provides full text for 600 scholarly medical journals and abstracts for over 650 additional journals.

[Medline](#)

PubMed, a service of the National Library of Medicine, includes over 14 million citations for biomedical articles back to the 1950's. These citations are from MEDLINE and additional life science journals. PubMed includes links to many sites providing full text articles and other related resources.

[CINAHL \(Proquest Research Library\)](#)

The CINAHL[®] database covers the nursing and allied health literature from 1982 to the present.

2. Academic Computer Lab

An 18 station computer lab is available for independent computer use in room 203 of the Health Science Institute.

3. Anatomical Models Study Area

Muscle models, skeletons, and other muscle models are available for individual study on the 1st floor of the library at MCC-Penn Valley and also at the Health Science Institute Resource Center on the 2nd floor.

E. Advising and Counseling

Staff: Currently advising and counseling is provided by Penn Valley Community College in the Malcolm T. Wilson Enrollment Center. At this time there is also a dedicated Allied Health Student advisor. The name and number is located above in “Frequently Called Numbers”.

1. Enrollment Procedures

Once admitted to the program, the program coordinator will have a mandatory orientation including an explanation regarding enrollment for students. Counselors will assist students with enrollment by appointment. The program coordinator will provide course numbers each semester. It is the student’s responsibility to enroll in courses.

2. Student Records

The academic advisors and program coordinator are provided access to files upon entry to the program in order to better advise students. If students prefer, this information will not be shared with academic advisors if formal written request is made.

3. Application for Graduation

After being formally admitted to the program, each student is expected to set up an appointment with the program coordinator during the first semester of the program. At this Degree Plan meeting the student and coordinator will review the student’s transcripts and set up a plan to be recorded in the student’s file. As a result of this meeting the coordinator may ask the student to follow up with an appropriate academic advisor division chair or Dean. The scheduling and completion of this meeting is the duty of the student and not the program coordinator. Failure to schedule and attend this meeting could result in an inability to graduate on time.

To be guaranteed consideration for graduation, students must submit a degree application one semester prior to completing the requirements to any of the MCC Records Offices.
<https://mcckc.edu/commencement/apply.aspx>

An application may be printed from MCC's web site or one can be picked up in any of the MCC Records Offices. Before an evaluation can be completed, official transcripts from all colleges previously attended must be on file in one of the MCC Records Offices. Instructions for on line application for graduation can be found at <https://mcckc.edu/commencement/>

Evaluation of Application for Graduation

Once the student has turned in the Degree/ Certificate Application, the Transcript Evaluator will complete an official degree/ certificate evaluation to ensure that degree/ certificate requirements are satisfied. Students should be able to determine the status of their transcript by logging in with their student ID to MCC's web site. Students that transfer credits to MCC should evaluate their transcript to assure timely graduation. **It is not the responsibility of the program coordinator or any other faculty member to assure that the student has taken all appropriate general education courses for graduation. It is the student's responsibility to follow up on transfer of courses and exceptions for graduation with the appropriate office.**

F. Awarding of Degree/Certificate

At the end of each semester, the applications of graduation candidates are reviewed. Upon the Transcript Evaluator's certification that the student has successfully completed requirements, the degree/ certificate will be recorded on the student's permanent transcript. A student graduating off schedule or during a semester must communicate this with Transcript Evaluator's to assure timely graduation assessment.

G. Employment Resources

The Employment Resources office keeps current information on jobs available in the physical therapy field and other areas. The Employment Resources Specialist will advise you on resume writing and interviewing. This individual can be reached by calling 604-4155.

IV. Program Specific Information

Metropolitan Community College-Penn Valley

Physical Therapist Assistant Program

A. Curriculum Checklist

Name: _____ Student ID#: _____

Please consult the Program Coordinator, Randy.Leighton@mccckc.edu for any changes in curriculum sequencing.

			Hours	Grade	Hours Earned	Grade Points
PROGRAM PREREQUISITES						
ENGL	101	*Composition & Reading I (JCCC: ENGL 121, 3 Cr)	3			
		Any biological or physical sciences course. (students planning to take Biol 109 to satisfy A& P will need to take Intro to Cell Biology or CHEM 105, 5 Cr) (JCCC: CHEM 122, 5 Cr)	4-6			
BIOL	150	Medical Terminology (or HIM 100 3 cr) (JCCC: HC 130, 3 Cr)	2			
PTHA	151	³ Introduction to Physical Therapy	2			
TOTAL			10			
FIRST SEMESTER						
BIOL	109	¹ Anatomy & Physiology with lab	4-6			
PSYC	140	*General Psychology (JCCC: PHYC 130, 3 Cr)	3			
COMM	100 or 102	*Fundamentals of Speech (JCCC: SPDR 121, 3 Cr)	3			
PTHA	152	Physical Therapy Fundamentals I	4			
PTHA	160	Medical Diseases	2			
TOTAL			18			
SECOND SEMESTER						
HIST/P OLS		American Institutions (HIST 120, 121 or POLS 136)	3			
EMTP	100	² Basic Emergency Patient Care	1			
PTHA	153	Kinesiology	4			
PTHA	154	Applied Neurology	2			
PTHA	159	Orthopedic Pathology	2			
PTHA	161	Physical Therapy Fundamentals II	4			
PTHA	162	Clinical Immersion (~40 hours of clinical experience)	1			
TOTAL			17			
THIRD SEMESTER						
PTHA	155	Rehabilitation	4			
PTHA	158	Therapeutic Exercise	4			
PTHA	164	Pediatrics & Gerontology	2			
PTHA	171	Clinical Seminar	2			
PTHA	170	Clinical Education I (3 weeks full-time)	3			
TOTAL			15			
FOURTH SEMESTER						
PTHA	272	Clinical Education II (14 weeks full-time)	12			

		TOTAL	12	
		TOTAL PROGRAM CREDIT HOURS	72	

See next page for key to superscripts

*General education courses can be sequenced in any manner, but should be completed prior to the third semester. SPDR 102 will also be accepted in place of SPDR 100

¹For MCC students: BIOL 109 Anatomy & Physiology or HLSC 108, or the combination of BIOL 110 and 210 will meet the requirement.

Two JCCC options are available:

Option 1 - BIOL 144 Human Anatomy & Physiology (5 cr) AND BIOL 145 Human Anatomy/Physiology

Dissection (1 cr). (NOTE: BIOL 144 must be taken before BIOL 145.)

Option 2 - BIOL 140 Human Anatomy (4 cr) AND BIOL 225 Human Physiology (4 cr) (NOTE: CHEM 122 and BIOL 140 must be taken before BIOL 225.)

²CPR Certification will not exempt you from class. This course is only offered to students accepted into the PTA program and cannot be taken out of sequence.

³Applications received without PTHA 151 completed will be evaluated, but the applicant will be at a disadvantage compared to an applicant with all pre-requisite courses completed.

B. ADDENDUM TO CURRICULUM REQUIREMENTS

**PHYSICAL THERAPIST ASSISTANT PROGRAM
Metropolitan Community College-PV-HSI**

1. Chemistry 105 may be substituted for BIOL 100 (Cell Biology). Students should seek approval prior to enrolling in any other chemistry course since they are unlikely to match course descriptions. Those students enrolling through JCCC should take JCCC's Chemistry 122 instead of Introduction to Cell Biology.
2. Students may elect to complete the required coursework for the Physical Therapist Assistant Program in three years rather than two. This can be accomplished by completing all non-PTHA coursework prior to entering the program. Once admitted, all PTHA coursework must be taken in sequence, in the semester that it is offered. It is strongly suggested that those with other significant responsibilities such as working or family commitments consider this three-year time framework.

Non-PTHA coursework includes:

BIOL 100 - Introduction to Cell Biology or Chemistry 105 (PVCC)/ Biological or Physical Science
BIOL 109 - Anatomy & Physiology
BIOL 150 - Medical Terminology
PSYC 140 - General Psychology
ENGL 101 - Composition and Reading
SPDR 100 - Speech
HIST 120 or 121, or POLS 136

c. Course Descriptions

PTHA 151 Introduction to Physical Therapy (2 credits, 2 hours)

Introduction to the education and roles of the physical therapist and physical therapist assistant as members of the health care team. Overview of physical therapy practice, terms and current issues. Effective interaction with others related to the implementation of the physical therapy plan of care.

PTHA 152 Fundamentals of Modalities I (4 credits, 2.5 lecture, 3 lab hours)

Basic patient care skills utilized by the physical therapist assistant in carrying out the plan of care established by the physical therapist. Theory and application of basic treatment modalities used in physical therapy, including indications and contraindications. Field trips

PTHA 153 Kinesiology (4 credits, 2 lecture, 4 lab hours)

Discussion of anatomy and function of the musculoskeletal system. Analysis of various activities. Application of various data collection techniques to monitor effectiveness of physical therapy interventions as outlined in the plan of care established by the supervising physical therapist.

PTHA 154 Applied Neurology (2 credits, 2 lecture hours)

Foundations of neuroscience for practice as a rehabilitation professional. Anatomy and function of the nervous system. Correlation of clinical problems with pathology of the nervous system. Cross-listed with OTHA 154.

PTHA 155 Rehabilitation (4 credits, 3 lecture, 2 lab hours)

Introduction to underlying theory, principles and application of interventions involved in physical rehabilitation. Field trips as required.

PTHA 158 Therapeutic Exercise (4 credits, 2 lecture, 4 lab hours)

Introduction to the theory and principles of application of therapeutic exercise including patient instruction, manual techniques and equipment commonly used by the physical therapist assistant in carrying out the plan of care as established by the supervising physical therapist. Field trips as required.

PTHA 159 Orthopedic Pathology (2 credits, 2 lecture hours)

Orthopedic pathologies commonly seen in physical therapy practice: diagnostic tests, signs and symptoms, physiologic factors and common interventions associated with the physical therapy plan of care

PTHA 160 Medical Diseases (2 credits, 2 lecture hours)

Medical diseases commonly seen in physical therapy practice; diagnostic tests, signs and symptoms, physiologic factors and common interventions associated with the physical therapy plan of care.

PTHA 161 Fundamentals of Modalities II (4 credits, 2.5 lecture, 3 lab hours)

Introduction to the theory and practical application of documentation, patient care skills, and selected modalities, including indications and contraindications.

PTHA 162 Clinical Immersion (1credit, 40 hours of experience during the semester)

Supervised clinical and simulation experience in the practical application of techniques and procedures covered in all previous PTHA courses. Assisting physical therapists in treatment of patients in a variety of clinical settings.

PTHA 164 Pediatrics and Gerontology (2 credits, 2 lecture hours)

Specialized information related to the treatment of pediatric and older adult populations

PTHA 170 Clinical Experience I (3 credits, 3 weeks full time)

Supervised clinical experience in the practical application of techniques and procedures covered in all previous PTHA courses. Assisting physical therapists in treatment of patients in a variety of clinical settings.

PTHA 171 Clinical Seminar (2 credits, 2 lecture hours)

This course contains information on current professional issues and values, administrative policies and procedures, and related clinical topics associated with the practice of physical therapy. Service learning projects required

PTHA 272 Clinical Education II (12 credits, 40 hours/week-14 weeks)

Practical application of principles learned in the prior didactic semesters. Experience rotating internships in selected clinical sites under the supervision of a physical therapist.

**PROJECTED PROGRAM COSTS
PHYSICAL THERAPIST ASSISTANT PROGRAM**

D. TUITION

Tuition occasionally changes during the academic year the most up to date information on MCKC tuition can be found at <https://mckc.edu/value/>

Classification	Cost/Credit Hour
In-District Resident	\$ 121.00*
Out of District MO Resident	\$237.00*
Out of State Resident	\$320.00*

NOTE: Estimated cost to attend Physical Therapist Assistant Program at MCC-PV. Costs reflect the tuition rate effective 2021 and are subject to change; obtain current rates from Cashier's Office.

OTHER EXPENSES

Fall Semester	Books Annual TB Tests Criminal Background Check Allied Health Fee	+\$500.00 50.00 46.50 120.00
Spring Semester	Books Liability Insurance Allied Health Fee	+\$320.00 35.00 280.00
Fall Semester	Books Annual TB Tests Criminal Background Check Liability Insurance Allied Health Fee APTA Membership	+\$175.00 50.00 46.50 **35.00 300.00 100.00
Spring Semester	Books Liability Insurance Graduation Fee Allied Health Fee	\$0.00 **35.00 30.00 240.00

+Approximate

**Liability insurance charges are included with other fees and paid with tuition.

In addition, a physical examination must be performed prior to clinical rotations. A standard physical form will be provided to students at that time.

FINANCIAL AID

Questions concerning scholarships or any other form of financial aid should be directed to the Financial Aid office, MCC-PV, (816) 604-4067.

E. *Tuition and Fees

MCC is a great value. Our tuition is one of the lowest in the area - about 1/3 that of public four-year schools and a tiny fraction of private colleges. We offer many ways to pay plus a tuition payment plan to make it even easier to afford college.

F. Tuition Rates

Credit Hours	In District	Out of District/Metro Rate*	Out of State/International
1	\$121	\$237	\$320
2	\$242	\$474	\$640
3	\$363	\$711	\$960
4	\$484	\$948	\$1,280
5	\$605	\$1,185	\$1,600
6	\$726	\$1,422	\$1,920
7	\$847	\$1,659	\$2,240
8	\$968	\$1,896	\$2,560
9	\$1,089	\$2,133	\$2,880
10	\$1,210	\$2,370	\$3,200
11	\$1,331	\$2,607	\$3,520
12	\$1,452	\$2,844	\$3,840
13	\$1,573	\$3,081	\$4,160
14	\$1,694	\$3,318	\$4,480
15	\$1,815	\$3,555	\$4,800
16	\$1,936	\$3,792	\$5,120
17	\$2,057	\$4,029	\$5,440
18	\$2,178	\$4,266	\$5,760

* **Effective Fall 2023, students residing in Johnson, Leavenworth, Linn, Miami, and Wyandotte counties in Kansas** qualify for the Metro Rate. Please allow 7-10 days after initial enrollment for the reduced tuition rate to apply to your account.

Tuition and fees are subject to change without notice. Fees effective Fall 2022:

- **Tier 1 disciplines** - HVAC, radiologic technology and welding - Tuition plus \$50 program fee per course
- **Tier 2 disciplines** - paramedic, engineering technology, police and fire science, physical therapy assistant and veterinary technology - Tuition plus \$100 program fee per course
- **Tier 3 disciplines** - automotive technology, dental assisting, utility lineman and surgical technology - Tuition plus \$150 program fee per course
- **Tier 4 disciplines** - practical and professional nursing - Tuition plus \$400 program fee per course

1. Refunds

Additional information about Tuition and Fees can be found at <http://www.mccck.edu/tuition>

G. Outcomes Assessment Plan & Student Portfolio

Graduates of the Physical Therapist Assistant Program at MCC-Penn Valley are required to demonstrate competency in a variety of skills upon completion of the PTA program in order to be considered safe to practice. Students will complete traditional written examinations to determine knowledge level and will also complete approximately 30-35 competency checks or practical examinations while in the program. Competency checks require students to demonstrate safe administration of certain skills graded by the instructor according to a rubric. Students will have access to the performance rubric while learning the skill. In addition, students will complete practical examinations that involve a patient scenario and a greater degree of planning and problem solving. In both instances, students must pass the competency check or practical with a minimum score of 80% or above with no critical safety errors. If a student does not pass the competency exam, they will be asked to repeat the technique until competent. Subsequent attempts will result in specified point reductions.

In addition, students will be required to complete a portfolio for graduation that contains evidence of successful completion of outcomes. Students will update the portfolio each semester and receive a grade of incomplete until documentation of completed portfolio is presented to program coordinator or designee each semester or as determined by the PTA instructors. See the appendix for additional information on the portfolio

The Outcomes Assessment Plan represents an overview of the knowledge and skill the Physical Therapist Assistant should possess at the conclusion of the program and the method by which this knowledge and/or skill will be evaluated.

Metropolitan Community College-PV-HSI Physical Therapist Assistant Program

H. Outcomes Assessment Plan

Outcome	Assessment Measure
1. Effective Verbal and Non-Verbal Communication	<ol style="list-style-type: none"> 1. Written examination in Introduction to Physical Therapy regarding Verbal/Non-verbal communication 2. Student Self Evaluation completed at mid-term of each semester 3. Assessment through competency checks and practical examinations 4. Oral presentations in PT Fundamentals I, Kinesiology and Clinical Seminar 5. Pre-clinical practice review performance checklist 6. In-service presentation during Clinical Experience III 7. Patient surveys during Clinical Experience III 8. Written comprehensive program final examination
2. Effective Written	<ol style="list-style-type: none"> 1. Research paper on culture in Introduction to PT, graded according to specified rubric 2. Written examinations on documentation in Fundamentals II 3. Documentation assignments in Fundamentals II and Rehabilitation 4. Practical examinations that require documentation of interventions in Kinesiology, Therapeutic Exercise and Pre-Clinical Review 5. Documentation of treatments in Clinical Experience I, II and III 6. Program comprehensive final
3. Responds appropriately to individual and cultural differences	<ol style="list-style-type: none"> 1. Introduction to PT written examination 2. Culture awareness paper in Introduction to PT 3. Ethnic Autobiography in Physical Therapy Fundamentals II 4. Practical examinations in all classes that require to modify treatment to patient's individual differences 5. Written examinations in Gerontology 6. Physical Therapy Treatment of the Latino Client in Client-self assessment form 7. Clinical Experience I, II and II student evaluations 8. Program Comprehensive final
4. Demonstrates legal and professional behavior	<ol style="list-style-type: none"> 1. Written examinations in Introduction to PT and Clinical Seminar 2. Evaluation of Professional Behavior Assignment in Introduction to PT 3. Student performance report completed at the mid-term of each semester. 4. Clinical Experience I, II and III student evaluations 5. Program Comprehensive Final
5. Demonstrates understanding of	<ol style="list-style-type: none"> 1. Written examinations in Introduction to PT

<p>the plan of care as established by the physical therapist and carries out the plan of care practice of commensurate with the scope of the physical therapist assistant</p>	<ol style="list-style-type: none"> 2. Written assignments in PT Fundamentals II 3. Written examinations in Clinical Seminar 4. Practical examinations that require student to read plan of care and carry out those components of the treatment within the scope of practice of the PTA 5. Clinical I, II, and III evaluation 6. Program comprehensive final
<p>Functional training</p> <ol style="list-style-type: none"> 1. ADLS 2. Body Mechanics 3. Developmental Activities 4. Assistive/Adaptive Devices 5. Gait and Locomotion Training 6. Prosthetics and Esthetics 7. Wheelchair management Skills 	<ol style="list-style-type: none"> 1,2, ADLS, body mechanics and transfers a. Written Examinations and competency checks/practical examinations in Physical Therapy Fundamentals I on bed mobility, body mechanics and transfer training Body Mechanics Assignment in PT Fundamentals I b. Bed mobility and transfer competency check in Physical Therapy Fundamentals. Practicals in Kinesiology, Therapeutic Exercise and Pre-clinical checkout that require student to incorporate bed mobility, body mechanics and transfers c. Clinical Review Examination d. Clinical I, II, and III Clinical Evaluation e. Program Comprehensive Final 3. Developmental Activities a. Written examinations in Pediatrics and Gerontology b. Clinical Experience II & III Evaluation c. Program Comprehensive Final <p>4,5,6,7: Assistive/Adaptive Devices, Gait and Locomotion, Prosthetics and Orthotics, Wheelchair Management Skills</p> <ol style="list-style-type: none"> a. Written Examinations in Rehabilitation b. Practical examination in Rehabilitation c. Clinical II and III Student Evaluations d. Program Comprehensive Final
<p>Infection Control Procedures</p> <ol style="list-style-type: none"> 10. isolation techniques 11. sterile Technique 	<ol style="list-style-type: none"> 1. Written examination in PT Fundamentals I 2. Standard precautions examination in PT Fundamentals I 3. Hand washing and PPE checkout in PT Fundamentals 4. Wound care practical graded according to checklist, incorporating sterile technique 5. Wound care observation assignment requiring students to write about clean vs. sterile technique and isolation. 6. Practicals and checkouts in PT Fundamentals I, II, Kinesiology, Therapeutic Exercise that require appropriate infection control procedures throughout 7. Clinical review examination 8. Clinical Experience I, II, III evaluations 9. Comprehensive Final Examination
<p>Manual Therapy Procedures</p> <ol style="list-style-type: none"> 10. passive range of motion 11. therapeutic massage 	<ol style="list-style-type: none"> 1. Written examinations in PT Fundamentals I 2. Massage checkout in PT Fundamentals I 3. Practical as PROM as component, graded according to performance checklist 4. Practical Examination in PT Fundamentals that incorporates massage 5. Written examination in Clinical Seminar on overview of myofascial release 6. Practical examinations in Therapeutic Exercise that have goal of affecting ROM 7. Clinical review examination: all 8. Clinical I, II, and III 9. Comprehensive Final Examination
<p>Physical Agents and Mechanical Agents</p> <ol style="list-style-type: none"> 12. athermal agents 13. biofeedback 14. compression therapies 15. cryotherapy 16. electrotherapeutic agents 17. hydrotherapy 18. superficial and deep thermal agents 19. traction 	<ol style="list-style-type: none"> 12,14,15,17,18-Written examination in PT Fundamentals I 15,17, & 18-Competency checks in PT Fundamentals I 13,16,19-Written exam in PT Fundamentals II 16,19-Competency check in PT Fundamentals II Clinical review examination: all Pre-Clinical Review Practical: 16,18,19 Clinical Education I, II, and II student evaluations Comprehensive Final Examination
<p>Therapeutic Exercise</p> <ol style="list-style-type: none"> 20. aerobic conditioning 21. balance and coordination training 22. breathing exercises and coughing techniques 	<ol style="list-style-type: none"> 1 Written Examinations in Therapeutic Exercise class 2. Range of motion exercise competency check and written exam in PT Fundamentals I 3. Stretching and strengthening exercises competency checks in course Therapeutic Exercise 4. Practical examinations on all in Therapeutic exercise graded according to checklist 5. Clinical Education II and III evaluations 6. Comprehensive Final Examination

<p>23. posture awareness training 24. range of motion exercise 25. stretching exercises 26. strengthening exercises</p>	
<p>Competency in Data Collection Skills According to Plan of Care of the Supervising PT within the scope of practice of the PTA</p> <p>Aerobic Capacity and Endurance 1. measures standard vital signs 2. recognizes and monitors responses to positional changes and activities 3. observes and monitors thoracoabdominal movements and breathing patterns with activity</p> <p>Anthropometrical Characteristics 4. measures height, weight, length and girth</p> <p>Arousal, Mentation, and Cognition 5. recognizes changes in the direction and magnitude of patient’s state of arousal, mentation, and cognition</p> <p>Assistive, Adaptive, Orthotic, Protective, Supportive, and Prosthetic Devices 6. identifies the individual’s and caregiver’s ability to care for the device 7. recognizes changes in skin condition while using devices and equipment 8. recognizes safety factors while using the device</p> <p>Gait, Locomotion and Balance 9. describes the safety, status, and progression of patients while engaged in gait, locomotion, balance, wheelchair management and mobility</p> <p>Integumentary Integrity 10. recognizes absent or altered sensation 11. recognizes normal and abnormal integumentary changes 12. recognizes viable versus nonviable tissue</p>	<p>1,2,3 Written examination Physical Therapy Fundamentals I Practical examination Physical Therapy Fundamentals I Written examination Therapeutic Exercise Practical examination Therapeutic Exercise Pre-clinical review practical Pre-clinical written examination Clinical Education I, II, and III student evaluation Program Comprehensive Final</p> <p>4 Written examinations PT Fundamentals I Practical examinations PT Fundamentals I Kinesiology written examination Kinesiology practical examination Pre-Clinical written examination Clinical Education III student evaluation Program Comprehensive Final</p> <p>5 Written examination in PT Fundamentals I Practical examinations in PT Fundamentals I Practical examinations in courses following PT Fundamentals that require student to vary communication based on status Written examinations in Applied Neurology Pre-clinical written examination Clinical Education I, II, and III evaluations Program Comprehensive Final</p> <p>6,7,8 PT Fundamentals I written examinations PT Fundamentals I practical examinations Written Examinations Rehabilitation Pre-clinical written examination Clinical Education III student evaluations Program Comprehensive Final</p> <p>9 Written Examinations Rehabilitation Practical Examination Rehabilitation Written Examination Therapeutic Exercise Practical Examination Therapeutic Exercise Clinical Education II and II student evaluations Program Comprehensive Final</p> <p>10,11,12 Written Examination Medical Disease Written Examination Physical Therapy Fundamentals I Examination Applied Neurology Wound Observation paper in Physical Therapy Fundamentals Wound documentation assignment in Physical Therapy Fundamentals Wound and modality practicals in Physical Therapy Fundamentals I Kinesiology practicals Pre-clinical written examination Clinical I, II and III student evaluations Program Comprehensive Final</p>

<p>Joint Integrity and Mobility 14. Recognizes normal and abnormal joint movement</p>	<p>14 Written examination Kinesiology Practical examination Kinesiology Written Examination Orthopedic Pathology Practical Examination Therapeutic Exercise Written examination Therapeutic Exercise Pre-clinical written examination Pre-clinical practical examination Clinical I, II and III student evaluations Program Comprehensive Final</p>
<p>Muscle Performance 15. measures muscle strength by manual muscle testing 16. observes the presence or absence of muscle mass 17. recognizes normal and abnormal muscle length 18. recognizes changes in muscle tone</p>	<p>15, 16, 17 Written examination Kinesiology Practical examination Kinesiology Pre-Clinical review practical Pre-clinical review written examination Therapeutic Exercise practical Clinical Experience I, II, and III student evaluations</p>
<p>Neuromotor Development 19. recognizes gross motor milestones 20. recognizes fine motor milestones 21. recognizes righting and equilibrium reactions</p>	<p>18-Written examination Applied Neurology Written examination Rehabilitation Pre-Clinical written examination Clinical I, II and III student evaluations Program Comprehensive Final</p>
<p>Pain 22. administers standardized questionnaire, graphs, behavioral scales, or visual analog scales or pain 23. recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations</p>	<p>19,20,21 Written examinations Pediatrics and Gerontology Written examinations Rehabilitation Clinical II and III student evaluations Program Comprehensive Final</p>
<p>Posture 24. Describes resting posture in any position 25. Recognizes alignment of trunk and extremities at rest and during activities</p>	<p>22,23 Written examinations Physical Therapy Fundamentals I and II Practical examinations in all classes and pre-clinical review practical Pre-clinical review written examination Pre-clinical practical examination Rehabilitation Clinical I, II and III student evaluations Program Comprehensive Final</p>
<p>Range of Motion 26. measures functional range of motion 27. measures range of motion using a goniometer</p>	<p>24,25 Written examinations in PT Fundamentals I, Kinesiology, Orthopedic Pathology and Therapeutic Exercise. Body mechanics assignment in PT Fundamentals Practicals in PT Fundamentals, Kinesiology, and Therapeutic Exercise Pre-Clinical Written Examination Clinical I, II, and III student evaluations Program Comprehensive Final</p>
<p>Self-Care and Home Management and Community or Work Integration 26. measures functional range of motion 27. measures range of motion using a goniometer</p>	<p>26,27 Written examinations in Kinesiology Practical examination in Kinesiology Pre-Clinical Written Examination Pre-Clinical Practical Examination Practicals in Therapeutic Exercise Clinical I, II, and III student evaluations Program Comprehensive Final</p>

<p>28. inspects the physical environment and measures physical space</p> <p>29. recognizes safety and barriers in home, community and work environments</p> <p>30. recognizes level of functional status</p> <p>31. administers standardizes questionnaires to patients and others</p> <p>Ventilation, respiration and circulation examination</p> <p>32. recognizes cyanosis</p> <p>33. recognize activities that aggravate or relieve edema, pain, dyspnea, or other symptoms</p> <p>34. describes chest wall expansion and excursion</p> <p>35. describes cough and sputum characteristics</p> <p>Adjusts interventions within the plan of care established by the physical therapist in response to patient clinical indications and reports this to the supervising physical therapist</p>	<p>28,29,30</p> <p>Introduction to PT architectural barriers assignment</p> <p>Wheelchair experience assignment</p> <p>Introduction to PT written examinations</p> <p>PT Fundamentals I written examinations</p> <p>PT Fundamentals I practical examinations</p> <p>Rehabilitation written examinations</p> <p>Pre-clinical written examination</p> <p>Pre-clinical practical examination</p> <p>Clinical I, II, and III student evaluations</p> <p>Program Comprehensive Final</p> <p>FIM Assignment-Rehabilitation</p> <p>31 Kinesiology written examinations, Rehabilitation written examination</p> <p>32,33,34,35</p> <p>Written Examination PT Fundamentals</p> <p>Practical Examination PT Fundamentals</p> <p>Written Examination Medical Disease</p> <p>EMTP 101 Written Examination</p> <p>Written Examination Therapeutic Exercise</p> <p>Practical Examination Therapeutic Exercise</p> <p>Pre-Clinical written examination</p> <p>Pre-Clinical practical examination</p> <p>Clinical I, II, and III student evaluation</p> <p>Program Comprehensive Final</p> <p>Introduction to PT Written Examinations</p> <p>PT Fundamentals I, Medical Disease, Orthopedic Pathology written examinations</p> <p>Practicals in all coursework and pre-clinical practical</p> <p>Pre-Clinical written examination</p> <p>Clinical I, II, and III student evaluation</p> <p>Program Comprehensive Final</p>
<p>Recognizes when intervention should not be provided due to changes in patient's status and reports this to the supervising physical therapist</p>	<p>All courses written examinations contraindications and precautions</p> <p>Practicals in all coursework</p> <p>Pre-clinical practical</p> <p>Pre-clinical written examination</p> <p>Clinical I, II, and III student evaluation</p> <p>Program Comprehensive Final</p>
<p>Reports any changes in the patient's status to the supervising physical therapist</p>	<p>Practicals in all coursework and pre-clinical practical</p> <p>Pre-clinical written examination</p> <p>Clinical I, II, and III student evaluation</p> <p>Program Comprehensive Final</p>
<p>Recognizes when the direction to perform an intervention is beyond that which is appropriate for a physical therapist assistant and initiates clarification with the physical therapist</p>	<p>Introduction to PT Written Examination</p> <p>Practicals in all coursework</p> <p>Pre-clinical practical</p> <p>Pre-clinical written examination</p> <p>Clinical Seminar- Written exam</p> <p>Clinical I, II, and III student evaluation</p> <p>Program Comprehensive Final</p>
<p>Participates in educating patients and caregivers as directed by the supervising physical therapist</p>	<p>Introduction to PT Written Examination</p> <p>PT Fundamentals I and II, Therapeutic Exercise, and Rehabilitation practicals</p> <p>Pre-clinical practical</p> <p>Pre-clinical written examination</p> <p>Clinical I, II, and III student evaluations</p> <p>Program Comprehensive Final</p>
<p>Provides patient-related instruction to patients, family members and caregivers to achieve patient</p>	<p>Introduction to PT Written Examination</p> <p>PT Fundamentals I and II, Therapeutic Exercise, and Rehabilitation practicals</p> <p>Pre-clinical practical</p>

outcomes based on the plan of care established by the PT	Pre-clinical written examination Clinical I, II, and III student evaluations Program Comprehensive Final
Takes appropriate action in an emergency situation	Medical Diseases Written Examination Written Examination EMTP Basic Emergency Patient Care Practical Examination EMTP Basic Emergency Patient Care Pre-clinical written examination Clinical I, II, and III student evaluations Program Comprehensive Final
Completes thorough, accurate, logical, concise, timely, and legible documentation that follows guidelines and specific documentation formats required by state practice acts the practice setting, and other regulatory agencies.	PT Fundamentals II Written Examination PT Fundamentals documentation assignments Practical examinations in Kinesiology, Therapeutic Exercise, and Pre-clinical practical Pre-Clinical Written examination Clinical I, II, and III student evaluations Program Comprehensive Final
Participates in discharge planning and follow-up as directed by the supervising physical therapist	PT Fundamentals II Written Examination Therapeutic Exercise written examinations Clinical Seminar written examinations Clinical I, II, and III student evaluations Program Comprehensive Final
Reads and understands the health care literature	Presentation in PT Fundamentals I Presentation in Kinesiology Presentation in Clinical Seminar Clinical I, II, and III student evaluations In-service presentation on Clinical Experience III
Education Under the direction and supervision of the physical therapist, instructs members of the health care team using established techniques, programs, and instructional materials commensurate with the learning characteristics of the audience.	Introduction to PT Written examination Presentations in PT Fundamentals I, Kinesiology and Clinical Seminar In-service presentation in Clinical Experience III
Administration Interacts with other members of the health care team in patient-care and non-patient care activities. Provides accurate and timely information for billing and reimbursement purposes Describes aspects of organizational planning and operation of the physical therapy service. Participates in performance improvement activities	Introduction to PT Written Examination Clinical I, II, and III student evaluations Clinical Seminar Written Examinations Program Comprehensive Final
Social Responsibility Demonstrates a commitment to meeting the needs of patients and consumers Demonstrates an awareness of social responsibility, citizenship and advocacy, including participation in community and service organization and activities	Core Values-Introduction to PT Written Examination 4 hour community service requirement, Clinical Seminar Participation in one activity related to the promotion of physical therapy services Clinical Seminar Clinical I, II, and III student evaluations
Career Development Identifies career development and lifelong learning opportunities Recognizes the role of the physical therapist assistant in the clinical	Self evaluations at mid-term of each semester related to portfolio Clinical seminar Clinical I, II, and III student evaluations Participation in one continuing education course as requirement for Clinical Seminar

education of physical therapist assistant students	
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I. Program Policies and Procedures

1. Attendance Policy

The program faculty believes that consistent and timely attendance at class and clinicals is mandatory. Acquiring notes from classmates in most instances does not adequately replicate the information as provided by the instructor. Promptness and attendance at clinicals is imperative to assure continuity of patient care.

In the discussion of **EXCUSED ABSENCES** below, the following definitions will be used:

“A student’s serious illness” shall mean a condition such as pneumonia, surgery, hospital confinement, or valid medical reason. A physician’s note verifying illness shall be presented by the student to the instructor.

“Death in the immediate family” shall be interpreted to mean mother, father, mother-in-law, father-in-law, spouse, child, brother, sister, grandparents, or significant other. Documentation may be requested.

“Statutory governmental responsibilities” refer to such matters as jury duty or subpoena for court appearance. Documentation must be provided.

Special consideration may be given when weather conditions may not allow safe travel.

2. Attendance in Lectures

Call the instructor **PRIOR** to the beginning of the class to report absences. If the call is not received prior to the start of class, the absence will be considered unexcused. The first unexcused absence will result in a 10 point deduction from the class in which the absence occurred (this includes lecture and lab and dates when examinations are given) Subsequent unexcused absences will result in a 20 point deduction/absence. It is at the course instructor’s discretion to assign appropriate make up work for excused absences as noted in their individual course syllabus. Excused absences include: death in the immediate family, serious illness of the student, and statutory governmental responsibilities. This does not include minor illnesses of family members. The instructor has final determination on whether an absence will be considered excused. If it is necessary to be absent on the day of an exam, the instructor must be notified in advance. After an excused absence five (5) points will be deducted per academic day for each day which passes from the day the test was administered to the date the test was taken (points deducted from test score) If the absence is deemed an unexcused absence it is at the instructors discretion if the exam will be made up. Quizzes missed due to unexcused absences may not be made up. An instructor may grant an exception to this policy after holding a conference with a student.

3. Absences/Attendance Lab:

Lab time and hands-on practice are critical for your success and patient safety in the clinic. Therefore, you must attend and participate in all lab classes. If for some reason you must miss a lab please call the instructor **PRIOR** to the beginning of lab to report absence. If the call is not received prior to the start of lab, the absence will be considered unexcused regardless of the cause. Students are expected to be in lab each unexcused absences will result in a 20 point deduction. Excused absences include: death in the immediate family, serious/contagious illness of the student, and statutory governmental responsibilities. This does not include minor illnesses of family members. The instructor has final determination on whether an absence will be considered excused. If it is necessary to be absent on the day of an exam, the instructor must be notified in advance Five (5) points will be deducted per day for each day which passes from the day the test was administered to the date the test is taken (points deducted from test score). If a quiz is missed, whether excused or unexcused, it will not be taken.

Lecture and Lab are considered two separate events and point deductions can be made for each absence.

4. Web Based Attendance:

Web based students must recognize that missing a lab day can be equivalent to as many as two separate lab courses and points may be deducted accordingly.

5. Virtual Learning Environment Instructions (if Required)

In the unfortunate event courses are moved to virtual learning or partial virtual learning

The following are general guidelines for appropriate student behavior and communication in the online environment. This list is not all-inclusive and is subject to change.

Virtual Classes

- Students logging into a virtual classroom using a computer/laptop/tablet must enable audio and video on the device for the class period's duration unless otherwise specified. Failure to enable audio and video for the virtual class meeting duration could result in a class absence.
- When in a virtual class, students will remain on mute unless otherwise directed by the faculty.
- Students must display their first and last name on the screen during Zoom sessions.
- Student faces must be live and visible on the computer screen at all times during lecture/classroom activities.
- Students are to dress appropriately for virtual class meetings following the same handbook guidelines for an in-person class.
- Students and faculty's virtual backgrounds should not be distracting to other students or faculty and should be well lit.
- The attendance guidelines per the individual course syllabus and Student Handbook for live and virtual class will be enforced.
- Students are to be on time for all scheduled meetings in a virtual environment and remain in class for the duration of the scheduled meeting.
- Students may not travel in a vehicle or be in any distracting environment during the virtual meeting. Doing so without having discussion/permission from the faculty before the meeting will result in the student counted as absent.
- Attendance will be taken during each class period using a method identified by the faculty to the students in the individual courses.
- Tardiness guidelines will be enforced. If tardy, the student will not be admitted to the virtual classroom until the next scheduled break in the virtual class session. Most courses allow a 10- minute break after each 50 – 60 minutes of instructional time.
- Notification of any missed class time/tardiness must be documented via email to the course faculty before class utilizing the email address(es) listed in the individual course syllabus.
- Students are to come prepared to all virtual classes. This includes, but is not limited to, having reviewed assigned materials, completed assigned readings, having note-taking materials ready, and any questions for the session prepared.
- In a virtual class, students are expected to participate as if in a standard on-ground class. Group work or other assignments may be given to improve retention of topics.

- In the event of a question, the student should raise a hand or send a message to the faculty via the chat feature. The lecture should not be interrupted. During class time, chat entries will need to be on the topic and not utilized for personal conversations.
- Students are to be respectful of all participants in the class and are to behave appropriately. Inappropriate behavior may result in removing the student from the class by the faculty, and disciplinary actions may result.
- All email communications with the faculty must be done via faculty and student MCC email accounts. Appropriate and professional language should be utilized with all communication. This includes no use of internet slang or emoji. When sending an email, students are to begin the message by addressing the faculty's name to whom the message is being sent and end with the signature of the student sending the message.

6. Extended Absence Due to Illness

In the event of extended medical illness, it is necessary for the student to take care of themselves first and foremost. If the coursework can be made up prior to the next academic semester (absence of 2 weeks or less), the faculty will attempt to work with the student to make up the material. If the absence is longer than two weeks, it may not be possible for coursework to be made up during that semester. However, the student cannot continue into the next semester until the incomplete coursework is satisfactorily completed. If completion of the coursework is not possible, the student will be asked to enter the program again the next year, beginning as a new student. For safety reasons, the student will be asked to complete all PTHA coursework, even that which has been successfully completed. In the event of extended illness during clinicals, the student may have one additional clinical arranged. All clinical work must be completed by the next academic semester. If this is not possible, for safety reasons the student will be asked to re-enter the program as a new student, completing all coursework again. Students absent due to extended medical illness require documentation of leave by their primary physician and will be asked to have a release form signed by their physician in order to return to school or clinicals.

7. Tardy Policy:

Tardiness is highly discouraged lecture and lab will begin as scheduled. Those entering late disrupt the class/delay activities. Often information must be repeated for those entering late. Therefore, one point will be deducted from overall grade for arriving late. After that, another point will be deducted for every 5 minutes tardy. A student that is not dressed appropriately will be considered tardy until clothes are changed (with point deductions following the tardiness policy). It is not the instructors' duty to remind you of your obligations to yourself and your lab partner(s). A student who does not have proper lab attire may be asked to change into a hospital gown or earn an unexcused absence as outlined in "Attendance". Failure to prepare for and participate in lab will be considered in final grade determinations.

8. Accommodations Due to Disability

The [Disability Services](#) at each college location collaborates with faculty, staff, students, and the community to promote equal access to all educational programs, classes, activities and services provided within the community college system. Students or college visitors who have a disability as defined by the Americans with Disabilities Act are eligible for services. To qualify for services students must identify themselves to [Disabilities Services](#) and provide written documentation of their disability from a qualified professional. Please apply as early as possible prior to the start of each semester so that accommodations can be arranged in a timely manner. Additional policies specific to testing can be found above in the [Testing Accommodation](#) section.

9. Privacy and Confidentiality

- a. Changing rooms are available to students for lab classes. When performing techniques which require exposure of a body part, appropriate draping techniques will be utilized. Curtained booths are available for procedures where significant exposure could occur.
- b. Students will adhere to patient* care competencies.
- c. The student will respect patient/classmate privacy and confidentiality.
- d. Student will acquire a patient's written informed consent prior to seeking participation in videotapes, slides, photos, or other projects.
- e. Faculty will acquire a student's written informed consent prior to seeking participation in videotapes, slides, photos, or other projects.
- f. Students will remove any identifying information when presenting patient case histories.
- g. Student records, including transcripts from previous colleges, will be kept in locked cabinets in the program coordinator's office.
- h. Confidential student counseling sessions will be held in a private room.
- i. Tests and grades will be returned only to the individual student.
- j. Student academic records will be provided for academic counseling purposes. Data may be collected to report information in aggregate to accrediting groups, however, no individual identifying information will be given.

* "patient" can be interpreted as patient or fellow student acting as a patient.

10. Participation Policy

In order to learn skills administered in physical therapy, students must practice the techniques many times. It is also important to feel the procedure so as to better explain to a patient what they will be experiencing. As such, there are risks of injury, however small. It is the responsibility of the student to advise the instructor of any pre-existing conditions (or contraindications) that may impact the administration of the procedure or prohibit the student from participating. At no time should a student perform or submit to a procedure that would be unsafe for him/herself or another student. Participation in laboratory classes will require the student to dress in lab clothes for exposure of treatment areas including back, legs, and shoulders. See specific course syllabi for the instructor's lab dress code.

11. Student Use of Equipment

Students will be instructed in safe use of all equipment prior to usage. Students should always check to see if equipment has been safety checked in the past year before use in the lab or on clinical rotations. Students

are expected to use the equipment as directed and return all equipment to its proper storage area. At no time should equipment be removed from the lab. Students may be able to practice on equipment during designated open lab times, however, may not use any electrical powered equipment without an instructor in the classroom or prior approval. Students should not operate any piece of equipment they have not been trained to use by MCC/PTA faculty. Students should not use equipment on anyone not enrolled in the PTA program. If a piece of equipment does not work properly it should be immediately tagged and reported to the instructor. Do not attempt to repair any equipment.

12. Dress Code**

- Students should dress in appropriate attire during class. In lecture/lab or clinical affiliation, students should refrain from wearing clothing which exposes undergarments or private body parts.
- Students should be appropriately groomed, clean, and without body odor.
- Nails should be no longer than ends of fingers. Students will not wear false nails in the lab or clinic.
- Students will be required to change into lab clothes in order to practice physical therapy procedures. Students may change behind curtained treatment areas or in the changing room. Students should store clothing in lockers provided. Student will be responsible for bringing their own locks for the lockers.
- The goal of laboratory experiences is to practice procedures and techniques critical to the function of a physical therapist assistant. It is therefore necessary for the student to wear appropriate lab attire in all labs.
 - Men: T-shirt, gym shorts, shoes and socks. *
 - Women: halter top or sport bra under a T-shirt, gym shorts, shoes and socks.*
 - Compression shorts may be worn under shorts if they can be pulled up to expose the entire leg. Special clothing may be required for some activities i.e. massage, goniometry etc and instructions will be given in advance by the instructor. Students should be dressed appropriately for lab when lab begins.
 - A student that is not dressed appropriately will be considered tardy until clothes are changed (with point deductions following the tardiness policy). It is not the instructors' duty to remind you of your obligations to yourself and your lab partner(s). A student who does not have proper lab attire may be asked to change into a hospital gown or earn an unexcused absence as outlined in "Attendance". Failure to prepare for and participate in lab will be considered in final grade determinations.
 - Check individual course syllabi for course specific lab attire.
- Students that do not come appropriately dressed to lab may be asked to wear a gown to complete activities or be considered absent.
- Participation in clinical portions of the program and participation in the profession may require the student to not have visible tattoos or piercings (other than a single piercing in each ear). If required by the facility the student will cover the tattoos and remove piercing while on the clinical site.

*Feel free to wear sweats or other appropriate clothes over lab clothes until needed.

** Exceptions can be made for medical or religious reasons. Please discuss these needs with the instructor or program coordinator prior to the beginning of the course.

13. Academic Standards

- All Physical Therapist Assistant (PTHA) courses must be completed in proper sequence with a grade of "C" or higher in each course. In addition, the student must maintain an overall grade point average of 2.0 in order to remain in the program. There is not a mechanism for students to be part time.
- All general education courses must be completed before Fall semester of the Sophomore year
- A student that has been admitted into the PTA Program that earns a grade of "D" or below (less than 75%) or a "D" in any required degree course outside of the PTA program will not be able to continue in the program and must either apply for remediation or re-apply for admittance and begin the program from the beginning. See Below for Remediation guidelines.

14. Extra Credit

While not offered in every class or on every exam, occasionally a student will have the opportunity to complete “extra credit”.

- Extra credit will be related to the material covered.
- If extra credit is offered on an exam it is added after the initial determination of whether the student scored greater than or equal to 75%. For instance, if a student earns a 74% on an exam and there were two points of extra credit making the score 76% while the final grade is greater than 75% the student would still need to retake the exam to assure competence over the material, but a 76% would be entered in the gradebook.
- If extra credit is offered outside of test taking the final grade and determination of passing the class will be determined prior to the extra credit being added to the course. Therefore, extra credit in some cases may raise a “C” to a “B” or a “B” to an “A”, but will not raise a “D” to a “C”, due to our need to assure competence over the material covered.

Remediation

- A student enrolled in the PTA program that earns a grade of “D” or below in any PTHA course, required general science course or Human Anatomy and Physiology will not be allowed to continue in the program as previously scheduled. The student who earns a single “D” will meet with the program coordinator to discuss the student’s status. If the student wishes to continue in the program he/she will present, in writing, a remediation plan outlining changes he/she will make that will bring about a different result. This plan will be presented to a Remediation Panel of three HSI/PV employees, including the PTA program coordinator. The student may choose one of the panel members and the program coordinator will choose the final member.
- A successful appeal will allow the student to return the next semester (if space is available) in whichever program, (traditional or web based) is offering the course(s) needed.
- Except in extraordinary circumstances a student that earns a grade below a “C” in a first semester PTHA course or Anatomy and Physiology would need to re-apply to the program and start over in a new cohort.
- The result of the remediation panel will at minimum require the student to re-take the course the “D” was earned in and any courses with a lab regardless of the grade earned in that course. If the remediation semester involves a clinical course the clinical will be repeated unless otherwise arranged. A student that remediates will no longer be in their original cohort and will join the cohort that is in the semester the course is needed. The student will remain in that cohort for the rest of their schooling. An unsatisfactory plan will result in the student being asked to re-apply to the program and begin as a new student.
- If there are more students applying for space than there is available space the decision will be based on: quality of the remediation plan, changes made by the student in the semester in which they earned a “D”; GPA, and overall course performance. In the case of limited space a student may not be offered a position or may be offered an opportunity to restart the program and at minimum retaking all lab course work, clinicals and the course not passed.
- A student that has earned two or more “D’s” or an “F” that would like to re-enter the program will be required to reapply and undergo the admissions process. If accepted into the program, the student would be considered a new student at that point, and would be required to take all coursework, including that which had previously been successfully completed.
- A student may not apply for admission to the program a third time if dismissed due to grades.

- A student must earn a 75% in both the lab portion and the lecture portions of the course to earn an acceptable grade for the course. If both scores meet the minimum competency level (75%), the final grade will be determined through calculation of points reflecting both lecture and lab. If the grade in either the lab or lecture is less than 75%, the final grade will be “D” or “F” depending on points earned.
- Any student earning a grade of 75% or below on any written examination will be required to repeat that examination in order to verify minimum knowledge level within one week of the posted test score. If the student does not complete this repeat examination within one week, the instructor reserves the right to counsel the student and require remediation in another manner.
- Any student earning lower than a 80% on any practical examination or competency check, or failing to complete the practical/competency check without completing critical safety errors will be required to complete the practical/competency check again until competent. If the student fails the practical/competency check the second time, an additional 25% will be deducted from the original score. Failure to complete the practical examination on the third attempt, will result in a grade of 0 being recorded for the practical/competency check. The student must continue to remediate the content area and demonstrate competency or the student will be given an incomplete for the course and not be allowed to continue in the program until complete.
- **Any student earning a grade below 75% on a final examination will be given an incomplete and will be required to retake the final with initial score remaining in the grade book. Only upon satisfactory completion of the final examination will students be allowed to continue to the next semester and the grade of “incomplete” changed.**
- A student earning a grade of "D" or below in any clinical setting will be required to repeat that section at a time and clinical site determined by the Academic Coordinator of Clinical Education. A student who earns a second grade of "D" or "F" for a clinical rotation will be dismissed from the program.
- If a student has earned a "C" or better in all PTHA and required Biology coursework, but the overall GPA drops below 2.0, the student will be placed on academic probation the following semester. If the GPA remains below 2.0 at the end of the semester, the student may be dropped from the program.
- Students will follow the guidelines of professional and ethical conduct as outlined by the American Physical Therapy Association. A student may be dismissed from the program for violation of these guidelines. (See Student Counseling Form.)
- All students will self-evaluate on performance and professional qualities and be given feedback by program faculty. (Student Self Evaluation). Students will be required to update a portfolio each semester. Failure to do so will result in an incomplete given for the course until portfolio completion.

15. Grading Scale

1. The instructor reserves the right to exercise professional judgment as to whether a student passes a course satisfactorily.
2. The number of examinations quizzes and laboratory checkouts/practicals vary within each class. The requirement will be outlined during the orientation for each individual class.
3. For PTHA courses with both laboratory and lecture portions, lecture and lab grades will be calculated separately. The student must earn a minimum of 75 % in the lab (application) portion and 75 % in the lecture (theory) portion to earn an acceptable grade for the course. If both scores meet the minimum competency level (75 %), the final grade will be determined through calculation of points reflecting both lecture and lab. If the grade in either the lab or lecture portion is less than 75%, the final grade will be "D" or "F" depending on points earned.
4. Grading scale:

92-100	A
84-91	B
75-83	C
66-74	D

Below 65 F

5. In the event that an individual does not pass a final, that individual must re-take that exam prior to the next academic semester.

16. Methods of Communication of Student Progress

- Students are encouraged to meet with instructors during office hours regarding anything which impacts their academic progress
- Faculty routinely utilize email for communication
- Scores for examinations and quizzes are posted to Canvas for access by individuals only. Students should go to <http://bboard.mcckc.edu>
- Each course will schedule written examinations. After exams the instructor will be available for review and to answer questions.
- Each student will complete 30-40 individual competency checks throughout the program. (Those listed on the sheet-Outcomes Assessment Plan). The student will be given feedback on their performance on the competency check or practical. Students earning lower than 80% on a competency will be asked to repeat the practical until deemed competent. The student should keep a record of the date each individual competency exam was completed to be filed in their student portfolio.
- Each student will complete a written examination to review for clinicals and a written program examination at the end of program and pass with a score of 80%.
- Each student will be assigned a PTA program faculty advisor. The faculty will meet with the student as the student needs. Each semester during the curriculum, the student and faculty will complete the form Student Performance Report. The faculty advisor and student will discuss the form which will be placed in the student's file.
- If problems due to student behavior should arise, the faculty will meet with the student individually, discussing the problem at hand. The conference may be documented in the Student Conference form and placed in the student's file. Specific plans for improvement will be included in the discussion. Further discussion may involve the Director of the Health Science Institute and may result in dismissal from the program if appropriate.
- Student-clinical instructor communication is on-going during clinical rotations. Formal evaluation of the student on a written evaluation form will take place at mid-term and at the end of the clinical. In the event of student-clinical instructor conflict, the student should first attempt to talk with the clinical instructor about the problem. If this step is unproductive, the student should contact the Academic Coordinator of Clinical Education at MCC-Penn Valley.
- If the student's clinical instructor believes the student is performing below the expected level of performance, the CI should first talk with the student individually. If this communication is unproductive, the CI should contact the ACCE. The ACCE will then work with the student and CI to establish goals for the remainder of the clinical rotation.
- If the student fails a clinical rotation secondary to performance problems, the student will be asked to repeat the clinical at a different facility at a time and place determined by the ACCE. A conference will be held with the student to outline goals for the clinical. If the student fails an additional clinical, they will be dismissed from the program.

17. Student Portfolio Policy

Metropolitan Community College-PV-HSI Physical Therapist Assistant Program Student Portfolio Policy

1. Each student must complete a student portfolio to be eligible for graduation.
2. The student should acquire a notebook for the student portfolio.
3. Written examinations and graded competency checks and/or practical examinations should be filed in the

portfolio as they are completed. The student should highlight areas for improvement on the examination and identify a specific time frame and course of action to learn the areas of deficiency.

4. At the mid-term of second semester, the student will complete the Student Self Evaluation/Mid-Term Conference Form.
5. The student will meet with a faculty advisor to discuss the Self-Evaluation/Mid-term Conference Form. The student should bring the completed form and portfolio to the conference. If the student brings an incomplete form to the conference or fails to bring the portfolio, they will be asked to reschedule the meeting.
6. During the conference, the student will review the self-evaluation and discuss any plans for improvement.
7. The faculty advisory will counsel the student on any areas that have not been addressed and approve or make suggestions for any plan for improvement.
8. The student Self-Evaluation should be filed in the student portfolio.
9. At the end of the semester, the student must present the portfolio to an assigned instructor, allowing the instructor to review the portfolio of completeness in that particular course. Failure to do so will result in the student earning a grade of "I" incomplete in the designated course until complete.
10. The portfolio also includes requirements for:
 - a. attendance at a continuing education workshop of approximately 4 hours (student will provide verification of attendance as well as write a one page summary of the course)
 - b. participation in one community service activity of approximately 4 hours (student will provide verification of participation as well write a one page summary of the event)
 - c. participation in an activity to promote physical therapy or health (student will provide verification of participation)
11. The completed portfolio must be presented during the final didactic semester of the program to the program coordinator or ACCE. The student will receive a grade of "I" incomplete in the course Clinical Seminar until complete.

18. Retention

Metropolitan Community College-PV-HSI Physical Therapist Assistant Program Retention Goals and Policies

1. The goal class size is approximately 22 students for land based fall admission and approximately 14 students for the web based spring admission of diverse backgrounds.
2. Policies associated with student application and acceptance is effective in admitting those that have the best chance of success based on historical evidence.
3. Program policies are effective in minimizing attrition and supporting student success. These policies include:
 - a. Clearly delineating program expectations through printed materials, the application process and at orientation through use of the student handbook.
 - b. A mechanism for tracking "at-risk" students with supportive interventions

Inclusion criteria for designation of “at-risk” status

- Students admitted to the program with a GPA equal to or lower than 2.75
- Students admitted to the program with history of repeated coursework in one or more program prerequisites due to grades
- Students who earn two or more grades of 75% or lower on written examinations in any semester
- Students who are required to retake two or more practicals in any semester
- Students with GPA that drops below 2.0
- Students, who faculty has identified as potential “at-risk” students due to, but not limited to: generic abilities, writing skills, unprofessional behaviors, test taking anxiety, etc.

Process of supportive intervention:

1. Students identified as at-risk students upon acceptance will be admitted provisionally and required to complete the processes identified below as a condition of acceptance.
2. Student will be asked to meet with faculty. A plan will be discussed and put into writing by the student and signed by the faculty.

The plan may include:

- a. Mandatory meeting with the course instructor in which they earned the exam grade of 75% or lower and/or failed practical
 - b. Formulating a written plan of action that specifies how the student will achieve minimum competency
 - c. Student utilization of college resources such as the Early Alert program, Counseling Center or Access Office.
 - d. Daily journal of study habits
3. Student will meet with a designated faculty advisor monthly
 4. The student’s at-risk status will be re-evaluated at the end of the semester to determine the need for continued intervention.
- c. Clearly communicating to students how to achieve competency:
1. Written objectives in courses
 2. Grading rubrics for competency checks and practical examinations with critical errors identified
 3. Processes for remediation of material:
 - a. Students earning lower than 75% on any examination must repeat the examination until 75% minimum achieved
 - 31
 - b. Students earning lower than 80% on a practical/competency and/or with critical errors must repeat the practical/competency until competent (with point deductions for subsequent retakes)
4. Clearly delineated performance expectations for the course
- a. 75% grade in both lecture and laboratory portions for the course for the student to continue in the program.
 - b. Attendance expectations
- d. A student portfolio policy that requires students to provide evidence of competency and perform self-evaluations twice during the semester (See student portfolio policy). The self-evaluation requires students to evaluate knowledge and competency, generic abilities as well provide evidence of demonstration of core values.
- e. A curriculum design that reinforces learning of material through use of material concurrently and in subsequent semesters.

- f. Providing clinical instructors information about student expectations for clinical experiences through the Clinical Education Manual and the PTA On-line Clinical Group.
- g. Encouraging clinical instructors to provide formative and summative feedback throughout the clinical experience and notify the ACCE early if issues exist. At that point, a meeting with the ACCE, student and CI may be scheduled to outline specific goal expectations for the student
- h. A policy for remediation of clinicals - if a student fails a clinical due to performance issues, it is the policy of the program that the ACCE will arrange a remediation clinical unless circumstances warranting the failure were so severe that remediation is inappropriate. Specific goals for the clinical would be addressed at the time with the student in writing. If the student failed a second clinical, the student would not be allowed to continue in the program.
- i. A policy for student right to appeal through the policy of student grievance and due process.

19. Grounds for Counseling and Dismissal from Program

A student may be counseled on any of the following behaviors and documented on the Student Conference form. If after counseling, the behavior or problem continues, the student may be formally dismissed from the program. Some circumstances may warrant immediate dismissal from the program. In such circumstances, the program faculty will make such determination after consultation with college administration.

Circumstances warranting counseling and/or dismissal from the program:

- Academic dishonesty
- Habitual absence or excessive tardiness
- Unprofessional, unethical or illegal conduct
- Refusal to comply with Physical Therapist Assistant Program policies
- Breach of rules or regulations of the student's assigned clinical education site
- Unsafe practice and/or repeated failure to demonstrate competency
- Sexual harassment of other students, faculty or clinical faculty
- Purposeful destruction or theft of college or clinic property
- Reporting to class or clinic under the influence of alcohol and/or controlled substances
- Insubordination
- Disruptive behavior in class or clinic
- A felony conviction while in the program

20. Student Grievance and Due Process

If a student has a concern about classroom issues, the student should first make an appointment with the instructor to discuss their concerns. The faculty believes that an extremely important skill in health care is to work

towards resolving issues directly with interested parties in a productive manner. If this is believed to be unproductive, the student should make an appointment to speak with the program coordinator. If this is unproductive the student will meet with the Dean of Allied Health and Simulation, who will attempt to resolve the issue, but may call for a meeting between the student and faculty member for resolution. If the student believes that the issue has not been adequately resolved to their satisfaction, the student should make an appointment with the Dean of Health Science, to discuss the situation. Program issues other than instruction should be directed to the Program Coordinator, Dr. Randy Leighton. Copies of program complaints will be maintained in the program office and are subject to review upon request. If issues cannot be solved in this manner, the student should proceed next to the Dean of Allied Health and Simulation and then Dean of Instruction. The Dean of Instruction may arrange for a meeting between the two parties to mediate the disagreement. If warranted and under the discretion of the Dean of Instruction, a grievance committee may be convened to hear testimony from both parties and a final recommendation for resolution made.

On-line Resources

Canvas is currently in use for all courses. This enables an instructor to post handouts, web sites, practice quizzes, and current grades for students to access with proper ID and password. Students will not share their login information or password with anyone.

Instructions for logging on are posted on MCC's distance education site at <http://www.mcckc.edu>

Program Learning Resources

Students are encouraged to use all videotapes, texts, written materials and computers for supplemental classroom study. Students are not allowed to remove materials from the classroom. Additional learning resources are located in the Health Resource Center.

Field Trips

Field trips to area clinical facilities will be scheduled in order to expose students to content otherwise not available. Students will be expected to arrange for their own transportation to the facility. Any injury occurring during transportation or at the site will be the sole responsibility of the student. Students will be asked to sign a waiver prior to participation in field trips. In addition, students will be required to have knowledge of safety procedures for the facility. See addendum for field trip forms.

Evaluation of Instruction

The college has a schedule of evaluating instructors for effectiveness that involves another instructor reviewing a lecture and asking students to formally evaluate a particular class. Students are encouraged to evaluate instructors in a fair, unbiased manner, given specific attention to making suggestions for improvement in a tactful way where warranted.

Program Plan for Quality Improvement

The program faculty value continued quality improvement. As such, the program has a quality improvement plan in which data is collected from various sources and results in strategic planning. As part of the quality improvement plan, students comments are used to improve the program from the following sources: Student Evaluations of Instruction, Input from Student Advisory Group, Student Evaluation of Clinical Education Forms, Graduate Surveys, Suggestions and Complaints, etc (See Addendum)

Withdrawals

Students are responsible for officially withdrawing from classes they do not plan to complete. If you stop attending a class but remain on the class roster, you may receive an "F" in the class. If you receive federal or state financial aid, you may also be required to repay those benefits. Students may drop a class through their [myMCCKC](#) student center or by visiting with an advisor. Dropping a class through the first 25% of the class removes it from the official transcript. During the 26%-60% timeframe, dropping a class will result in a grade of "W" on the transcript. During the last 40% of a class, students will receive a grade for their academic progress. Students who stop attending class during this time period could fall below satisfactory academic standards and therefore receive a failing grade. Instructors are not required to withdraw you or to change a grade of "F" if you fail to assume this responsibility. Withdrawal forms are available through an academic advisor or from the Records Office.

Electronics:

Use of laptops and any other electronic device in classroom will be at the instructor's discretion. It is distracting to other students if you are doing non-course related activities either on or off the computer and you may be counted absent that day. The use of cellular telephones, pagers, or any audible signaling devices in classrooms and areas designated for studying, such as the library, learning center, testing center or laboratories, is strictly prohibited. Students using such devices may be subject to disciplinary action. You may be asked to leave class if you are being a disruption. If there is an urgent need for you to monitor your phone you must discuss this with the instructor prior to the beginning of class.

Children on Campus

MCC provides environments that promote learning for students who are enrolled. Classroom, studio, library, and laboratory environments are not appropriate places for children. The campuses are also places of easy access to the public and do not have resources to protect unsupervised children, which could place your child at risk. Therefore, students are prohibited from leaving a child unattended at any college facility. Unattended children will be reported to the Public Safety Office and the parent/guardian responsible could face disciplinary action.

Lactation Room

The PTA program faculty are supportive of parents and lactation needs. All campuses including the HSI have lactation rooms available to students to nurse or pump. At the HSI it is in room 408 Y. To arrange for access please speak with the administrative assistant at the front desk of the nursing department located in 408. If you are unable to reach the Nursing Admin please contact any PTA instructor for access. The room includes a small refrigerator for storage. For other MCC locations please check <https://mcckc.edu/student-resources/index.aspx#lactation> . If your schedule will interfere with attending class or lab please meet with your instructors individually to address conflicts.

V. Health and Safety

A. *Classroom Policies*

1. While a student in the program, students understand that they will be practicing techniques on each other in order to become competent in those skills. Students should refrain from coming to class when an illness may be contagious or endanger the health or safety of the student or other students. Students may be asked to get a doctor's release (see appendix) prior to participation in classroom activities if the health and safety of the student or other students is in question.
2. A Each floor has a map posted indicating routes to safety. General safety will be discussed in PTHA 152 during the first lab.
Material Safety Data Sheets are housed in a notebook by the door in lab 313 and 314 of the HSI in case of exposure.
3. Students will be given an orientation to emergency evacuation procedures once in the program as a part of lab orientation.

Accident procedures.

- a. If the incident is serious, call 911 first and then the campus security office at 604-1111. If the injury is not serious, take appropriate first aid measures and medical follow-up. The student is responsible for the cost of all medical treatment.
- b. Complete an incident report (see appendix)
5. If a student needs to be contacted due to emergency away from school, the security office should be contacted at 604-1111. Please provide this number to family members.
6. Equipment is safety checked by an outside vendor on an annual basis, however, if students note that a piece of equipment is functioning improperly, it should be immediately set aside, labeled, and the instructor notified.
7. Students will be instructed on safe application of all equipment, contraindications, precautions and methods of reducing transmission risks of communicable diseases and will be expected to adhere to this knowledge during lab procedures. A student should advise the instructor of any conditions that may need special consideration during lab participation in order to assure student safety. Such information given in confidentiality will be kept confidential.
8. Students will practice procedures with safety being of greatest concern.
9. Students should be familiar with the location of security services on the first floor of the Campus Center (CC) building, phone number 604-1111.
10. Students should not be using equipment they have not been trained on.
11. Students should not be practicing techniques or using program equipment with students that are not enrolled in the program.

B. *Substance Abuse Policy*

Metropolitan Community College-PV-HSI is committed to maintaining high standards of physical therapist assistant education and practice. Safe practice includes efficient, reliable and unimpaired performance in the clinical setting. Students are expected to perform physical therapy activities without the use of any chemical substance that could alter or impair thinking. These chemical substances may be alcohol or illicitly obtained drugs. Students who are

taking prescribed medications are expected to submit a written statement from the attending physician prior to the first day of each clinical to be included in their record.

It is the responsibility of Physical Therapist Assistant faculty to observe student behaviors which could threaten the safety and well-being of patients/clients. Reasonable suspicion that a student is impaired will be documented by the observing faculty member, or a licensed or certified professional at the clinical facility where the student is assigned. Whenever possible, such observation shall be corroborated.

In the classroom

When an instructor has reason to suspect that one of the students is under the influence of alcohol, narcotics, or controlled drugs, the student's behavior should be verified with the Program Coordinator or designated alternate to determine what action should be taken and a Student Conference Form initiated. The student will be given opportunity to discuss the suspicious behavior with the person(s) who witnessed the behavior. It is the student's responsibility to disclose any prescription or non-prescription medications that the student is taking as well as any other relevant medical information. If evidence warrants, the student will be asked to leave classes for the day. Further episodes of substance abuse will result in dismissal from the program. If on the other hand, behavior is disruptive, security will be called and the student will be immediately dismissed from the program.

In the Clinic

A clinical site may request a drug screen prior to clinical rotation as a condition of completing the clinical rotation at that site. Students may be required to bear the cost for the drug screen.

When a clinical instructor has reason to suspect that a student is under the influence of alcohol, narcotics, controlled drugs, the clinical instructor should call the ACCE or Program Coordinator at MCC-PV. If the supervising therapist/assistant instructor determines unsafe behavior is a possibility, the student should be removed from patient care responsibilities. The student should be given the opportunity to discuss the situation. It is the student's responsibility to disclose any prescription and non-prescription medication that he/she might be taking and circumstances documented along with student comments. If in accordance with hospital or facility policy, a laboratory test is necessary for drug screening, the student must submit to the test and is responsible for the cost of the lab work. Refusal to submit to the testing will be considered failure to follow hospital policy and may result in dismissal from the clinical with student earning a failing grade for the clinical. If the drug screening is positive, disciplinary action may include warning, mandatory counseling, dismissal from the clinical or dismissal from the program.

c. Student Insurance

During the three (3) semesters of clinical experience, the student is required to purchase professional liability insurance through the MCC-Penn Valley Community College Cashier's Office. This is to be done during enrollment and is included in your enrollment fee.

Student health insurance is not provided through the college and is the sole responsibility of the student to acquire through other sources. The student will show proof of health insurance prior to clinical affiliations. or sign a waiver. Insurance can be acquired through the American Physical Therapy Association (APTA) for student members

d. CPR and First Aid

Each student must provide evidence of CPR certification prior to clinical rotation. The class, Basic Emergency Patient Care, is scheduled during the second semester for PTA students in the first and third weeks and will be completed at the HSI for both traditional and web-based programs.

VI. Clinical Education

A. *Course Descriptions*

Clinical Immersion

During the second semester, the student will complete no less than 40 hours or its equivalent of clinical work/observation/simulation.

Clinical Education I

During the third semester, classes will run for approximately 8 weeks. Students will then break for three weeks of clinical rotations and return to complete the rest of the didactic semester.

Clinical Education II

During the final semester, all students will go out on clinical rotations for two 7 week clinicals

B. *Policies*

1. **Guidelines for Participation in Clinical Rotations**

a. Academic requirements

Students must pass all previous physical therapy and biology coursework with a grade of C or better to be eligible for clinical rotations.

b. Competency checks with a minimum grade of 80%

Core competencies will be tested using practical examinations prior to clinical rotations in the classroom setting. All students must complete each skill with a score of 80% or greater to be eligible to participate in clinical rotations with no safety errors.

c. Successful completion of the following examinations: Fire safety, HIPAA, standard precautions

d. Successful completion of any required clinical review quizzes or pre-clinical competency tests with minimum grade 80%.

e. CPR certification

Students enroll in the course EMS 100 that is offered during two consecutive Fridays during the second semester. Students will be certified in CPR by EMS-Paramedic faculty upon successful completion of written and practical examinations.

f. Physical Examination and Vaccinations Declaration (See Allied Health Vaccinations and Titer Requirements.

Each student must complete a physical examination prior to the start of clinicals. The physical must be performed utilizing the standardized form in this manual. The student must keep this form and is responsible for revealing to the clinical instructor any limitations that the student may have as a result of the findings of the physical examination.

3. A facility may require immunizations in addition to those required by MCC prior to accepting a student for clinicals. The student will be responsible for any costs associated with obtaining required immunizations.

4. Any health condition which could potentially affect the safety and well-being of the student or others must be disclosed by the student to the clinical instructor and the ACCE at the beginning of the clinical.

5. The student must maintain up to date health records. Changes in medical condition that could impact the ability of the student to complete clinical rotations or participate in class/labs must be reported immediately. Failure to do so may result in dismissal from the program.

6. Misrepresentation of medical status may result in dismissal from the program.

7. All students must sign the Vaccination Declarations sheet.

8. All students must sign the Informed Consent Sheet regarding Clinical Rotations

Criminal Background Check (CBC) and Family Care Safety Registry (FCSR):

See policy directions below.

1. **Drug and Alcohol Screening**
As a requirement for completing a clinical rotation at certain clinical sites, the facility may require a drug test. The student will be responsible for the cost of the laboratory work. Failure to complete this screening or a failed screening will result in dismissal from the program.
2. **Two step TB test**
Students will be required to have a TB test on an annual basis prior to beginning of clinicals. Students will be responsible for the cost of this test.
3. Students will be responsible for verification of chicken pox immunization or chicken pox titer.

c. Health and Safety

Students should understand that while completing clinical rotations, there is some risk of injury or contracting an illness. The student will be taught how to reduce likelihood of injury or illness while in the program, prior to clinical rotations. The student is advised to acquire the Hepatitis B vaccination series, but may decline to do so. Any student that is exposed to a blood borne disease such as Hepatitis B or is advised to sanitize the area immediately & then go immediately to the ER for prophylactic treatment. Each facility should have a written protocol to follow in such instances. Injuries sustained while on clinical rotations are the financial responsibility of the student's health insurance unless negligence is determined by the clinical site. In addition, prior to clinical rotations, students required to have a physical examination completed to determine fitness to perform the duties required. The physical examination will be performed using a standardized form found in the appendix. In addition, a record vaccinations, TB test, criminal background check, completed Hepatitis B vaccination declaration form, and Clinical Experience Informed Consent Form must be signed.(See addendum)

As part of their educational program, Allied Health and Nursing students must demonstrate proficiency and competency in clinical activities to complete the program. The types and level of required competencies varies with each program and within each course and is most often determined by the standards of the program's accrediting body.

Each Allied Health and Nursing program has identified technical performance standards and/or essential functions based on the same functions associated with a career in the profession and should be considered by prospective students when determining whether they will be able to successfully complete the program. These functions are also required for the student to successfully demonstrate clinical competence.

It is the policy of MCC-Penn Valley to provide reasonable accommodations for individuals with disabilities or those individuals who have experienced a temporary loss of ability due to an illness, injury, or accident. It is the responsibility of the student to reveal any disability or condition which might be problematic or require reasonable accommodations to the Access Office. The Access Office will assess each situation on a case by case basis to determine what reasonable accommodations can be done within the requirement of completing course competencies. If it is determined that the reasonable accommodations cannot be made, the student will be notified that his/her participation in the clinical training may be delayed until such time he/she can pass all course competencies.

Any Allied Health or Nursing student with an infectious disease or communicable disease that cannot be contained (such as fever, secretions, or airborne pathogens) may not be permitted to participate in a clinical rotation. The determination of whether a student should be excluded from participation shall be made on a case by case basis in consultation with the student's physician and the appropriate college official. A physician's note provided to the program faculty may be required for continued placement in clinical training.

D. Assignment to Clinical Rotations

Clinical assignments are made by faculty and are primarily based on student's educational needs and availability. The ACCE coordinates clinical education to provide a variety of experiences. Consideration is also given to location when possible. The student may not complete a clinical where they are currently or have been previously employed in the Physical Therapy Department. A student should present in writing any special requests for clinicals to the ACCE for consideration. Information about the current clinical sites is on file in the ACCE's office. A student may wish to affiliate with a site not currently utilized. The ACCE will provide information regarding the correct procedure to follow to assist in this regard. The process for acquiring a new clinical site is a lengthy one and requires ample lead time. Students should not reach out to potential clinical sites without first contacting the ACCE for guidance.

1. Transportation and Housing

Students may be required to drive within a 70 mile radius or be placed at a clinical site out of town if needed. Students are responsible for transportation to and from the clinical site. Although many sites are within a 70 mile radius, out of town placement may be necessary. The student will bear all expenses associated with placement (i.e. housing, meals, and transportation). The majority of MCC's clinical sites are in the Greater Kansas City area. If you are a student traveling a long distance to attend the program you may be expected to have most or all of your clinicals in the Greater Kansas City area. We cannot guarantee placement within 70 miles of your home if you live outside the Greater Kansas City.

2. Dress Code

Students are to be dressed in a professional manner. Students may be required to purchase a white lab jacket or scrubs and must wear either a name tag provided by the clinical site or their MCC student ID badge while in the clinic. Specific instructions will be given by the ACCE. Students will dress according to the dress code at the individual facility. However, the student will be expected to:

- a. dress conservatively, without exposure of under garments or private body areas.
- b. refrain from wearing excessive jewelry
- c. refrain from wearing visible body piercing other than earlobes
- d. cover tattoos if required.
- e. be neat, clean, and free of odor
- f. wear non-skid shoes
- g. refrain from wearing colognes, perfumes or other scents.
- h. to wear their hair as a natural color.
- i. to wear long hair pulled back and secured.

3. Attendance

Clinical absences must be made up promptly. One (1) hour is made up for each hour missed. The date and time of a clinical make-up will be determined by the clinical instructor at that facility and the ACCE and may require a Saturday or Sunday. If you are going to be absent from a clinical (part or all day), you must notify the clinical instructor at the facility and the programs ACCE, Samantha Satterfield (816-604-4909) prior to the clinical. If you are going to be tardy, you must also notify the clinical instructor and Samantha Satterfield. Failure to call the facility or ACCE in a reasonable time frame will be reflected in the student's clinical grade. (See clinical guidelines provided by the ACCE in Clinical Experience syllabi).

4. Course Outcomes and Objectives

Students will be provided a course syllabus prior to clinical rotations which will outline objectives, assignments, clinical performance assessment and other policies regarding attendance, etc.

5. Patient Confidentiality

Students are required to successfully complete a HIPAA written examination prior to clinicals and sign a confidentiality statement prior to clinicals (found in Appendix)

6. Clinical Performance Assessment

Students will be evaluated on their clinical performance by the Clinical Instructor at the assigned facility using an assessment tool provided by the school. In addition to on-going feedback, the student will be provided a formal mid-term evaluation using the assessment tool and a final evaluation at the clinical's end. The final grade determination will be made the ACCE at the school after reviewing the scored performance evaluation, communication with the clinical instructor and student as well as other assignments.

7. Communication

Each student will be visited during at least one clinical. Each facility will be phoned during each clinical rotation. Students will be required to email the ACCE on a weekly basis during full time clinicals to keep the ACCE informed.

8. Clinical Remediation

Student performance standards will be discussed and are included in the syllabus for each clinical course. Students must achieve these performance standards in the following areas in order to successfully complete the Course.

Cognitive: Implementation of Program, Physical Therapy Skills

Psychomotor: Communication, Implementation of Program, Personal and Professional Qualities, Ethical and Professional Responsibilities, Administration of Physical Therapy Skills

Affective: Communication, Interpersonal Relationships, Personal and Professional Qualities, Ethical and Professional Responsibilities, Administration

If a student is not meeting performance standards, the clinical instructor is asked to meet with the student to establish measurable goals and assure that expectations are understood. If the student continues to perform below the expected level for the clinical rotation, the clinical coordinator is asked to contact the ACCE at the school in order to discuss the situation. The ACCE may schedule a visit to discuss the situation with the student and clinical instructor, making sure that specific goals for performance are addressed. If at the end of the clinical rotation, the student has not achieved the goals for the clinical rotation, remediation will be necessary. This will require additional clinical time at the site or different site, arranged according to clinical availability. The student is allowed one remediation clinical while in the program. If the student fails a second clinical rotation, the student would not be able to continue in the program at that time.

9. Student Evaluation of Clinical Facility

In order to assure effectiveness in the clinical education program, students are required to evaluate the clinical facility at mid-term of the clinical and mail the form to the ACCE, so that any problems can be addressed while the student is on the clinical. Students are also required to complete an evaluation of the clinical facility at the end of the clinical that must be shared with the clinical coordinator of the facility

10. Student Evaluation of Clinical Education Program

Students will be asked to give input regarding the clinical education through informal talks, Student Evaluation of the Clinical Facility, and at the end of the program using the form Evaluation of the Clinical Education Program.

VII. Additional Information

A. Student Representatives

Each class elects officers for the class to conduct various extracurricular activities. As part of the Physical Therapist Assistant Club. Elections for class officers takes place during the first academic semester.

B. Membership in APTA

Students are encouraged to join the American Physical Therapy Association to support the activities of the Association.

C. Licensure

Upon graduation from the PTA program, students will be eligible to sit for the licensure examination in any state. A speaker will provide information on how to apply for licensure.

D. Program Retention Rates

Over the three year period above, approximately 87% of individuals entering the program successfully complete the program over two years. Failure to complete the program is generally due to personal reasons (60%) and failure to meet academic standards in the first two semesters (approximately 40%).

VIII. APPENDIX

**METROPOLITAN COMMUNITY COLLEGE-PV-HSI
PHYSICAL THERAPIST ASSISTANT PROGRAM
PERFORMANCE STANDARDS FOR
PHYSICAL THERAPIST ASSISTANT STUDENTS**

A. *Performance Standards*

Student Responsibilities:

Applicants to this program should be aware of the technical standards required for completion of this program. These performance standards are provided to prospective students to assist them in determining whether they will be able to successfully complete the program. It is the policy of MCC-PV-HSI to provide reasonable accommodations for individuals with disabilities. If you need an accommodation due to a disability under the Americans with Disabilities Act, please contact the Access Resource Coordinator at 816-604-4089 or visit the MCC website at www.mcckc.edu/access.html. Two to six weeks advance notice is required for some accommodations.

Upon completion of the Associate Degree in Applied Science in Physical Therapy, the graduate will have met the following standards:

1. Completion of an academically rigorous program, requiring a minimum grade of 75% in both laboratory and lecture components of each course.
2. Achieved competency of 80% or above in lab competency checks and practical examinations without critical safety errors.

ABILITY	STANDARD	SOME EXAMPLES OF NECESSARY ACTIVITIES
Mobility and Dexterity	Physical ability and fine motor skills to provide safe and effective patient treatment.	<ul style="list-style-type: none"> ● Assist clients in activities of daily living including bed mobility, transferring from one surface to another and walking with and without assistive devices on levels or stairs using minimum, moderate and maximum assistance. Transport clients in wheelchairs ● Physically assist clients in exercise programs. ● Apply modalities, therapeutic exercise equipment, prosthetics and braces. ● Perform manual techniques such as manual resistance, passive range of motion, massage, CPR, debride and bandage wounds. ● Use instruments such as goniometers, strength gauges. ● Complete clinical rotations for 8 hours/day, 40 hours/week.

Sensory Ability	Sensory ability sufficient to monitor client status and use equipment in order to administer safe and effective patient treatments	<ul style="list-style-type: none"> ● Detect and respond to monitoring alarms, client's and other health professionals communications. ● Read dials and monitor equipment, interpret facial expressions, assess the environment, and observe changes in patient status that require attention. ● Detect patient physical structure and function abnormalities.
Critical Thinking	Cognitive ability to demonstrate effective problem solving skills and clinical judgment.	<ul style="list-style-type: none"> ● Prioritize tasks and make appropriate decisions related to situations ● Identify cause-effect relationship to apply safe and effective intervention strategies within the physical therapy plan of care ● Apply information in classroom to clinical setting, adapting the treatment as needed ● Effectively manage time
Interpersonal Skills	Interpersonal abilities to interact with clients, families, groups, team members from a variety of social, emotional, cultural, and intellectual backgrounds.	<ul style="list-style-type: none"> ● Establish rapport and maintain professional relationships with clients/families and colleagues that optimizes treatment effectiveness
Communication	Communication abilities for interaction with others orally and in writing	<ul style="list-style-type: none"> ● Comprehend instructions and written documentation ● Instruct client/family ● Document progress notes ● Communication with supervising physical therapist and others

Professional Behavior	Behavior consistent with the standards and core values of the physical therapy profession.	<ul style="list-style-type: none"> ● Regular attendance and timeliness ● Ability to self assess and implement self improvement strategies ● Attendance at one continuing education meeting ● Completion of one activity to increase public awareness of physical therapy and/or health ● Participation in one community service activity.
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Candidates for the Physical Therapist Assistant Program are required to certify that these standards have been provided to them.

Name (please print): _____

Signature: _____

Date: _____



Physical Therapist Assistant

**Drug-Free Workplace, Campus and Community
Drug Screen Policy**

B. Drug Screen Policy

MCC – PV-HSI is committed to maintaining high standards in all programs including allied health and nursing education and practice. Safe practice includes efficient, reliable, and unimpaired student performance at all times including in the classroom and in a clinical setting. Being under the influence of drugs or alcohol poses serious safety and health risks not only to the user but also to all persons who come in contact with the user. Students are required to perform all education related activities in appropriate mental and physical condition

MCC-PV-HSI has adopted the Federal Drug-Free Workplace Act of 1988 and Drug-Free Schools and Communities Act Amendments of 1989. The policy is one of zero tolerance. Together with the college’s Drug-Free policy, the Code of Student Conduct imposes prohibited conduct and possible disciplinary action. If in violation of these policies, students subject themselves to disciplinary actions up to and including suspension or expulsion from the college and its programs.

Clinical facilities are committed to providing a safe environment in order to protect its patients, residents, employees and visitors; to provide the highest level of service; and to minimize the potential for accidents and injuries. Therefore, many of the clinical contracts between MCC – PV/HSI and hospitals, clinics, and other facilities have a component requiring drug screening for allied health and/or nursing students. MCC – PV/HSI allied health and/or nursing student will complete and pass a drug screen prior to being allowed to begin any clinical work. The screen will be at the students’ expense at facility named by MCC-PV/HSI. Refusal to submit to a drug screen or testing positive will make a student ineligible to participate in clinical training.

A student that demonstrates physical or behavioral signs that would suggest they are impaired in the class or lab can be required to submit to random drug testing at the students’ expense as noted above. A positive drug test will result in dismissal from the program. The student may apply for re-admittance to the program, but will be treated as a new student. After a second drug related dismissal the student may not apply again.

<https://mcckc.edu/financial-aid/responsibilities.aspx>

I have read, understand and agree to abide by this policy.

Name (please print): _____
Student Signature

Date



Physical Therapist Assistant

c. *Student Confidentiality Statement*

Objective: To preserve the medical record and hold inviolate the privileged contents of the record and any other information of a confidential nature.

Policy

The medical record is the property of the health care facility, while the personal data contained in the record are considered confidential communication in which the patient has a protectable interest. It is compiled, preserved, and protected from unauthorized inspection for the benefit of the patient, hospital and physician.

It is the responsibility of each PTHA student not to discuss any confidential information with any individual, inside or outside of the hospital or classroom except as such discussion is part of the performance of duty or class work.

Computer generated information, whether of a medical, personal or financial nature is considered confidential information and is subject to the same restraints regarding discussion and disclosure.

Any violation of this policy may result in disciplinary action up to and including possible dismissal from the program.

I have read the above and understand that I must not disclose confidential information, except as such disclosure is part of the performance of duties related to class work. I further understand that such disclosure may result in disciplinary action up to and including possible dismissal from the program.

Date

Signature

Name (please print): _____



Physical Therapist Assistant

D. *Clinical Rotation Informed Consent*

I, _____, understand that as a clinical student, I may be exposed to environmental hazards and infectious diseases including, but not limited to tuberculosis, hepatitis B, and HIV (AIDS) while in a clinical facility.

Neither the Metropolitan Community College-Penn Valley nor any of the clinical facilities used for clinical practice assumes liability if a student is injured on the campus or in the clinical facility/practicum during training unless the injury is a direct result of negligence by the college or clinical facility. I understand that I am responsible for the cost of health care for any personal injury I may suffer during my education. I understand that I should purchase private health insurance.

I understand that prior to participation in clinical rotations, I will be asked to have a physical examination completed. I understand that it is the responsibility of the individual student to inform the clinical instructor and program coordinator of any condition which may adversely affect patient care or the safety and health of other students in the program.

I further understand that I shall have liability insurance, (which covers malpractice) while enrolled in classes involving clinical activities. I understand that it is my responsibility to verify payment for liability insurance each clinical semester as I pay other enrollment fees.

I understand and assume responsibility for the policies, objectives, course requirements and inherent risks involved in the education of Physical Therapist Assistant students at Penn Valley Community College.

Name (please print): _____

Signature

Date



Physical Therapist Assistant

Metropolitan Community College-PV-HSI
PHYSICAL THERAPIST ASSISTANT PROGRAM

E. Informed Consent for Classroom Activities

Informed consent regarding participation in classroom activities

I, _____, understand that students will be expected to perform physical therapy modalities and skills on each other. I am willing to participate in these activities. This agreement is voluntarily executed and by signing, I so state. I will inform the instructor of any condition which may be considered a precaution or contra-indication for a particular procedure and will thereby be excused according to instructor's direction. .

I understand that if I become ill or injured, my condition may require a physician's release for return to school or clinicals.

I will demonstrate professionalism in the lab by careful administration of procedures and consideration of the privacy, modesty, and respect of other students

Student Signature

Date

Name (please print): _____

Metropolitan Community College-PV-HSI
PHYSICAL THERAPIST ASSISTANT PROGRAM

F. Completion Statement

I understand Admission to and graduation from the Physical Therapist Assistant Program does not ensure eligibility for state or national licensure/certification nor does it guarantee successful completion/passing the licensure/certification examination.

Student Signature

Date

Name (please print): _____



Physical Therapist Assistant

G. INFECTIOUS DISEASE POLICY

PHYSICAL THERAPIST ASSISTANT STUDENT DOING HEALTH CARE WORK

The risk of contracting Hepatitis B virus or other infectious diseases are greater than the risk of contracting HIV. Therefore recommendations for the control of Hepatitis B infections will effectively prevent the spread of AIDS. In such recommendations are therefore incorporated herein.

1. Sharp items (needles, scalpel blades, and other sharp instruments) shall be considered as potentially infective and be handled with extraordinary care to prevent accidental injuries. Proper disposal of sharp items according to OSHA guidelines shall be followed.
2. Disposable syringes and needles, scalpel blades and other sharp items should be placed in puncture resistant containers located as close as practical to the area in which they were used. To prevent needle stick injuries, needles shall not be recapped, purposely bent, broken, removed from disposable syringes, or otherwise manipulated by hand.
3. When the possibility of exposure to blood or other body fluid exists, routinely recommended universal precautions should be followed. The anticipated exposure may require gloves alone, as in handling items soiled with blood or other body fluids, or may also require gowns, masks and eye coverings when performing procedures where splashing is possible. Hands should be washed thoroughly and immediately if they accidentally become contaminated with blood or body fluids.
4. To minimize the need for emergency mouth-to-mouth resuscitation, mouth-pieces, resuscitation bags, or other ventilation devices should be located and available for use in areas where the need for resuscitation is predictable.
5. Pregnant Physical Therapist Assistant students or students engaged in health care are not known to be at greater risk of contacting the HIV virus than students who are not pregnant. However, if a student develops infection with the HIV virus during pregnancy, an infant has an increased risk of infection through prenatal or perinatal transmission. Because of this risk, pregnant students should be especially familiar with precautions regarding the HIV virus.
6. Physical Therapist Assistant students engaged in health care who are infected with the HIV virus and who are not involved in invasive procedures need not be restricted from work unless they have some other illness for which any health care worker would be restricted.
7. For Physical Therapist Assistant students engaged in health care who have been diagnosed as HIV positive, there is an increased danger from infection due to disease. Students who are HIV infected are at risk of acquiring or experiencing serious complications of such diseases. Of particular concern is the risk of severe infection following exposure to patients with easily transmitted infectious diseases (e.g. tuberculosis or chicken pox). HIV infected students will be counseled about potential risk associated with exposure to or taking care of patients with transmissible infections and should continue to follow universal precautions to minimize their risk of exposure to other infectious agents.
8. The Physical Therapist Assistant student's physician, in conjunction with the appropriate college official, will determine on an individual basis whether the student who is HIV positive, with symptoms, can adequately and safely perform patient care.
9. A Physical Therapist Assistant student with an infectious disease who cannot control bodily secretions and students who have uncoverable oozing lesions will not be permitted to participate in health care services. The determination of whether an infected student should be excluded from providing health care shall be made on a case-by-case basis by the student's physician and the appropriate college officials.
10. Physical Therapist Assistant students who are exposed to infectious body fluids in the clinical area must report to the clinical instructor immediately. The hospital shall be notified and the hospital protocol for such exposure followed.

I have read and understand this policy:

Signature

Date

Name (please print): _____



Physical Therapist Assistant

H. VACCINATION DECLARATION/DECLINATION FORM

STUDENT: _____

PROGRAM: _____

I have been advised that the Hepatitis B vaccination is required for the clinical assignments in the Physical Therapist Assistant Program. I understand that due to the possible occupational training exposure to blood or other potential infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection.

Please check one of the following:

I have completed the Hepatitis B vaccination series
(must submit documentation)

I am currently in the process of Hepatitis B vaccination and have received vaccination(s) at this time. (must submit documentation)

I decline to be vaccinated at this time.

I am aware that I can waive the Hepatitis B vaccination requirement only by signing this Vaccination Declination form. In that case, I continue to be at risk of acquiring Hepatitis B, a serious disease.

In the future, should I decide to be vaccinated with Hepatitis B, I will provide documentation of this to the program director.

Student Signature

Date

Name (please print): _____



Physical Therapist Assistant

I. MEDICAL RELEASE FORM

All critical skills necessary to practice Physical therapy effectively and safely are incorporated in the curriculum. Published requirements to complete the Metropolitan Community College-Penn Valley Physical Therapist Assistant Program reflect those clinical skills. To be successful in the Program, the following information is of importance. The student will be able to demonstrate:

1. the ability to earn a grade of "C" or better in all Physical Therapy and Biology coursework after being admitted into the Program.
2. minimal competence in ALL major course objectives which include but are not limited to the ability to:
 - a. utilize written, verbal and/or non-verbal communication.
 - b. establish and maintain appropriate relationships with client and family conducive to achieving treatment goals established, and contribute positively to interdepartmental and intradepartmental relationships.
 - c. perform measurements; communicate with therapist in the establishment of treatment goals; and assist with discharge planning.
 - d. consistently perform programs as related to physical therapist evaluation, contact physician and/or other health care personnel and/or family, revise and/or progress treatment program as indicated without being prompted, use appropriate methods of instruction and feedback to ensure correct performance of procedures, assist with the determination of maximum potential achievement and advise therapist.
 - e. assess/treat, perform or teach therapeutic exercise, gait training, self-help training, superficial heat/cold, deep heat, electrotherapy and selected techniques.
 - f. demonstrate personal and professional qualities such as appropriate judgment, flexibility, self confidence, resourcefulness and tact.
 - g. demonstrate ethical and professional abilities.
 - h. demonstrate administrative skills including time management, appropriate utilization of supportive personnel and develop and teach in-service programs.
3. ability to handle the stress of an intensive academic and clinical training program.
4. ability to apply standard precautions
5. ability to perform CPR and maintenance of current CPR certification.

I verify that the medical status of _____ does not prevent him/her from performing
(STUDENT NAME)
the above mentioned duties in a safe manner.

(ATTENDING PHYSICIAN)

(DATE)

Student Name (please print): _____



Physical Therapist Assistant

J. Clinical Release

I, the undersigned, a student of the _____PTA_____ Program at MCC-PV/HSI, a campus of The Junior College District of Metropolitan Kansas City, Missouri (the College) hereby acknowledge and agree that before I can be placed in a clinical rotation as part of my required course work, I will have undergone the appropriate medical testing and submitted to the hospital or other clinical site medical information including, but not limited to, health insurance and information relative to certain health procedures as well as my personal medical history and student identification photo. I understand that the required information varies among the hospitals and clinical locations.

I further agree and understand that if I fail to submit to the required testing or to submit the required personal health information or student identification photo to the hospital or clinic at which I will do my clinical work, I will not be permitted to enter the hospital or other clinical location and that I will be withdrawn from the _____PTA_____ Program/Division for failure to comply.

I also agree that the College has my permission to share any personal medical information and student identification photo maintained by the College to the hospital or other clinical location at which I will do my clinical work. The information that I agree may be released by the College will not be released by the College except as provided herein, and the College shall advise me in writing as to what information has been released, when it was released and to whom it was released.

I hereby release the College, its Board of Trustees, Employees and agents from any and all liability in connection with their good faith release of information pursuant to this release.

Student Signature

Date

Name (please print): _____



Physical Therapist Assistant

K. Student Self Evaluation/Mid-Term Conference Form

Student Name: _____ Semester: _____

Instructions: Student should review information in portfolio and make a plan for improvement in areas indicated by portfolio or other sources:

1. Communicates effectively with others verbally and non-verbally

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

2. Communicates effectively in written format

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

3. Demonstrates knowledge of physical therapy content

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

4. Demonstrates competency in administering physical therapy techniques

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

5. Exhibits professional qualities: initiative, judgment, flexibility, tact, promptness, attendance, responsibility

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

6. Reflects core values of physical therapy profession: accountability, altruism, compassion and caring, cultural competence, duty, integrity and social responsibility

Assessment: _____ Source: _____

Specific Plan for Improvement: _____

Time Frame: _____

L. **CRIMINAL BACKGROUND CHECK INSTRUCTIONS**

On January 1, 2004, the Joint Commission on Accreditation of Healthcare organizations (JACAHO) instituted new regulations that must be followed in order for hospitals, home health agencies, clinics, etc., to gain or maintain accreditation status. One of these new regulations requires all persons who are involved in-patient care activities, i.e., employees, volunteers and students must have criminal background checks as well as other healthcare related checks.

In order for you to be placed in a clinical site you must complete a background check with Validity Screening Solutions.

Here is what you need to do:

1. Go to the secure link below:
<https://www.validityacademics.com>
2. Enter the Username and Password below:
Username: mcc8654
Password: background
3. Follow the detailed instructions on the screens
 1. Read the “Summary of Rights Under the Fair Credit Reporting Act” and click continue to the background check
 2. Click on “Proceed to Background Check”
 3. Fill out all form fields on the disclosure and click “Continue Application”
 4. Authorize the background check
 5. Click “Continue Application”
 6. Choose a payment option:
 - **Credit Card** \$51.00 plus \$1.00 surcharge
When your Credit Card payment has been accepted your background check will be immediately entered into progress
 - **PayPal** \$51.00 plus \$2.00 surcharge
When you payment has been accepted your background check will be immediately entered into progress
 - **Money Order/Cashier’s Check** \$51.00
Your background check will not be entered into progress until Validity Screening Solutions receives the Money Order/Cashier’s Check
 - Be advised the Money Order/Cashier’s Check may take up to five days to receive and process
 - If you choose the Money Order/Cashier’s Check option you will be routed to a page that will have detailed directions on how and where to submit your payment

Results will be forwarded to the **Metropolitan Community College – Penn Valley Health Careers Coordinator**. **NOTE: Health Careers Coordinator will not keep a copy of the Validity Screening report. You must be able to present this documentation to the clinical site (along with any other requested CNE requirement) upon their request. Therefore, it is imperative get and keep a copy of the Criminal Background Check Report from Validity for you own files.**

If you have any questions please feel free to contact the **MCC – PV Health Careers Coordinator at 816-604-4108** or **Maggie.Marcia@mcckc.edu**. You may also contact Validity Screening Solutions with questions at 913-322-5995 or toll free at 866-920-5995 or by email at healthcare@validityscreening.com



Physical Therapist Assistant

M. Physical Examination Form

Name: _____ Date of Birth: _____

Address: _____
Street State Zip

Phone: _____

Health History (To be completed by applicant)

Conditions	Age at which any of listed conditions developed			Do you now have any of these conditions		Indicate by X relative who has had any of these conditions			
	12 yr	13-18 yr	19 & over	YES	NO	Father	Mother	Brother	Sister
Cancer									
Diabetes									
Heart Disease									
Kidney Disease									
Nervous or emotional condition									
Tuberculosis									
Asthma									
Convulsions									
Epilepsy									
Polio									
Rheumatic Fever									
Allergies									
Shortness of Breath									
Arthritis									

CHECK YES OR NO TO QUESTIONS. FILL IN BLANKS AS INDICATED:

1. Do you have any medical conditions (other than listed above) requiring continuing treatment? If yes, explain: Yes No
2. Have you had any injuries resulting in residual limitation?
3. Are you allergic to any drugs or medications? If so, name:
4. Do you take any kind of medication or drug frequently? If so, name
5. Do you have difficulty hearing what others say?
6. Do you have any voice or speech difficulties which make it difficult for others to understand you?
7. Do you have any joint problems or physical disabilities associated with your hands?

TO BE COMPLETED BY PHYSICIAN:

Height: _____ Weight: _____ Constitution-Av.: _____ Thin: _____ Obese: _____
53

Frequent Headaches: _____ Frequent colds: _____ Is menstrual cycle normal? _____

Is the applicant's activity restricted in any way due to conditions on the other side of this form? (If yes, please explain)

Conditions Of:

Heart & Vascular System: _____ Pulse: _____ BP: _____

Lungs: _____ Nose & Throat: _____ Genito-urinary: _____

Thyroid: _____ Skin: _____ Eyes: _____ Wear glasses: _____

Ears: _____ Hearing: _____ Spine: _____ Posture: _____

Extremities (varicosities, foot conditions): _____

Date Applicant has been Immunized for: (INCLUDE DATES)

Typhoid: _____ Small Pox: _____ Diphtheria: _____ Polio: _____

MMR: _____ Tetanus*: _____ (booster required every 10 years)

Tuberculin Skin Test** must be current (1 year): _____ Hep B Series: _____

** If positive, must have chest x-ray

Varicella vaccination and titer _____

Remarks:

To my knowledge the above named person is not a habitual abuser of intoxicants or drugs: _____

Physician's Signature: _____ Date: _____

Office Address: _____

Telephone: _____

Allied Health and Nursing Programs

N. Immunization/Titer Requirements

The immunization/titer requirements given below are recommended for health care workers by the Centers for Disease Control (CDC). In addition, each Allied Health and Nursing Program is required by clinical contract to submit documentation, which includes immunization/titer results, on all students upon request. **It is the College's policy that all of the following immunization/titer requirements be complete before any student can participate in a clinical experience.**

TITER / IMMUNIZATION REQUIREMENTS
<p>Hepatitis B – The Hepatitis B vaccine Official Documentation must be provided for <u>all three</u> injections <u>and</u> a titer drawn showing proof of immunity.</p> <p>OR A signed Hepatitis B waiver must be on file in the Program Office. Note: signing the waiver releases you from having a titer drawn if you have had the 3 injections. It is the choice of the student whether he/she wants information regarding immunity.</p>
<p>Chickenpox (varicella) – Complete an IGG titer. Titer must be dated and the result showing evidence of immunity must be a part of the Official Documentation. (Equivocal or Negative is not acceptable.) If no immunity is present, two immunizations must be taken.</p> <p>OR Have two immunizations completed and take official documentation to Program Office</p>
<p>Measles, Mumps, Rubella – Complete an IGG titer for each (measles, mumps, rubella). Titers must be dated and the result showing evidence of immunity for each (measles, mumps, rubella) must be a part of the Official Documentation. (Equivocal or Negative is not acceptable.) If no immunity is present, two immunizations must be taken.</p> <p>OR Have two immunizations completed and take Official Documentation to Program Office</p>
<p>Tuberculosis Screen – Must have official documentation of a current annual skin test (cannot be over one year old). If you have an expired or never had a TB skin test, then the 2 step Mantoux skin test is required. Results must be documented in millimeters of tissue involvement (induration). If TB test is positive or the student has history of positive skin tests, a Negative Chest X-Ray (less than two years old) is required.</p>
<p>Tetanus-Diphtheria – The initial series is typically given in childhood and boosters are required every ten years. The booster should be of Tetanus-Diphtheria and acellular pertussis (TDaP). If the booster has been given within the last ten years, provide official documentation of the date (month/day/year) of the immunization. If the booster is ten years old or older, have the TDaP immunization and provide official documentation of the date (month/day/year) of the immunization.</p> <p>Titers are not acceptable for any portion of TDaP.</p>

Official Documentation (lab results) for each titer must be provided. Immunization dates (mm/dd/yyyy) must be included in an official document stating the student's name, date of immunization, and name of immunization. An "Official Document" must show the health care provider's name/organization, and phone number and have appropriate signatures, for example a physician's prescription pad, an official clinical record. TB testing results must show the student's name, health care provider's name/organization, date placed, date read, results in millimeters induration, and appropriate signatures.



Physical Therapist Assistant

o. Waiver of Health Insurance Coverage

I acknowledge that the Junior College District of Metropolitan Community College (the District) does not maintain any health insurance or hospitalization coverage for me. Furthermore, neither the District nor the agency in which am affiliated as a student have any free health care with respect to any illness or accident while I am participating in the activities of the District's _____PTA_____ program.

I hereby waive the release the District and the affiliating agency health care services as well as for costs and expenses that I may incur for health care services with respect to any illness or accident I may suffer as a result of my participation in the District's _____PTA_____ program.

A. Student Name: _____

Signature: _____

Date: _____

P. Student Portfolio Checklist
Metropolitan Community College-Penn Valley-HSI
Physical Therapist Assistant
Student Portfolio Checklist

A notebook containing the following portfolio and supporting documents are to be updated each semester. The student will be given a grade of “I” until the supporting documents are compiled and shown to the individual instructor at the end of each academic semester.

Professional Values

- Fall Semester Conference _____
- Spring Semester Conference _____
- Fall Semester Conference _____

- Attends one continuing education workshop _____
 Event _____

- Participates in one volunteer activity _____
 Event _____

- Participates in one activity to promote
 Knowledge of PT or health _____
 Event _____

Fall Semester

Physical Therapy Fundamentals

Exam	Score	Areas for additional study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Fire Safety Competency Exam _____
- Standard Precautions _____
- Body Mechanics Assignment _____
- Wound Care Observation Assign _____
- Wound Documentation Assignment _____

Basic Patient Care & Modality Competency Checks

- Hand washing and PPE _____
- Bed Mobility and Transfers _____
- Cryotherapy _____
- Superficial Heat _____
- Ultrasound _____
- Whirlpool _____
- Deep Heat _____

- Massage _____

Practical Examinations

1. Data collection(Vitals, Observation, Pain, PROM Positioning and Draping) _____
Areas for improvement _____

2. Wound Care Practical _____

(dressing removal, data collection, wound care, adjunctive therapies, dressing application, sterile technique, and patient education)

Areas for improvement: _____

3. Final Practical

(utilization of any technique learned in course after reviewing therapist’s plan of care)

Areas for improvement: _____

Collaborative Presentation of Research Article _____

Medical Disease

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Spring Semester

Kinesiology

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Practical Examinations

LE ID	_____	_____
UE ID	_____	_____
Practical-Ankle and Knee		_____
Practical-Hip		_____
Practical-Spine		_____
Practical-Shoulder		_____
Practical-Elbow, Wrist, Hand		_____
Final Practical		_____

Collaborative Presentation _____

Orthopedic Pathology

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Group Project	_____	_____
Quiz Scores	_____	

Applied Neurology

Exam	Score	Areas for Additional Study
_____	_____	_____

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Quiz total to date _____ Average of Quizzes _____

Physical Therapy Fundamentals II

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Documentation Assign. _____
HIPAA assignment _____

Competency Checks
 Cervical traction _____
 Lumbar traction _____
 TENS _____
 EMS _____
 High Voltage & Interferential _____
 Final Practical _____

Emergency Patient Care _____
 CPR Certification _____
 First Aid examination _____

Clinical Immersion _____
 Performance Report _____
 Total points _____

Fall Semester

Clinical Seminar Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Medicare Assignment _____

Pediatrics and Gerontology Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CEU Assignment _____
Community Service Assign. _____
Other _____

Therapeutic Exercise

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Competency Checks

PROM	_____	_____
Stretching	_____	_____
Resistance	_____	_____
UE	_____	_____
LE	_____	_____

Practical Examinations

Techniques to increase ROM And flexibility	_____	_____
Techniques to improve Motor control, strength, endurance Coordination and balance	_____	_____
Cardiopulmonary	_____	_____
Final Practical	_____	_____

Rehabilitation

Exam	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Gait Practical	_____	_____
PNF	_____	_____

Quiz total to date _____ **Average of Quizzes** _____

Clinical Experience I

	Score
Web CPI	_____
Total points	_____

Clinical Experience II

Review Examination	Score	Areas for Additional Study
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Clinical #1 Clinical Performance

Eval _____

In-Service Project _____

Diagnosis log _____

Clinical #1 Clinical Performance

Eval _____

In-Service Project _____

Diagnosis log _____

Program Comprehensive Final _____

**Metropolitan Community College-PV-HSI
Physical Therapist Assistant Program**

q. Off-Site Educational Experience Safety Checklist

Facility Name: _____ Date: _____
Experience: _____

Identify the following:

1. Emergency evacuation procedures and exits
2. Location of security and phone numbers

3. Location of AED, MSDS(relevant to situation), fire extinguishers
4. Safety considerations of the procedure and observation of current inspection stickers
5. Emergency procedures for emergency situations relevant to the clinical experience(as outlined by instructor)

Student Signature

R. FAMILY CARE SAFETY REGISTRY INSTRUCTIONS

The Department of Mental Health (DMH) has implemented a requirement that impacts Allied Health and Nursing students. This new guideline requires that all persons who come in contact with consumers in a Missouri mental health setting must have a Family Care Safety Registry (FCSR) background screening. The FCSR is a background screening that is not included in the standard Validity Screening Solutions Criminal Background Check. In order for you to be placed in a clinical site, you must complete a background check with the Family Care Safety Registry

Here is what you need to do – Part 1:

1. Go to the Family Care Safety Registry web site at <http://www.dhss.mo.gov/FCSR>.
2. Click on **how to register** and follow the directions:
 - a. Enter Social Security Number
 - b. Enter type of worker – Voluntary
 - c. Enter Name and Date of Birth
 - d. Enter mailing address
 - e. Agree to the statement
 - f. Enter a payment information:

- Cost of this screening is \$10.00 if done by mail or \$11.00 if done on-line (requires a valid credit card). Please note that it could take up to 2 weeks to be placed on the registry if using the mail option; only 24-48 hours if application and payment is done online with a credit card.
3. Within a couple of days, you will receive a mailing verifying that you are registered. If you **only receive** verification of payment, at this point proceed to **Part 2, Step 1**.
 4. The verification might also include your background screening findings. The letter will state “no findings reported in the background screening” or may report some type of finding. If this is what you receive, proceed to **Part 2, Step 3**.
 5. If you are already on the registry and have a findings letter, proceed to **Part 2, Step 3**. However, if the results letter that you have is more **than 6 months old, proceed to Part 2, Step 1** to request a more recent screening. This will not cost you anything as your registration fee has already been paid and is valid.

Here is what you need to do – Part 2:

1. Go to the Family Care Safety Registry web site at <http://www.dhss.mo.gov/FCSR>
2. Follow the instructions for requesting a background check:
 - a. Call 1-866-422-6872, between 7:00 a.m. and 5:00 p.m., Monday through Friday.
 - b. Provide your name and address as well as your social security number.
 - c. You should receive written confirmation of your background screening results usually within 2 weeks.
3. Once you have received the written confirmation of your results, make a copy of the results. Keep the original letter for your files. **NOTE: Health Careers Coordinator will not keep a copy of the FCSR. You must be able to present this documentation to the clinical site (along with any other requested CNE requirement) upon their request. Therefore, it is imperative that you make a copy and keep a copy of the FCSR results for your own files.**
4. Bring the **copy** of this background screening letter in a sealed envelope that has your name and program written on it to your Program Coordinator.

Your Program Coordinator will give these sealed envelopes to the Healthcare Career Coordinator who will then use this information to verify *each* student’s passing the registry. Any student failing to submit this requirement will not be allowed to attend a clinical.

[Defining Crimes Against Persons in Missouri](#)

s. Good Cause Waiver

Section 660.317, RSMo, requires regulated health care employers, such as a long-term care facility, hospital, home health agency, in-home service provider under contract with the Department of Health and Senior Services, hospice, or adult day care provider to obtain background screenings prior to hiring an employee. For in-home services providers and home health agencies, this includes checking the Family Care Safety Registry (FCSR) (Sections 210.900 – 210.936, RSMo.). The statute states that an individual with a certain type of finding identified in their background screening cannot be hired by these employers. However, in certain circumstances, the individual has the right to apply for a Good Cause Waiver (GCW). If granted, would not correct or remove the finding, but would allow them to be employed on a conditional basis.

Conditional employment may be considered under the following circumstances:

1. An individual who has committed a crime against persons and is, therefore, disqualified from employment in a regulated nursing home, hospital, adult day care, or hospice.

2. A regulated home health agency or in-home service provider under contract with the Department of Health and Senior Services cannot employ an individual who has a finding reported by the FCSR. Findings reported by the FCSR include substantiated child abuse/neglect findings, open criminal records, placement on the Department of Health and Senior Services' Employee Disqualification List (EDL), placement on the Department of Mental Health's Employee Disqualification Registry, or denial/revocation/suspension of a foster parent license.

NOTE: An individual who has been placed on the Department of Health and Senior Services' EDL is not eligible to receive a GCW. In addition, they are automatically disqualified from working in a long-term care facility.

NOTICE

Effective September 1, 2008, the Good Cause Waiver program will no longer accept applications submitted without required documentation. All incomplete applications and any supporting documents will be returned to the applicant along with a notice stating the reason why the application is being returned. The Good Cause Waiver program will not retain any incomplete applications. Because the case will not be opened, the applicant will not be eligible for conditional employment until a complete application is received. A complete application will consist of: A signed, complete Good Cause Waiver application form, a detailed description of each disqualifying offense, a sponsor or reference letter(s), and a copy of the child abuse/neglect investigation report for each reported incident (if applicable).



Physical Therapist Assistant

T. Student Conference

Student's Name:

Date/Time

Reason for Contact:

Relevant Factors:

Recommendations:

Student Comments:

A signature on this document does not imply agreement with the content. A signature confirms that the information was presented to the student and the student had an opportunity to discuss the issues with the instructor.

Student Signature

Instructor



Physical Therapist Assistant

u. Question Review Request

REQUEST FOR REVIEW OF EXAMINATION QUESTION

Requests for review of examination items must be submitted **within 5 working days** of the date that examination results are available for review to students.

Write your name on the reverse side of this paper.

Date of Examination _____

Date of Submission _____

Question # _____

Correct Answer _____

Your Answer _____

Explain why your answer is the **BEST** answer (if the question is multiple choice) or why your answer is correct.

Provide a reference for your answer. Complete citation is required. You may use textbooks or the class notes and other resources provided by the instructor for the course.

Appendix V: Exam Conference

Exam Conference

Student's Name:

Date:

Reason for Contact: Student did not Score 75% or above
Course:

Exam Scores: Ex 1_____ Ex 2_____ Ex 3_____ Ex 4_____

Please outline a plan for improving grades:

Instructor Recommendations/Comments:

A signature on this document does not imply agreement with the content. A signature confirms that the information was presented to the student and the student had an opportunity to discuss the issues with the instructor.

Student Signature

Instructor