

SCHOOL OF PUBLIC HEALTH
DEPARTMENT OF EXERCISE SCIENCE

Doctoral Physical Therapy Program

Clinical Education Guide



UPDATES TO THIS GUIDE

Periodic updates to this Guide are available by pointing your browser to https://www.sc.edu/study/colleges_schools/public_health/study/areas_of_study/physical_therapy/pt_current_students/index.php and selecting the USC Clinical Education Guide link. Forms included in this Guide can be printed from the document via this website. The latest update of this Guide occurred in October of 2020.

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CODE OF CONDUCT

Students enrolled in any course must abide by the [University Of South Carolina Honor Code](#). Students should make themselves familiar with this code.

The Honor Code specifically states, “It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud or deceit of any type in connection with any academic program. Any student who violates this Honor Code or who knowingly assists another to violate this Honor Code shall be subject to discipline”.

Students must also abide by the [University Of South Carolina Code of Conduct](#), and the [Carolinian Creed](#), which states:

The community of scholars at the University of South Carolina is dedicated to personal and academic excellence.

Choosing to join the community obligates each member to a code of civilized behavior.

As a Carolinian...

I will practice
personal and academic integrity;

I will respect
the dignity of all persons;

I will respect
the rights and property of others;

I will discourage
bigotry, while striving to learn from
differences in people, ideas and opinions;

I will demonstrate
concern for others, their feelings, and their need for
conditions which support their work and development.

Allegiance to these ideals requires each Carolinian
to refrain from and discourage behaviors which threaten
the freedom and respect every individual deserves.

PROGRAM MISSION, VISION AND PHILOSOPHY

The most current [Mission, Vision and Philosophy](#) for the University of South Carolina Doctoral Physical Therapy Program may be found midway down the Physical Therapy page.

PHYSICAL THERAPY PROGRAM OF STUDY

The most current [Programs of Study](#) for the University of South Carolina Doctoral Physical Therapy Program may be found here.

MISSION AND OVERVIEW OF CLINICAL EDUCATION

The mission of the clinical education program is to train evidence-based physical therapy practitioners. The clinical education coursework progresses to entry-level practice or beyond at the culmination of the terminal full-time clinical education experience. Four integrated full-time clinical experiences of 8-12 weeks with progressively higher performance expectations occur throughout the curriculum with the first full-time experience occurring in the 3rd semester of study. The first 3 experiences are sequenced to match the preparatory academic coursework and all students are placed in outpatient orthopedic, acute care and neurological rehabilitation settings in the first, second and third years of the curriculum. The terminal full-time clinical education experience occurs in a setting type preferred by the student. Graduates of this program are encouraged to further their professional development through specialization in practice, participation in residency training, PhD training and any other appropriate method of study.

Clinical experiences are the cumulative activity designed to reinforce and practice skills learned in the classroom and laboratory. As such, clinical experiences and clinical instructors are considered vital components of the student's learning experience. Clinical Instructors are considered as faculty of the physical therapy program and are respected and valued for their clinical skills. Clinical experiences prepare students enrolled in the DPT at the University of South Carolina to read and interpret current research and integrate the knowledge into contemporary clinical practice. At the conclusion of these experiences students should value both the science and art of physical therapy and be prepared for entry-level physical therapy practice.

RIGHTS AND PRIVILEGES OF CLINICAL INSTRUCTORS

1. **All clinical instructors will be entitled to attend select USC DPT sponsored workshops if he or she has provided clinical instruction to a USC student.** CEUs will be awarded for these workshops for a nominal fee.
2. Clinical instructors are eligible for reduced tuition benefits. Procedures are detailed on the following pages.
3. Clinical instructors who provide education to a USC PT student may request the USC DPT program to reimburse registration costs for the APTA Clinical Instructor Education and Credentialing Program at the APTA member registration rate. Within budgetary constraints, the USC DPT sponsors as many clinical instructors as possible.
4. Clinical Instructors may request assistance from Amy Edwards, Thomas Cooper reference librarian, in searching library databases to answer specific physical therapy questions. Contact info is 803-777-8702; amjedwar@mailbox.sc.edu
5. Clinical instructors or SCCE's with 2 or more years of experience may apply for Clinical Instructor II status in the USC DPT program. Procedures are detailed on the following pages.

Procedures for Reduced Tuition Benefit
Arnold School of Public Health

The University of South Carolina Graduate School will award reduced tuition benefits to physical therapists that provide clinical instruction to physical therapy students from the University of South Carolina DPT program. This benefit may begin accrual during the spring of any year in which the clinical instructor provides instruction to a student of the program. Guidelines for this program are as follows:

1. The clinical instructor must have completed 60 hours of direct supervision to be eligible to enroll in graduate level classes (6 hours maximum). If two supervisors share one student, each supervisor is eligible for one class. This must be noted on the form the originating program submits.
2. The participant must be eligible to register in The Graduate School to utilize the reduced fee classes.
3. The benefit is not transferable.
4. The maximum number of classes a clinical instructor can earn in one semester is two, even if more students are supervised during that term.
5. The benefit begins the semester after the supervision is completed and expires at the end of two years. (No exception). For example: if you supervise a student during the fall 2003 term, the benefit is valid for all of 2004 and 2005.
6. If the supervisor registers and then drops the course during the 100 percent refund period, the supervisor must notify the Graduate School, so the course can be used later.
7. To register for this benefit, please complete the form included in this section and return to

Matthew D. Geary, PT, DPT
Director of Clinical Education
Physical Therapy Program
Department of Exercise Science
Blatt PE Center
University of South Carolina
Columbia, South Carolina 29208

Application for Reduced Tuition Benefit
Arnold School of Public Health

Term:

- Fall _____
- Spring _____
- Summer II _____

Name

Social Security Number

Clinical Facility

Practice Area

Student Physical Therapist

Number of Hours Instruction to Student

Return this form to:

Matthew Geary, PT, DPT
Director of Clinical Education
Physical Therapy Program
Department of Exercise Science
Blatt PE Center
University of South Carolina
Columbia, South Carolina 29208

Qualifications Required for Clinical Instructor II Status in
University of South Carolina DPT Program

1. Have served as clinical instructor or SCCE for a minimum of 2 USC DPT students
2. Have two years of clinical experience
3. Have successfully completed APTA Credentialed Clinical Instructor course
4. Submit resume in approved format to USC DPT program

Benefits

1. USC library privileges with access to electronic databases and free text

Qualifications required to Maintain Clinical Instructor II Status

1. Serve as CI or SCCE for USC DPT student once every 3 years

The University of South Carolina Clinical Instructor II Application

Name: _____

Last 4 of SS#: _____ Phone #: _____

Facility Name: _____

- I have served as clinical instructor or SCCE for a minimum of 2 USC DPT students.
- I have two years of clinical experience managing a physical therapy patient caseload.
- I am an APTA Credentialed Clinical Instructor.
- My resume in the approved USC DPT program is enclosed.

If you have any questions, please call Denise McHugh.

Please submit application with attached resume to:

Denise McHugh, 803-777-0486
The University of South Carolina
Dept. of EXSC/ DPT Program
Blatt PE Center
Columbia, SC 29208
Clinical Instructor II Resume Instructions

To create a consistent data base of the qualifications of the Clinical Instructors II and to justify the granting of certain University privileges, we are requesting that each Instructor develop a resume following the attached format.

The resume is divided into the following sections:

- Contact Information
- Summary
- Professional Experience
- Education
- Certifications
- Continuing Education
- Research
- Publications
- Volunteer Activities

Please duplicate the order of the sections as well as the capitalization/bold/italics indications. Examples are provided with each section in addition to a complete sample resume in this format.

Résumé Template

Name
Address
Phone Number(s)
Email

SUMMARY (three to four sentences in the PETS format)

Profession

Expertise

Types of clinical experiences

Strengths

Example:

Pediatric Physical Therapist with expertise in the treatment of patients with spina bifida and significant experience in both acute care and out-patient settings. Have mentored multiple physical therapy students over a five-year period. Possesses strong communication skills, the ability to work well with peers and families and to manage time effectively.

PROFESSIONAL EXPERIENCE

NAME OF ORGANIZATION, Location
employment

Years of

Working Title

Scope Statement - one sentence that is a broad statement of responsibilities

- Accomplishment(s) - things you did to bring value to an employer.

Example:

PALMETTO-RICHLAND CHILDREN'S HOSPITAL, Columbia, SC

2005-2008

Staff Physical Therapist

Managed pediatric caseload consisting of 50% inpatient and 50% out-patient.

- Coordinated weekly Special Needs Equipment Clinics
- Supervised Home Assessment Team

EDUCATION (list most recent degree first)

COLLEGE/UNIVERSITY, Location

Graduation year

Degree

Example:

UNIVERSITY OF SOUTH CAROLINA, Columbia, SC

2002

Doctor of Physical Therapy

CERTIFICATIONS

ORGANIZATION GRANTING CERTIFICATE

Date

Specific Certificate

Example:

AMERICAN BOARD OF PHYSICAL THERAPY SPECIALTIES

2005

Pediatric Certified Specialist

Name, page two

CONTINUING EDUCATION (PAST FIVE YEARS ONLY)

SPONSORING ORGANIZATION	Date
Name of Course <i>Example:</i> AMERICAN PHYSICAL THERAPY ASSOCIATION Management of the Complex Pediatric Patient	2007

RESEARCH EXPERIENCE (IF APPLICABLE)

RESEARCH ENTITY	Date
Name of Project or Role in Research <i>Example:</i> UNIVERSITY OF SOUTH CAROLINA Provided neuro-developmental and functional interventions to children with spina bifida	2004

PUBLICATIONS (IF APPLICABLE)

NAME OF JOURNAL	Date
<i>Title of Article</i> <i>Example:</i> JOURNAL OF NEUROLOGICAL PHYSICAL THERAPY <i>Comparison of Neuro-developmental and Functional Interventions on Impairments in Children with Spina Bifida</i>	Date

VOLUNTEER ACTIVITIES

NAME OF ORGANIZATION	Date
Role <i>Example:</i> SPECIAL OLYMPICS Performed physical fitness assessments of children with disabilities	2008-present

Fictional Resume Example

Harvey W. Mathews, DPT

1234 Washington Street
Columbia, SC 29201
803-920-9013
hmathews@mailbox.sc.edu

SUMMARY

Orthopedic physical therapist with 20 years of expertise in managing patients with extremity and spinal orthopedic disorders in rural and urban outpatient clinics. Possess supervisory experience managing a staff of seven employees including PTs, PTAs, OTRs and office staff and have mentored over 10 physical therapy students in the past five years. Demonstrate strong written and verbal communication skills with patients, patient families, health care providers, administrators, and payors.

PROFESSIONAL EXPERIENCE

ELLIS PHYSICAL THERAPY, Columbia, SC 2006-2011
Staff Physical Therapist

Managed full orthopedic physical therapy caseload consisting of nonsurgical and postsurgical impairments and functional losses related primarily to dysfunction of the spine, knee and shoulder.

- Managed clinical education program consisting of communication with DCE's from three PT and one PTA school(s) and the assignment of students to qualified PT and PTA instructors.
- Directed one PTA in the management of a physical therapy patient caseload.

NOVANT HEALTH CONTRACTING TO NORTHERN HOSPITAL OF SURRY COUNTY, Mount Airy, NC 2001-2006

Physical Therapy Program Leader

Managed Rehabilitation Services Department.

- Managed 80% outpatient orthopedic physical therapy caseload consisting of nonsurgical and postsurgical impairments and functional losses of the extremities and spine.
- Developed Outpatient Rehabilitation Program to be the most profitable of nine programs in Novant Health System.
- Provided safe lifting classes to all new employees of Northern Hospital of Surry County.
- Collected quality management data for improving practices of the department and implemented education, training and further data collection as necessary based on analysis of results by the Continuous Improvement Manager

EDUCATION

SHENANDOAH UNIVERSITY, Winchester, VA 2008
Doctor of Physical Therapy

UNIVERSITY OF SOUTH CAROLINA, Columbia, SC 1989
Master of Exercise Science

MEDICAL COLLEGE OF GEORGIA, Augusta, GA 1980

Bachelor of Physical Therapy

CERTIFICATIONS

AMERICAN BOARD OF PHYSICAL THERAPY SPECIALTIES 2003

Orthopaedic Certified Specialist

Harvey W. Mathews DPT, page two

CONTINUING EDUCATION (past five years only)

MCKENZIE INSTITUTE 2006
McKenzie Approach to Mechanical Diagnosis and Therapy of the Spine

ORTHOPAEDIC SECTION APTA 2006
Home Study Course: Lumbar Spine

ORTHOPAEDIC SECTION APTA 2007
Home Study Course: Foot and Ankle

CLINICAL SPECIALTY EDUCATION 2007
Introduction to Hand Therapy

ORTHOPAEDIC SECTION APTA 2007
Home Study Course: Wrist and Hand

ORTHOPAEDIC SECTION APTA 2008
Home Study Course: Cervical Spine

NOVANT HEALTH 2008
ErgoScience Physical Work Performance Evaluation

MULLIGAN INSTITUTE 2009
Mulligan Concept - Mobilization with Movement, "NAGS", "SNAGS" and More

ORTHOPAEDIC SECTION APTA 2010
Strength & Conditioning Applications in Orthopaedics

PHYSIOTHERAPY ASSOCIATES 2010
Evaluation and Treatment of the Thoracic Spine and Rib Cage

MCKENZIE INSTITUTE 2011
McKenzie Approach to Mechanical Diagnosis and Therapy of the Spine
Advanced Problem Solving and Techniques: A Practical Workshop – McKenzie Mechanical Diagnosis and Therapy

RESEARCH EXPERIENCE

UNIVERSITY OF SOUTH CAROLINA PHYSICAL THERAPY PROGRAM 2006 - 2011
Reader and editor for several student research projects on manual and quantitative testing of muscle strength.

PUBLICATIONS

JOURNAL OF PHYSICAL THERAPY EDUCATION 2010
Investigation of the Preferred PT-PTA Relationship in a 2:2 Clinical Education Model

VOLUNTEER ACTIVITIES

UNIVERSITY OF SOUTH CAROLINA DPT STUDENT ORGANIZATION 2009-2011
Tutor five immigrant Karen children refugees from what is now known as Myanmar in all subjects taught in 1st through 10th grades.

CLINICAL EDUCATION POLICIES AND PROCEDURES

AMERICANS WITH DISABILITIES ACT REQUIREMENTS

Students who have a medical condition or disability and require accommodations to participate in a clinical education experience, should submit documentation to the Student Disability Resource Center.

CLINICAL EDUCATION EXPERIENCE ASSIGNMENTS

Clinical education is considered a privilege and not a right. Qualified students will be assigned to a clinical facility as outlined in Student Responsibilities for Clinical Education. The student's academic record and clinical goals will be considered when assigning clinical experiences. Failure to meet deadlines provided by the clinical education program will result in the application of the [Clinical Hold Policy](#) and a loss of student priority in receiving a clinical assignment. If a clinical assignment is cancelled, the student will be immediately notified and will be re-assigned to another facility as soon as it can be arranged.

CLINICAL PROBLEMS

If the student perceives a clinical problem has occurred during a clinical experience (e.g. supervision, academic preparation), the student should immediately discuss the problem with the CI. If the situation is not improved the student should next notify the SCCE of the facility for assistance in resolving the problem. If that does not resolve the problem, notify the DCE immediately. Due to the nature of some problems faced by students, it may be appropriate to contact the DCE immediately to discuss alternative strategies for resolving the problem or to arrange an onsite visit or telephone conversation.

If a clinical problem arises from the clinical instructor's perspective, the clinical instructor should immediately discuss the problem with the student. If the situation is not improved, the clinical instructor should next notify the SCCE of the facility for assistance in resolving the problem. If that does not solve the problem, notify the DCE immediately. Due to the nature of some problems faced by clinical instructors, it may be appropriate to contact the DCE immediately to discuss alternative strategies for resolving the problem or to arrange an onsite visit or telephone conversation.

COMMUNICATION

Communication between the school and the clinical facility will generally occur as outlined in the [Communication and Evaluation Plan](#) as outlined in the Clinical Education Guide. All other communication should occur on an as needed basis.

CRIMINAL BACKGROUND CHECK

Prior to starting a clinical education experience with a contracted/affiliated hospital or healthcare facility, students are required to undergo a background check to enhance patient safety and protection. In compliance with this requirement, the USC DPT program has established the following policy.

1. USC DPT program requires that admitted students undergo a background check in the first semester.
2. A private company approved by the University of South Carolina to perform background checks will conduct these checks.

3. The student has the responsibility to initiate the procedures to obtain the background check.
4. The background check may include, but not be limited to, one or more of the following checks:
 - a) Criminal Record Check for all locations of residence for previous seven years from addresses disclosed as part of the application process;
 - b) Statewide Sexual Offender and/or Sexual Predator Registry – A database search for individuals registered as sex offenders and/or sexual predators in the selected state or jurisdiction for all locations of residence for the previous seven years;
 - c) Health and Human Services (HHS), Office of the Inspector General (OIG), General Services Administration (GSA) List, Persons or entities listed as excluded from participation in Medicaid, Medicare and Federal Health Care Programs. Debarment actions on the HHS/OIG/GSA lists;
 - d) Office of Foreign Assets Control (OFAC) Terrorist Search, Specially designated nationals and blocked persons as determined by OFAC;
 - e) Social Security Report, Names, addresses, and employment associated with a social security number. The background check vendor will provide an electronic report directly to the DPT DCE or DCE Assistant.
5. Information from the background check may be used by the DCE to advise the student regarding his/her participation in clinical education and/or continuance status in the USC DPT program, but only after consultation with the student and appropriate faculty and/or University officials.

Process

1. Prior to matriculation, USC DPT Program will notify all admitted students of the requirement that they must have an approved background check prior to participation in clinical education.
2. At orientation, the DCE instructs new students when to obtain the criminal background check.
3. The office of the DCE initiates a criminal background check request through the USC authorized third-party vendor.
4. The vendor emails an invitation link to student. Student accesses the vendor's website via the link and follows instructions to request the criminal background check. Student authorizes release of criminal background check information during this process.
5. With the student authorized release of information, the vendor provides copy of criminal background check results directly to the DPT DCE or DCE Assistant.

6. Any finding from a student background check will be discussed with the student to allow the student to explain the results. The authorized individual representing the DPT program, either the DPT Program Director or DPT DCE may consult legal counsel to discuss the findings of the background check. Certain findings in a background check could preclude participation in clinical education at certain training facilities and may also preclude licensure as a physical therapist in the state of South Carolina. If it is likely that a student may pose a threat to the welfare of patients or that a student will be unable to complete the clinical education portion of the curriculum, the student may be denied continuance in the USC DPT Program.
6. Positive results on criminal background checks will be discussed with facility personnel as required by individual facility policies to determine if the nature of the offense will preclude the assigned student's participation in the clinical education experience.
7. Once the background check is done, additional background checks will only be performed when the student self-reports a violation or when the clinical facility requires a more recent or more extensive background check. If a facility requires more extensive background checks, the student must follow the facility procedure if the student wishes to do a clinical experience in that facility. Prior to any individual clinical experience, each student will complete a form affirming the absence or presence of any criminal convictions since the last background check.
8. Background check reports will be stored in the student's profile on EXXAT STEPS.

DRUG SCREENING POLICY AND PROCEDURE

Drug Screening is performed only at the request of institutions that clinically educate our students. Results are forwarded to the institution.

In the event that a clinical education site requests a drug screen, the USC DPT Program will follow this procedure.

1. A private company approved by the University of South Carolina to perform drug screens will perform these screens.
2. The student has the responsibility to initiate the procedures to obtain the drug screen.
3. The drug screen will usually be a urine screen, but the type of screen that is performed will be individualized to the clinical site's request.
4. With the student authorized release of information, the drug screen vendor will provide a report directly to the DPT DCE or DCE Assistant.

5. Information from the drug screen may be used to advise the student regarding their continuance status in the USC DPT program, but only after consultation with the student and University officials.

Process

1. USC DPT program will notify a student of drug screens that are required by their clinical site prior to the clinical education experience in the affiliated health care facility.
2. The office of the DPT DCE will initiate a drug screen request through the drug screen vendor.
3. The vendor emails an invitation link to student. Student accesses the vendor's website via the link and follows instructions to request the drug screen. Student authorizes release of drug screen results during this process.
4. The student completes the drug screen at an approved site. If the student does not complete the drug screen, the student will not be allowed to participate in the clinical experience as drug screens are only requested when the site requires a drug screen.
5. With the student authorized release of information, the vendor provides a copy of the results directly to the DPT DCE or DCE Assistant.
6. Any finding from a student drug screen will be discussed with the student to allow the student to explain the results. The authorized individual representing the DPT program, either the DPT Program Director or DPT DCE will consult legal counsel to discuss the findings of the drug screen. Certain findings in a drug screen could preclude participation in clinical education at certain training facilities and may also preclude licensure as a physical therapist in the state of South Carolina. If it is likely that a student may pose a threat to the welfare of patients or that a student will be unable to complete the clinical education portion of the curriculum, the student may be denied continuance in the USC DPT Program.
7. Positive results on drug screens will be discussed with personnel at the clinical education facility, if allowed by the facility's policy, to determine if the nature of the positive screen will preclude the student's participation in the assigned clinical education experience
8. Drug screen reports will be stored in the student's profile on EXXAT STEPS.

EMERGENCY

In any personal emergency, the student should take steps to care for the emergent situation and to notify their CI and the DCE as soon as possible. In all medical emergencies the student should get appropriate emergency care. Emergencies occurring during and because of the student's clinical experience are likely covered by the Worker's Compensation Insurance purchased by the program. All students are also required to have health insurance which should assist in non-work injuries.

In the case of a blood borne pathogen incident, the USC Exposure Control Plan applies to all USC DPT students during a clinical experience.

1. If stuck with dirty needle or contaminated with human body fluids, **immediately and thoroughly** wash the area with soap and water or flush the eyes and or mouth with water.
2. Once you have thoroughly washed or flushed the area, get medical care
 - a) If in Columbia, SC and you are in a non-hospital setting, report to Student Health between hours of 8AM and 4 PM.
 - i. Outside of these hours report to the Prisma Health- Midlands ED (formerly Palmetto Richland)
 - b) If in Columbia, SC and you are in a hospital setting report to that hospital's Emergency Department.
 - c) If outside of the Columbia, SC area report to the nearest hospital ED
3. If receiving care in any facility, contact Compendium Services, Inc at 877-709-2667. They will manage your case and make sure that all procedures are followed to obtain the care you need.
 - a) Also report to Matthew Geary, DCE at 803-777-0478 or 843-514-3798. The DCE will request an email describing the incident.
4. The care that is provided will
 - a) Investigate how the exposure occurred
 - b) Provide prophylactic and follow-up care

EVALUATION OF CLINICAL INSTRUCTORS

All CIs who provide 160 hours of clinical instruction are required to complete a [Clinical Instructor Curriculum Review form](#). The student is required to complete a [Student Evaluation of Clinical Educational Experience form](#) on any CI who provides 160 hours of clinical instruction.

INCIDENT REPORT

The following procedure should be followed if a student is involved in any incident that has potential for professional liability legal action to be filed.

- The student must immediately notify the CI of the incident and follow the facility's procedure regarding incident reporting.
- The student must notify the DCE of the event as soon as the facility's procedures regarding incident reporting have been completed.
- The student must provide a narrative detailing the incident to the DCE within 24 hours of the occurrence of the incident. Clinical sites will not generally share their incident reports with the

DPT Program. If the incident is a blood borne pathogen incident, Compendium Services, Inc. will provide the incident report to USC Student Health Services.

- Upon receipt of any official document notifying the student of a compensable or litigious event, the student must furnish a copy of the document to the DCE.
- The DCE will furnish the written documentation of any possible legal action to the Program Chair, the University of South Carolina attorney and the professional liability carrier.

OPTIONAL CLINICAL EDUCATION EXPERIENCE

Students may request an optional clinical experience. These experiences may be performed for variable amounts of time (e.g., fourteen half days during a semester or full days on Friday for 10 weeks of semester). This course will be taken as an independent study and grading of this clinical will be a letter grade based on achieving mutually agreed upon objectives between the student, the DCE, and the Clinical Instructor. These objectives will be established in an independent study contract. The intent of this optional clinical is to increase levels of confidence and skill in specific areas of clinical practice.

An overload form will be required to enroll in this course and the course will generally be equivalent to 1 credit hour. In semesters where total credit hours exceed 16 hours, the University may charge an additional fee. The immunization, and training and requirements to participate in an optional clinical experience are the same as the requirements to participate in any clinical education experience, but the *Student Clinical Information* form and *Generic Abilities* assessment are not required. Optional clinical experiences are a privilege granted by the DCE and the host site.

REPEAT OR EXTENSION OF A CLINICAL COURSE

If successful completion of a clinical is not attained during the normal time frame of the clinical, the student will be assigned a “C”, “D” or “F” grade for the clinical performance. In certain cases of hardship, such as family death, maternity, paternity, illness, etc. an incomplete (I) may be assigned for the clinical. The “I” may also be assigned in “limited” cases, at the discretion of the DCE if the student is minimally below the passing mark on a minimal number of *Clinical Performance Instrument* criteria and/or the clinical site did not provide an adequate number of opportunities to pass specific criteria.

The student will assume responsibility for formulating objectives for any extended or repeat clinical experience; these objectives must be approved by the DCE. A letter grade will be assigned at the end of the extended or repeat clinical based upon achievement of these objectives.

Any extended or repeat clinical may result in delayed graduation of the student.

The student can repeat only one clinical experience.

SOCIAL MEDIA POLICY

See Social Media Policy 3.5.2.2.1 in the [Policy and Procedures of the Doctor of Physical Therapy Program of the University of South Carolina](#).

STUDENT RESPONSIBILITIES

Students must follow the Student Responsibilities for Clinical Education as outlined in The Clinical Education Guide.

THE CLINICAL EDUCATION AGREEMENT

A clinical education experience agreement between the school and facility must be signed and current for a student to be placed in a clinical experience in the facility. The agreement between the University of South Carolina and the clinical facility defines the roles and responsibilities of each agency. A copy of the agreement is filed in the office of the Physical Therapy Program and is attached to the site file on EXXAT STEPS for student review. An original agreement is kept in the University legal office and a second original agreement is returned to the facility.

The EXXAT STEPS Clinical Education Management System, prepares a report that captures agreements expiring in the next 6 months. Those agreements are reviewed and the appropriate procedure to update or renew the agreement will be followed.

The University of South Carolina may use the clinical facility's agreement, but the University's office of legal counsel must approve the agreement.

CLINICAL FACILITY SELECTION CRITERIA

Clinical sites for the USC DPT program are chosen according to the following criteria:

- Professionals in the facility want to clinically train students.
- The facility is in the school's geographic region for the first three clinical education experiences, with a few exceptions. Sites in other regions are more commonly utilized for final clinical education experiences for the final "choice" clinical education experience.
- The clinical facility practices ethically and legally.
- The clinical facility employs an adequate number of clinical instructors (physical therapists) to provide appropriate supervision of the student. Supervision must be provided at a level that meets legal directives for that setting.
- The facility has an adequate number and variety of patients available to the student.
- A written clinical education experience agreement has been signed and approved by USC and the facility.
- The facility has a designated Site Coordinator of Clinical Education (SCCE) responsible for coordinating assignments and activities of the students.
- Clinical instructors will perform mid-term and final evaluations on a timely basis.
- Clinical instructors will continually communicate with students regarding their clinical performance (strengths, weaknesses, good behaviors, poor behaviors, inappropriate behaviors) and will communicate with the DCE on an as needed basis.
- Feedback will be willingly shared between the CP's, SCCE, and DCE regarding performance in their respective roles.
- Clinical instructors should have a minimum of one year's clinical experience.
- The clinical instructor or other identified personnel will orient the student to the facility by
 - Performing a facility tour,
 - Discussing documentation and scheduling procedures,
 - Showing the locations of the MSDS, fire extinguishers, emergency evacuation routes, and personal protective equipment,
 - Discussing the exposure control plan of the facility, and
 - Reviewing dress code, punctuality, and attendance requirements.

Other criteria are also important in the selection of clinical sites but are not absolute requirements. Such criteria are as follows.

- The philosophy of the clinical site regarding patient care and clinical education is compatible with that of the academic program.
- The clinical education site provides other learning experiences (administrative, educational, research) in addition to the primary training activity of evaluating and treating patients.
- The student will be designated an area for personal belongings and charting.
- The clinical site is receptive to alternative models of clinical instruction (e.g. 2 students per clinical instructor, 1 student with split supervision by different clinical instructors).
- A credentialed clinical instructor is on site.
- Clinical instructor or SCCE provides student with guidelines and expectations regarding documentation and charging in that facility.

RESPONSIBILITIES OF THE DIRECTOR OF CLINICAL EDUCATION

The Director of Clinical Education (DCE):

- Plans, implements and refines the academic clinical education component in collaboration with the academic faculty, clinical instructors, and students.
- Communicates and coordinates the spread of information between the affiliated clinical education sites and the academic institution.
- Maintains updated clinical education files on each facility including clinical education agreements, [Student Evaluations of the Clinical Education Experience](#). Clinical Site Information Forms (CSIF) are available on *APTA CPI Web*
- Maintains student clinical education files including CPI evaluations, the [Student Clinical Information form](#), [Contact Sheets](#), and [Clinical Instructor/ Student Weekly Constructive Feedback](#) form and PatientDx summaries.
- Maintains individual and separate files on necessary student health information.
- Coordinates the preparation, assignment and supervision of students in clinical experiences.
- Communicates with clinical education faculty and students before, during, and after clinical education experiences.
- Provides counseling and remedial interventions on an as needed basis.
- Recruits and develops new clinical sites on an as needed basis.
- Assists clinical faculty development.
- Assigns final grade for Clinical Education Experience.
- Performs site visits to develop relationships and evaluate sites

RESPONSIBILITIES OF THE SITE COORDINATOR OF CLINICAL EDUCATION

The Site Coordinator of Clinical Education (SCCE):

- Administers the facility's clinical education program.
- Coordinates assignments and activities of students at clinical education site.
- Selects qualified Clinical Instructor (CI) for student assignment and informs the DPT program of the CI's name.
- Distributes information about the curriculum, evaluation materials, clinical education experience objectives, and specific student profiles to the appropriate CI.
- Ensures completion of Clinical Site Information Form for CSIF Web.
- Communicates with Director of Clinical Education (DCE), CI, and student.
- Educates and develops CIs' skills as needed.
- Assists the CI in developing alternative or remedial instruction for students as needed.
- Assists the CI in evaluating the student as needed.
- Reports to the DCE any student who is at risk of failing the clinical education experience.

R E S P O N S I B I L I T I E S O F T H E C L I N I C A L I N S T R U C T O R

The Clinical Instructor (CI):

- Has a minimum of 1 year of clinical experience.
- Must be a licensed physical therapist in the state of practice
- Provides effective clinical instruction to the student.
- Uses best efforts to facilitate safe practice by the student physical therapist.
- Demonstrates clinical competence and legal and ethical practice.
- Reviews the [Student Clinical Information Form](#) and the APTA Clinical Performance Instrument prior to the student's arrival.
- Discusses clinical education objectives, the student's personal objectives, and methods of supervising and communicating with the student during the first day(s) of the clinical education experience.
- Discusses and modifies objectives, supervision, and communication with the student throughout the clinical education experience as needed.
- Communicates daily with the student to provide feedback as needed to assist the student in meeting personal and clinical education experience objectives.
- Completes and reviews [Clinical Instructor / Student Constructive Feedback Form](#) on a weekly basis.
- Performs midterm and final evaluations using the Clinical Performance Instrument.
- Communicates with the SCCE or DCE as needed.
- Reports to the SCCE and DCE any student who is at risk of failing the clinical education experience.
- Facilitates evidence-based learning in the student.

STUDENT RESPONSIBILITIES FOR CLINICAL EDUCATION

MEET QUALIFICATION TO PARTICIPATE IN CLINICAL EDUCATION EXPERIENCES

Students must pass all courses identified as “PHYT” courses with a grade “B” or better. All non-PHYT courses must be passed with a grade of “C” or better. The student must also pass a comprehensive examination before enrollment will be permitted in the terminal full-time clinical education experience, PHYT 853.

Students must also meet the [Essential Functions of the Program](#). The university is not permitted to ask if a student has a disability and answering such a question is not required for a student to participate in a clinical education experience. However, if you desire to voluntarily disclose your status as an individual with a disability, you may do so. If you choose to disclose your status as an individual with a disability, and you desire to receive an accommodation to enable your participation in any physical therapy clinical education experience, you have the right to request a reasonable accommodation.

EMAIL COMMUNICATION

The student is responsible for monitoring emails sent to their university email address from the DCE and DCE Assistant daily. Failure to respond to emails within 24 hours is unacceptable.

SITE REQUEST, ASSIGNMENT AND CONFIRMATION

Prior to a clinical experience, students will request a geographic location from our pool of clinical sites. For the first 3 clinical experiences, the DCE assigns students to a facility type that matches academic preparation. Greater than 90% of clinical education experiences occur in facilities that have successfully trained USC DPT students in previous years. Most of these placements are in the Carolinas, and most students will perform a **minimum** of 2 of their first three clinical experiences outside of the Columbia, SC region as the number of placements in Columbia, SC are limited and do not completely meet all our needs for any specific clinical.

The student requests specific sites for the terminal full-time clinical education experience as this clinical is designed to allow the student to gain experience in an area of individual interest. The DCE welcomes requests for out-of-state sites for the terminal full-time clinical education experience, but these requests should be made by February of the year preceding the final clinical education experience. The DCE will assign a final clinical after May 1 of the year preceding the final clinical if the student has not contacted the DCE with their site preference. As with all placements, a contract must be in place with the final site. If the contract is not successfully negotiated, the student will be placed at another clinical site.

The DCE finalizes all clinical placements. Students who do not meet deadlines of the DPT Clinical Education Program, will be given last priority in the assignment of their clinical education site.

The student should contact the clinical facility at least 3 months prior to the clinical education experience to confirm his/her placement. The student may ask the contact person (SCCE or CI) questions regarding dress, grooming, arrival time, working hours, and facility expectations at this time. If the student does not receive necessary information from the facility, he/she should coordinate efforts to obtain information through the DCE. Much of the information regarding the facility is present in the Clinical Site Information form and may be accessed on the *APTA PT CPI Web*.

REQUESTS FOR NEW CLINICAL EDUCATION SITES

Requests for new clinical sites must be submitted to the DCE before or during January of the year preceding the clinical education experience. Requests should be made by completing the [Request for New Clinical Site form](#) which can be found on EXXAT STEPS and in this *Guide*. If the DCE and the clinical site agree to a contractual relationship, the student initiating the request will be given the first option to intern at the site should the facility offer an appropriate clinical education experience.

CLINICAL HOLD POLICY

Students who have not completed health screens and immunizations, mandatory training or any other required documentation or meetings for clinical education will be placed on clinical hold. This means the student will not be allowed to attend their clinical education experience until they have updated their required immunizations, required health training, tuberculosis skin testing, CPR training, and other required documentation as outlined in student responsibilities. Additionally, students who are on clinical hold will be given last priority when assigning clinical sites.

CLINICAL AGREEMENT AND CLINICAL SITE INFORMATION FORM

The student is required to review the Clinical Agreement for each facility to which they are assigned. All provisions of the agreement requiring an obligation on the part of the student should be carefully reviewed. The student is required to read and sign the [Contract Review Sheet](#). **If the agreement requires training or immunizations not routinely conducted by the USC program, the student must satisfy these requirements before he/she can attend this clinical education experience.** Clinical Agreements are available on EXXAT STEPS in the Sites Documents section of Site Details for a specific clinical education site.

CSIF's are available at <https://cpi2.amsapps.com/sites> once you have logged on to PT/CPI WEB https://cpi2.amsapps.com/user_session/new. If you cannot find a Clinical Contract or CSIF, please contact the DCE.

RECORDS RELEASE/STORAGE/TRANSMISSION/DELETION

Each student should review and sign an [Authorization for Release of Records and Information](#) form for the release and exchange of necessary health and academic information between the facility and the academic institution. A copy of this form may be found on EXXAT STEPS.

Sensitive student information required to participate in clinical education experiences, including criminal background checks, drug screens and health records, will be maintained on the EXXAT platform. EXXAT encrypts the data at rest and in transit both from the University of South Carolina DPT program and to the designated clinical facility. All computers of the clinical education office which upload data to the EXXAT platform are also encrypted. All of this data will be deleted from the EXXAT platform 10 years after the student's graduation date. In instances when a clinical site requires a longer retention period, records will be downloaded from Exxat before deletion, and maintained in hardcopy format for the requisite time period.

AUTHORIZATION FOR RELEASE OF RECORDS AND INFORMATION

Each student should review and sign the appropriate forms for the release and exchange of necessary health and academic information between the facility and the academic institution. A copy of this form may be found on EXXAT STEPS.

CLINICAL EDUCATION EXPERIENCE PROGRAM AGREEMENT

Each student should review and sign this agreement. This details information and rules the student should know prior to going to the clinical education experience. It includes many of the items in this section and a confidentiality agreement. A copy of this form may be found on the EXXAT STEPS.

TRAVEL/LIVING COSTS

The student is expected to arrange travel to and housing at the clinical site. Costs are the responsibility of the student. Please check the CSIF for housing information in the facility's area. A few facilities provide housing free of charge. Low cost or free housing is sometimes available through Area Health Education Consortiums (AHEC) in different regions of each state.

WORK SCHEDULE/ATTENDANCE/TARDINESS/HOLIDAYS

- The work schedule will be as directed by the clinical instructor. Minimum hour requirements for specific clinical experiences are as directed by the specific course syllabus.
- The student must be present for work daily; missed work time must be made up according to a plan acceptable to the clinical instructor and the DCE.
- The DCE should be contacted by the student for all absences/tardiness for clinical experiences via email within 24 hours detailing the circumstances surrounding the absence/tardy. The DCE recommends that absences exceeding two sick days be made up.
- A personal day off for special events (e.g., weddings and graduations) may be arranged with the SCCE and CI. The plan for this day off and the plan to make up the time should be communicated to the DCE in an email. Vacations will not be approved.
- DCE will work with the student, CI, and/or SCCE to establish an acceptable plan for family emergencies and deaths.
- Timeliness is expected for all clinical activities.
- Any delay in arriving to work should be reported to the clinical instructor prior to the beginning of the workday.
- Student holidays are taken according to the facility's custom and not the University's calendar.
- In the case of illness, the facility may require a medical release to return to work.

DRESS/NAMETAG/APPEARANCE/PROFESSIONAL CONDUCT

The student will follow the dress code of the facility. **Nametags are required to be worn daily and include the student's name and identification as a student physical therapist from the University of South Carolina. These nametags are in compliance with the Lewis Blackmon Act of South Carolina. http://www.scstatehouse.gov/sess116_2005-2006/bills/3832.htm and <http://www.lewisblackman.net>**

Appearance should always be neat and well groomed. **Dress or grooming that does not conform to the facility standard may result in the SCCE and the DCE removing the student from the clinical education experience.**

The student should introduce self as a student physical therapist, obtain patient consent to provide physical therapy care and state the patient's right to refuse student care to each patient.

Professional, legal and ethical behavior is always expected during the clinical education experience. Inappropriate behavior may result in the CI, SCCE and the DCE removing the student from the clinical education experience.

AMERICAN PHYSICAL THERAPY ASSOCIATION MEMBERSHIP

Student membership in the APTA is recommended. Information on APTA membership is available upon request or can be obtained from the APTA website at <http://www.apta.org/>.

MALPRACTICE INSURANCE

Malpractice insurance in the amount of Two Million/Four Million dollars of coverage per incidence/occurrence is required for the duration of each clinical experience and is provided by the University of South Carolina doctoral physical therapy program. Additional personal student professional liability coverage may be obtained through private vendors.

WORKMAN'S COMPENSATION INSURANCE

Workman's compensation insurance is required for the duration of each clinical education experience and is provided by the USC DPT Program.

HEALTH EXAMINATION

Many clinical facilities require a health or physical exam. Students will be required to obtain this exam if assigned to a facility with this requirement. **Failure to obtain a required health examination will prevent the student from attending the required clinical education experience** and may delay progression of the student in their program of study.

HEALTH INSURANCE COVERAGE

Health insurance coverage is required by the University of South Carolina Graduate School. Additionally, most clinical facilities require a statement of health insurance coverage. You must maintain non-expired health insurance card verification in your clinical education file with the DCE.

The University will provide and charge you with the University's health insurance plan if you do not provide proof of other satisfactory health insurance coverage. More information regarding the University's health insurance policy can be found at https://sc.edu/about/offices_and_divisions/student_health_services/insurance-payments/required-health-insurance/index.php.

IMMUNIZATION REQUIREMENTS/TB TESTING

Proof of immunity is required for measles (rubeola), German measles (rubella), mumps, chickenpox (varicella), pertussis, tetanus and Hepatitis B. Immunity for Hepatitis B, MMR and varicella are established by a positive titer. If the titer is negative, a booster dose of the appropriate vaccine will be administered. Annual tuberculosis screening is also required. Occasionally, a clinical education facility may have more extensive immunization requirements. Influenza vaccinations are generally required for fall and winter clinical education experiences. There is an increasing number of facilities requiring Covid-19 vaccination, with more facilities anticipated to make this a requirement of students completing clinical experiences within their organization. **The additional requirements must be met before the student can practice in that facility.**

CPR, HEALTH AND SAFETY REQUIREMENTS

- Safe practice in the clinical environment is the responsibility of the student and the CI. It is the student's responsibility to inform the CI when they have not performed a specific task. The student should articulate a plan for the performance of novel tasks and the CI may give feedback as he or she deems necessary.
- All USC DPT students are required to complete the American Heart Association's (AHA) Basic Life Support (BLS) course and to maintain certification throughout their clinical experiences. Both Blended and Classroom options are acceptable. Both options do in-person training of the hands-on skills that are required for effective CPR in all patient populations. No other CPR certifications will be accepted by the USC DPT program.

If a clinical placement site has a requirement for CPR training that is different from the USC DPT program, the student must meet the additional requirement. In the event of a conflict between the USC DPT program requirement and a facility requirement, the student may contact the DCE to request an exception to the required AHA BLS certification for a specific clinical experience.

- Blood borne pathogen, standard precautions, fire safety and tuberculosis training are required annually.
- Back safety training is required at orientation.
- The student is required to inquire and have knowledge about the isolation procedures required in the affiliate facility.

HIPAA REQUIREMENTS

Students must complete annual HIPAA training by reviewing the appropriate document on the DPT clinical Education site on Blackboard and passing the online test. The training and test may be found under Clinical Information / Yearly Tests / HIPAA Training.

Additionally, the student must ascertain and adhere to the HIPAA policies and procedures specific to the clinical site where he or she interns.

CRIMINAL BACKGROUND CHECK

A criminal background check is required by the USC DPT Program. The Policy may be found in the *Clinical Education Policies* section of this Guide.

ALCOHOL AND DRUG POLICY

Students are prohibited from reporting to any clinical education experience while under the influence of alcohol or any substance that may impair the ability to function in a clinical setting. [Many facilities require drug screens.](#) If a facility requires a drug screen, the student will submit to the drug screen after consenting to the drug screen process required by the facility. Most of these drug screens are conducted by a vendor approved by the University of South Carolina according to specific instructions provided by the training facility. The process varies considerably, however, and may even be performed directly by the training facility. While on clinical experiences, students are bound by all policies and procedures of the affiliate facility.

IN - SERVICE

Students are required to give an in-service for the PHYT 851, 852, and 853 clinical education experiences. The type, time, and length of the in-service should be coordinated with the clinical instructor. If the PHYT 850 clinical site requires the student to perform an in-service, the student will also have to perform an in-service for that clinical education experience.

PRACTICE MANAGEMENT

A practice management assignment will be required for the PHYT 853 clinical education experience. The guidelines for this assignment are available on EXXAT STEPS and are sent to the CI prior to the clinical experience. Failure to complete this assignment will result in a non-passing grade for item 7 / “Clinical Reasoning” of the *Clinical Performance Instrument*.

EVIDENCE-BASED PRACTICE

An evidence-based practice assignment will be required for the PHYT 852 clinical education experience. The guidelines for this assignment are available on EXXAT STEPS and are sent to the CI prior to the clinical experience. Failure to complete this assignment will result in a non-passing grade for item 7 / “Clinical Reasoning” of the *Clinical Performance Instrument*.

PHARMACOLOGY

A pharmacology assignment will be required for the PHYT 851 clinical education experience. The guidelines for this assignment are available on EXXAT STEPS and are sent to the CI prior to the clinical experience.

INTERPROFESSIONAL COLLABORATION

Students will demonstrate intra- and inter-professional collaboration in the management of the whole patient through written and verbal communication with all members of the healthcare team, including the patient. In-patient environments require regular communication with nursing to check medical status and to communicate finding of physical therapy screens and evaluations. Communication with physicians, physician extenders, therapy personnel, case managers, prosthetists/orthotists and many others is expected.

SELF-EVALUATION

Students are expected to self-evaluate their performance in affective, cognitive, and psychomotor domains by performing the following:

- Student will complete the following prior to the clinical education experience.
 - [Student Clinical Information Form](#)
 - [Generic Abilities Assessment](#)
- During the clinical education experience,
 - And in the first days of clinical, student and clinical instructor will review the student’s self-assessed strengths and weaknesses, learning objectives and goals, plan for achieving goals, and other items on the Student Clinical Information Form at the beginning of clinical education experience.
 - Student will weekly complete the [Clinical Instructor/Student Feedback form](#) and upload it to EXXAT STEPS.

- Student will complete PatientDx Summary on EXXAT STEPS two times per week and complete the Patient Dx Category, Patient Dx Details, Patient Age sections of the Summary. Please use the notes sections to add diagnostic or functional details.
- Student will monitor their progress by filling out the Clinical Performance Instrument prior to mid-term and final evaluation sessions with his/her clinical instructor.
- Formal re-evaluation of the student's objectives and the objectives in the Clinical Performance Instrument should be performed at midterm and final evaluation periods.

EVALUATION OF CLINICAL SITE

At the end of the clinical, the student will evaluate the clinical site. This information must be shared with the facility through the clinical instructor.

This form should be completed and given to the clinical instructor immediately after the student receives their final evaluation for the clinical experience. The facility evaluation should be openly discussed with the CI.

COMMUNICATION WITH DCE DURING CLINICAL EXPERIENCE

Communication occurs primarily via forms, email, and telephone. Both the student and CI should complete a [*Week One Contact Sheet*](#) at the end of the first week to indicate if 1) the student is adjusting favorably to the clinical environment and 2) the student and clinical instructor are communicating well. During each week of the clinical education experience the student and CI should complete the [*Clinical Instructor / Student Feedback*](#) form to develop student learning objectives and to foster ongoing communication. All completed forms should be uploaded to EXXAT STEPS.

In the event of student or CI concerns regarding the clinical experience, the student and CI should candidly discuss their concerns with each other. The DCE should be contacted if the student, clinical instructor and SCCE cannot resolve these concerns or if any party wishes to involve the DCE early in the process.

The DCE will visit the site as necessary to assist the SCCE, CI, and student in resolving clinical education problems.

DESIRABLE CHARACTERISTICS OF STUDENT LEARNERS

The characteristics listed are from a 2005 article that interviewed clinical instructors and analyzed these interviews for emergent themes.^{1,2} Clinical instructor communication to the student regarding deficit areas is critical to the student improving his/her performance.² When the clinical instructor does not report problem areas to the student, the behavior is unlikely to improve.²

The student and clinical instructor are encouraged to communicate regularly. The student should seek information regarding his/her performance and the clinical instructor should freely give feedback.

Desirable Characteristics	Undesirable Characteristics
Demonstrate initiative, preparation, self-reflection and responsibility for actions	Shows an abrasive, authoritative or disrespectful attitude
Show evidence of learning (progressive questioning and independence)	Demonstration of behavior that clinical is a waste of time
Maintain openness to feedback	Does not do assignments or follow through on CI instructions
Demonstrate competence in verbal and written English	Demonstrates distracted or passive behavior that can be interpreted as lack of initiative
Verbalize appropriately and at appropriate time	Communication characterized by offensive language, non-responsiveness to patient, tasteless jokes, arguing, complaining or inability to communicate needs
Demonstrate caring and understanding	Dresses inappropriately, poor time management, dishonest, unable to keep confidentiality
Dress appropriately to clinical setting; exhibit good time management; exhibit honest, ethical and polite behavior; honor confidentiality	Demonstrates lack of balance between personal and professional life, crying, or lack of confidence
Demonstrate confidence and make patient feel comfortable	Doesn't follow policy and procedures or changes treatment plans without permission
View the rotation as a job	
Demonstrate competence appropriate to educational level.	

¹ Wolfe-Burke M. *Clinical instructors' description of student professional behaviors..* JOPTE; 2015; 19:67-76.

² Hayes KW, Huber G, Rogers J, Sanders B. *Behaviors that cause clinical instructors to question the clinical competence of physical therapist students.* Physical Therapy. 1999; 79:653-667.

DESIRABLE CHARACTERISTICS OF CLINICAL INSTRUCTORS

The desirable characteristics listed in the table have been copied from a 2016 systematic review of the impact of clinical instructor characteristics on student clinical education.¹ The undesirable characteristics are from a 1990 study.² This listing is intended to help clinical instructors to self-identify behaviors that facilitate and hinder the clinical education experience. The clinical instructor should strive to develop more of the desirable behaviors, and to limit the undesirable behaviors.

The listing is a guideline. Sometimes, undesirable traits such as correcting a student error in front of the patient may be necessary to protect the safety of the patient or to ensure the correct performance of the patient. Such corrections should be done in as tactful a manner as possible. Discussion between the clinical instructor and the student about the handling of such issues on the first day of the clinical and on an as needed basis during the clinical will probably help to create a positive clinical experience.

Desirable Characteristics	Undesirable Characteristics
<p>Personal</p> <ul style="list-style-type: none"> Participation in professional activities Self-reflective Makes time for the student Values clinical education <p>Environmental</p> <ul style="list-style-type: none"> Environment supportive of CE <p>Teaching</p> <ul style="list-style-type: none"> Integrate the student learning style Use of questioning and modeling Facilitate clinical reasoning Adapting clinical education to the student <p>Communication</p> <ul style="list-style-type: none"> Clear and concise Provides constructive formal evaluation Creates and maintains open, collegial relationship Clearly explain student responsibilities Set clear student objectives 	<ul style="list-style-type: none"> Questions students in an intimidating manner Corrects students' errors in front of patients Bases judgment of student on indirect evidence Fails to adhere to teaching schedule Fails to recognize extra effort Discusses medical cases in front of patients

¹ McCallum C, Reed R, Bachman S, Murray L: A systematic review of physical therapist clinical instructor demographics and key characteristics: impact on student clinical education experiences. JOPTE 30:11-20, 2016.

² Jarski RW, Kulig K, Olson RE: Clinical teaching in physical therapy: student and teacher perceptions. Phys Ther 70:173-178, 1990.

SUMMARY OF CLINICAL EXPERIENCES

	Summer Year 01	Summer Year 02	Spring Year 03	Summer Year 03
	PHYT 850 Clinical Experience (8 weeks)	PHYT 851 Clinical Experience (8 weeks)	PHYT 852 Clinical Experience (12 weeks)	PHYT 860 and 853 Clinical Experiences (12 weeks)
Supervision:	1:1 or 2:1 Clinical Instruction Model	1:1 or 2:1 Clinical Instruction Model	1:1 or 2:1 Clinical Instruction Model	Clinical Mentor
Goal:	Primary goal is to develop basic physical therapy patient management skills (an emphasis is placed on conducting a minimum number of 10 patient evaluations) in common orthopedic disorders.	Student is guided through simple to complex patient problems. Focus is on the development and refinement of moderate level cognitive, affective and psychomotor behaviors in the acute care setting.	Student works directly with clinical instructor to begin to make the transition from moderate level to more advanced behaviors. The student is challenged to treat patients exhibiting more complex problems specifically including neurological disorders	Student works directly with a clinical instructor to develop advanced levels of behavior appropriate to that of an entry-level practitioner in a setting of the student's choice. Student will carry a full patient load and demonstrate the ability to manage complex patients.
Environment:				
Experience Length	8 weeks	8 weeks	12 weeks	12 weeks
Number of Patients	Progress from low to moderate	Moderate	Slightly below full	Full patient load
Patient Complexity	Low to moderate	Low to high	Moderate to high	Moderate to high
Supervision Level	High to moderate	High to low	Moderate to low	Low to consultative
Error Frequency	High to Moderate	High to low	Moderate to Low	Low

PHYT 850 OVERVIEW: 320 HOUR INTEGRATED FULL-TIME CLINICAL EXPERIENCE

The purpose of this first full-time clinical experience is to progress the development of physical therapy practitioner skills in USC DPT students as itemized in the Physical Therapist Clinical Performance Instrument in an orthopedic ambulatory care setting. The clinical experience will occur over an eight-week period in the *summer semester* during the first year of the program study. A copy of the student's Program of Study will be included with the student's clinical information packet sent four to six weeks prior to the clinical experience. The Program of Study details the sequence of the student's coursework.

This clinical is intended to be a hands-on physical therapy experience; most of our students have substantial volunteer observation experience prior to arriving in the program. The expectations of the clinical environment for this clinical education experience are as follows:

Length of experience	8 weeks
Number of patients	low to moderate (at least 10 patient exam/evals)
Patient complexity	low to moderate
Level of supervision	high to moderate
Frequency of errors	high to moderate

EVALUATION

The APTA's Clinical Performance Instrument will be used to evaluate student performance. Instructions for rating performance are included in the required PT CPI training. The USC DPT program's objectives and grading criteria are included in the course syllabus. **Students are expected to prepare for midterm and final evaluations by self-rating their performance prior to these evaluative meetings with the clinical instructor.**

The evaluation process should give the student knowledge of where they need to target their skill development. It is expected the student will have many areas in which they will need to focus skill development.

We recommend students receive verbal feedback on a regular basis. Weekly clinical objectives formulated by the student with guidance from the clinical instructor and weekly review of these objectives are a requirement of the USC DPT program. The [Clinical Instructor / Student Feedback Form](#) was designed for this purpose and will be provided by the student each week of the clinical education experience.

USC'S CODE OF CONDUCT

Students enrolled in this course are bound by the University Of South Carolina Code of Academic Responsibility. Students should make themselves familiar with this code, which can be found in the **USC - Columbia Student Handbook and Policy Guide**. This rule specifically states "*It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud or deceit of any type in connection with any academic program. Any student who violates this rule or who knowingly assists another to violate this rule shall be subject to discipline.*"

PHYT 851 OVERVIEW: 320 HOUR INTEGRATED FULL-TIME CLINICAL EXPERIENCE

The purpose of this second full-time clinical experience is to progress the development of physical therapy practitioner skills in USC DPT students as itemized in the Physical Therapist Clinical Performance Instrument in an acute care setting. The clinical experience will occur over an eight-week period in the *summer semester* during the second year of the program study. A copy of the student's Program of Study will be included with the student's clinical information packet sent four to six weeks prior to the clinical experience. The Program of Study details the sequence of the student's coursework.

This is intended to be a hands-on physical therapy experience. The expectations of the clinical environment for this clinical education experience are as follows:

Experience length	8 weeks
Number of patients	moderate
Patient complexity	low to high
Supervision level	high to low
Error Frequency	high to low

EVALUATION

The APTA's Clinical Performance Instrument will be used to evaluate student performance. Instructions for rating performance are included in the required PT CPI training. The USC DPT program's objectives and grading criteria are included in the course syllabus. **Students are expected to prepare for midterm and final evaluations by self-rating their performance prior to these evaluative meetings with the clinical instructor.**

The evaluation process should give the student knowledge of where they need to target their skill development. It is expected the student will have many areas in which they will need to focus skill development.

We recommend students receive verbal feedback on a regular basis. Weekly clinical objectives formulated by the student with guidance from the clinical instructor and weekly review of these objectives are a requirement of the USC DPT program. The [Clinical Instructor / Student Feedback Form](#) was designed for this purpose and will be provided by the student each week of the clinical education experience.

USC'S CODE OF CONDUCT

Students enrolled in this course are bound by the University Of South Carolina Code of Academic Responsibility. Students should make themselves familiar with this code, which can be found in the **USC - Columbia Student Handbook and Policy Guide**. This rule specifically states "*It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud or deceit of any type in connection with any academic program. Any student who violates this rule or who knowingly assists another to violate this rule shall be subject to discipline.*"

PHYT 852 OVERVIEW: 480 HOUR INTEGRATED FULL-TIME CLINICAL EXPERIENCE

The purpose of this third full-time clinical experience is to continue development of entry-level physical therapy practitioner skills in USC DPT students as itemized in the Physical Therapist Clinical Performance Instrument in a neurological rehabilitation setting. The clinical experience will occur over a twelve-week period in the *spring semester* during the third year of the program study. A copy of the student's Program of Study will be included with the student's clinical information packet sent four to six weeks prior to the clinical experience. The Program of Study details the sequence of the student's coursework.

This is intended to be a hands-on physical therapy experience. The expectations of the clinical environment for this clinical education experience are as follows:

Experience length	12 weeks
Number of patients	slightly below full
Patient complexity	moderate to high
Supervision level	moderate to low
Error Frequency	moderate to low

EVALUATION

The APTA's Clinical Performance Instrument will be used to evaluate student performance. Instructions for rating performance are included in the required PT CPI training. The USC DPT program's objectives and grading criteria are included in the course syllabus. **Students are expected to prepare for midterm and final evaluations by self-rating their performance prior to these evaluative meetings with the clinical instructor.**

The evaluation process should give the student knowledge of where they need to target their skill development. It is expected the student will have many areas in which they will need to focus skill development.

We recommend students receive verbal feedback on a regular basis. Weekly clinical objectives formulated by the student with guidance from the clinical instructor and weekly review of these objectives are a requirement of the USC DPT program. The [Clinical Instructor / Student Feedback Form](#) was designed for this purpose and will be provided by the student each week of the clinical education experience.

USC'S CODE OF CONDUCT

Students enrolled in this course are bound by the University Of South Carolina Code of Academic Responsibility. Students should make themselves familiar with this code, which can be found in the **USC - Columbia Student Handbook and Policy Guide**. This rule specifically states "*It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud or deceit of any type in connection with any academic program. Any student who violates this rule or who knowingly assists another to violate this rule shall be subject to discipline.*"

PHYT 853 OVERVIEW: 480 HOUR TERMINAL FULL-TIME CLINICAL

The purpose of this terminal full-time clinical experience is to continue development of entry-level physical therapy practitioner skills in USC DPT students as itemized in the Physical Therapist Clinical Performance Instrument in a setting of the students' choice. The PHYT 853 clinical experience will occur over a twelve-week period in the *summer semester* during the third year of the program study. A copy of the student's Program of Study will be included with the student's clinical information packet sent four to six weeks prior to the clinical experience. The Program of Study details the sequence of the student's coursework.

This is intended to be a hands-on physical therapy experience. The expectations of the clinical environment for this clinical education experience are as follows:

Experience length	12 weeks
Number of patients	full patient load
Patient complexity	moderate to high
Supervision level	low to consultative
Error Frequency	low

EVALUATION

The APTA's CPI will be used to evaluate student performance in the PHYT 853 experience. Instructions for rating performance are included in the required PT CPI training. The USC DPT program's objectives and grading criteria are included in the course syllabus. **Students are expected to prepare for midterm and final evaluations by self-rating their performance prior to these evaluative meetings with the clinical instructor.**

The evaluation process should give the student knowledge of where they need to target their skill development. It is expected the student will have many areas in which they will need to focus skill development.

We recommend students receive verbal feedback on a regular basis. Weekly clinical objectives formulated by the student with guidance from the clinical instructor and weekly review of these objectives are a requirement of the USC DPT program. The [Clinical Instructor / Student Feedback Form](#) was designed for this purpose and will be provided by the student each week of the clinical education experience.

USC'S CODE OF CONDUCT

Students enrolled in this course are bound by the University Of South Carolina Code of Academic Responsibility. Students should make themselves familiar with this code, which can be found in the **USC - Columbia Student Handbook and Policy Guide**. This rule specifically states "*It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud or deceit of any type in connection with any academic program. Any student who violates this rule or who knowingly assists another to violate this rule shall be subject to discipline.*"

COMMUNICATION AND EVALUATION PLAN

Most forms, instructions, and information referred to in this plan may be in the pages immediately following

1. A [clinical education agreement](#) between the USC DPT program and the facility is negotiated.
2. The DCE visits the majority of clinical sites prior to placing a student at the site.
3. The Clinical Site Information Form or a facility equivalent form is requested during or immediately after negotiation of the contract.
4. The USC DPT program will send [Clinical Request Forms](#) for clinical education experiences occurring in the next calendar year to the facility on March 1st of the preceding year. For example, requests for calendar year 2023 would be sent on March 1st of 2022. Multiple methods for sending requests may be used such as mail, e-mail, fax, or EXXAT STEPS.
5. The facility should return the completed [Clinical Request Form](#) to the USC DPT program by April 15, approximately 6 weeks after the form is received by the facility.
6. Students will complete a [Clinical Preference Form](#) provided by the Clinical Education office, expressing location and clinical type preferences, when directed by the DCE.
7. Students will be assigned to clinical facilities at least 6 months prior to the beginning date of the clinical education experience.
8. Notification to the facility that a student will or will not use the allotted slot will occur at least 2-3 months prior to the clinical education experience.
9. The student will call the facility's SCCE once they have been assigned to the facility. The student is required to review the Clinical Site Information Form, contract and any facility provided materials prior to calling the facility.
10. Students will review, complete and submit the following prior to the clinical experience, when requested by the DCE.
 - a. [Contract Review Form](#)
 - b. [Authorization for Release of Records and Information](#)
 - c. [Clinical Education Experience Program Agreement](#)
 - d. [Student Clinical Information Form](#)
 - e. [Generic Abilities Assessment and Information](#)
 - f. [Negative Criminal Activity Affirmation Form](#)
 - i. Criminal Background check is performed on students during the 1st semester of the program according to [Criminal Background Check policy](#) in section 7 of this manual.

- g. [State Practice Act Review Form](#)
 - h. Proof of current CI licensure as a PT from the state licensing authority
 - i. Any forms and tests specific to the facility, including Drug Tests
11. The student will review the following forms and documents 6 weeks prior to the clinical education experience.
 - a. APTA Clinical Performance Instrument
 - b. Appropriate PHYT 850, 851, 852, or 853 course syllabus/syllabi
 12. The DCE will send completed forms a, b, c, d, e, f, g and h in item 10, evidence of professional and general liability insurance coverage and worker's compensation insurance, immunization information, a copy of the [Clinical Instructor / Student Constructive Feedback](#) form, a course specific assignment, and a copy of the student's Program of Study to the site 4 weeks prior to the beginning date of the clinical education experience. The DCE will also send other documentation as required by the facility. Criminal background check information is sent on request only. The student will arrive at the facility on the scheduled day at the scheduled time.
 13. Prior to a student's first clinical education experience, the student will successfully complete training to use the PT CPI (evaluation tool utilized to rate student performance during clinical education experiences). The PT CPI may not be accessed by either the student, CI, or SCCE until this training is completed.
 14. The student should be oriented to the facility on Day 1; the student and Clinical Instructor should review and discuss the [Student Clinical Information Form](#) in the first two days of the clinical education experience.
 15. Ideally, daily communication will occur between the student and Clinical Instructor regarding the student's performance and progress toward both personal and *Clinical Performance Instrument* objectives.
 16. The student and CI will submit [Week One Contact](#) forms to the DCE at the end of the first week and the DCE will review the form.
 17. The student will foster completion of the [Clinical Instructor / Student Feedback](#) form on a weekly basis and submit it to the DCE. This form may be obtained by the student from EXXAT STEPS and should be electronically submitted to the DCE.
 18. The DCE will review weekly [Clinical Instructor / Student Feedback](#) forms and call Clinical Instructor or Student if either has indicated a need to communicate with the DCE. If telephone communication is non-routine, the DCE will keep a written or email log of the conversation.
 19. If problems arise that are not resolved through telecommunication, the DCE will visit the site (if feasible) to facilitate resolution of the learning problem.
 20. The student will twice weekly enter PatientDx Summary information on EXXAT STEPS to capture the lifespan and diagnostic variety seen by the student across all clinical education experiences.

21. Midterm evaluations of the student utilizing the *Clinical Performance Instrument* should be completed at the midpoint of the clinical education experience. The student is also required to self-assess their performance on the *CPI* prior to the Clinical Instructor's evaluation. Both the Clinical Instructor and the student should follow the *Clinical Performance Instrument* instructions and refer to syllabus objectives as necessary to complete the *CPI*.
22. The CI electronically signs the midterm CI *CPI* evaluation of the student and the student electronically signs both the self *CPI* evaluation and the CI *CPI* evaluation of student performance after the CI has reviewed the *CPI* evaluation with the student.
23. DCE reviews the mid-term *CPI*.
24. Final evaluations of the student utilizing the *Clinical Performance Instrument* should be completed at the end of the clinical education experience. The student is again required to self-assess their performance on the *CPI* prior to the Clinical Instructor's evaluation.
25. The CI electronically signs the final CI *CPI* evaluation of the student and the student electronically signs both the final *CPI* self-evaluation and the final CI *CPI* evaluation of student performance after the CI has reviewed the *CPI* evaluation with the student.
26. Student completes [*Student Evaluation of Clinical Educational Experience*](#) form prior to receiving the final *CPI* evaluation from the Clinical Instructor.
27. The student shares the [*Student Evaluation of Clinical Educational Experience*](#) form with the Clinical Instructor immediately after the student receives his/her *CPI* evaluation.
28. The Clinical Instructor completes the [*Clinical Instructor Curriculum Review Form*](#) and gives it to the student to submit through EXXAT STEPS.
29. The Clinical Instructor and SCCE complete individual [*CI/SCCE Evaluation of USC DCE*](#) forms during the clinical experience and send to the DPT Program Director.
30. The student submits the [*Student Evaluation of Clinical Educational Experience*](#), [*Diagnosis Listing*](#), and [*Interprofessional Collaboration Log and Self Reflection*](#) forms through EXXAT STEPS. The [*Student Evaluation of DCE*](#) is sent to the DPT Program Director.
31. The DCE reviews and grades the *CPI*.
32. The student will attend a mandatory clinical meeting after completion of the Clinical Education Experience. If the student does not attend the meeting or if a student's required paperwork is not satisfactorily completed and submitted, an Incomplete, "I", will be assigned by the DCE for the Clinical Education Experience. The "I" may be removed when the student completes the paperwork and an additional assignment from the DCE.

CLINICAL REQUEST FORM

**DOCTORAL PHYSICAL THERAPY PROGRAM
UNIVERSITY OF SOUTH CAROLINA
DEPT EXSC, BLATT PE CENTER
COLUMBIA, SC 29208**

TELEPHONE 803/777-0478 / FAX: 803/777-8422 / E-MAIL PTClinEd@mailbox.sc.edu

TO: SITE COORDINATOR OF CLINICAL EDUCATION
FROM: Matthew Geary, PT, DPT – DIRECTOR OF CLINICAL EDUCATION
DATE:
RE: Clinical Experience Requests

The **initial clinical experience** (PHYT 850) is a full time eight (320 hour over 8 weeks) experience to develop orthopedic clinical skills. This experience occurs from June 24, 2019 – August 16, 2019. This experience should occur in an outpatient orthopedic setting and develop the student’s ability to examine, evaluate, diagnose, and establish plans of care for patients.

The **second clinical experience** (PHYT 851) is a full-time (320 hours over 8 weeks) experience and the purpose is to develop acute care clinical skills. The students have only taken the introductory course for Neuromuscular Assessment and Treatment course prior to this clinical. This experience occurs from June 24, 2019 – August 16, 2019.

The **third clinical experience** (PHYT 852) is a full-time (480 hours over 12 weeks) experience and the purpose is to develop clinical skills with neurological and orthopedic rehabilitation patients. Neurological patients should compose **40%** of the case mix if possible. This experience occurs from January 07, 2019 – March 29, 2019.

The **fourth clinical experience** (PHYT 853) is the terminal full-time (480 hours over 12 weeks) experience and the purpose is to develop entry-level skills in a setting that the student chooses. A wide variety of experiences are desired for this clinical. This experience occurs from July 29, 2019 – October 18, 2019.

Please answer the following questions to indicate the number of students you can train, the type of experience (ortho, neuro, acute, rehab, subacute, ECF, pediatrics, industrial medicine, wellness, school-based, wound care), and general contact information regarding your facility. Selected CP’s must have 1 year of clinical experience and should express interest in training students.

Name of Facility

Name of SCCE

SCCE Phone

email

Fax Number

	PHYT 850 Year 1	PHYT 851 Year 2	PHYT 852 Year 3	PHYT 853 Year 3
# of Students/Experience				
Type of Experience	Ortho	Acute	Neuro	Student Choice

REQUEST FOR NEW CLINICAL SITE

Class of _____

Requested by _____

Date of Request _____

Best Time to Reach SCCE _____

Rotation Date _____

General Information

Name of Facility _____

Telephone Number _____

Fax Number _____

Address _____

Contact Person _____

City, State, Zip _____

Position of Contact Person _____

Type of Clinical Experience _____

e-mail _____

Educational Opportunities Provided

Clinical Instructors

Benefits Available (e.g., housing provided, stipends, etc.)

Other Academic Programs Affiliated with this Facility

Why do you think this facility should be added to our list?

How did you find out about this facility?

Is this a physician-owned physical therapy service? Yes No

CONTRACT REVIEW FORM

Student Name: _____

Facility Name: _____

The undersigned physical therapy student acknowledges that she/he has:

- read a copy of the above stated contract;
- noted all provisions requiring an obligation on the part of the student; including that criminal background and/or drug screen information may be collected and held by the Director of Clinical Education and / or transmitted to the Site; and
- been provided an opportunity to discuss the contractual obligations required of the student.

Student Signature: _____

Date: _____

**AUTHORIZATION FOR RELEASE OF RECORDS
AND INFORMATION**

RE: _____
(Print Name of Student)

TO: The University of South Carolina (hereinafter referred to as the "Institution"), and any Facility where I participate in or request to participate in an applied learning experience (hereinafter referred to as the "Facility").

As a condition of my participation in an applied learning experience, and with respect thereto, I grant my permission, and authorize the University of South Carolina, or any of its member institutions, to release my educational records, (which shall include academic records, and records created as a result of my participation in an applied learning experience), health records, criminal background records, drug screen information and records, and any other information in its possession which it deems appropriate, to any Facility where I participate in, or request to participate in, an applied learning experience, including but not limited to the Facility (hereinafter referred to as the "Facility"). I further authorize the release of any information relative to my health to the Facility for purposes of verifying the information provided by me and determining my ability to perform my assignments in the applied learning experience. I also grant my permission to and authorize the Facility to release the above information to the Institution. The purpose of this release and disclosure is to allow the Facility and the Institution to exchange information about my medical, criminal background, and drug screen information and records history and about my performance in an applied learning experience.

I further understand that I may revoke this authorization at any time by providing written notice to the above stated person(s)/entities, except to the extent of any action(s) that has already been taken in accordance with this "Authorization for Release of Confidential Records and Information".

I further agree that this authorization will be valid throughout my participation in the applied learning experience. I further request that you do not disclose any information to any other person or entity without prior written authority from me to do so, unless disclosure is authorized or required by law. I understand that this authorization shall continue in force until revoked by me by providing written notice to the Institution and the Facility, except to the extent of any action(s) that has already been taken in accordance with this "Authorization for Release of Records and Information".

In order to protect my privacy rights and interests, other than those specifically released above, I may elect to not have a witness to my signature below. However, if there is no witness to my signature below, I hereby waive and forfeit any right I might have to contest this release on the basis that there is no witness to my signature below. Further, a copy or facsimile of this "Authorization for Release of Records and Information" may be accepted in lieu of the original.

I have read, or have had read to me, the above statements, and understand them as they apply to me. I hereby certify that I am eighteen (18) years of age or older, or my parent or guardian has signed below; that I am legally competent to execute this "Authorization for Release of Records and Information"; and that I, or my parent and/or guardian, have read carefully and understand the above "Authorization for Release of Records and Information"; and that I have freely and voluntarily signed this "Authorization for Release of Records and Information".

This the _____ day of _____.

Participant Signature

Witness Signature

Print Name: _____

Print Name: _____

CLINICAL EDUCATION EXPERIENCE STUDENT AGREEMENT

In consideration for participating in a clinical education experience program at Facility or any other Facility where I may participate in such a program (hereinafter referred to as the "Facility"), I hereby agree to the following:

To follow the administrative policies, standards and practices of the Facility when in the Facility.

To report to the Facility on time and to follow all established regulations of the Facility.

If requested, to undergo a health examination as necessary to meet program requirements, including testing to determine infectious or contagious diseases. Also, to provide evidence of immunity, as may be appropriate and to meet program requirements.

To undergo a drug screen and criminal background check as may be required by the facility.

To keep in confidence all medical, health, financial and social information (including mental health) pertaining to particular clients or patients.

To not publish any material related to my educational training program that identifies or uses the name of the University, its members of the Board of Trustees, or the Facility, its members, clients, students, faculty or staff, directly or indirectly, unless I have received written permission from the University and the Facility.

To comply with all federal, state and local laws regarding the use, possession, manufacture or distribution of alcohol and controlled substances.

To follow Center for Disease Control and Prevention (C.D.C.) Universal Precautions for Bloodborne Pathogens, C.D.C. Guidelines for Tuberculosis Infection Control, and Occupational Safety and Health Administration (O.S.H.A.) Respiratory Protection Standard.

To arrange for and be solely responsible for my living accommodations while at the Facility.

To provide the necessary and appropriate uniforms and supplies required where not provided by the Facility.

To wear a name tag that clearly identifies me as a student.

Further, I understand and agree that I will not receive any monetary compensation from the University or the Facility for any services I provide to the Facility or its clients, students, faculty or staff as a part of my clinical educational experience program.

I also understand and agree that I shall not be deemed to be employed by or an agent or a servant of the University or the Facility; that the University and Facility assumes no responsibilities as to me as may be imposed upon an employer under any law, regulation or ordinance; and that I am not entitled to any benefits available to employees. Therefore, I agree not to in any way to hold myself out as an employee of the University, or the Facility.

I understand and agree that I may be immediately withdrawn from the Facility's educational training program based upon a perceived lack of competency on my part, my failure to comply with the rules and policies of the Institution or Facility, if I pose a direct threat to the health or safety of others or, for any other reason the University or the Facility reasonably believes that it is not in the best interest of the University, the Facility or the Facility's patients or clients for me to continue.

I further understand that potential risks of clinical education include, but are not limited to, exposure to infectious diseases, hazardous chemicals and musculoskeletal disorders including back injuries.

I understand and agree to show proof of liability insurance in amounts satisfactory to the Facility, and covering my activities at the Facility, and to provide evidence of such insurance upon request of the Facility.

I further understand that all medical or healthcare (emergency or otherwise) that I receive at the Facility will be my sole responsibility and expense.

I have read, or have had read to me, the above statements, and understand them as they apply to me. I hereby certify that I am eighteen (18) years of age or older, suffer under no legal disabilities, and that I have freely and voluntarily signed this "Clinical Education Experience Program Agreement."

This the _ day of _____.

Signature

Witness Signature

Print Name: _____

Print Name: _____

STUDENT CLINICAL INFORMATION FORM

Check the clinical education experience: PHYT850 PHYT851 PHYT852 PHYT 853

Please complete the form legibly.

Student Name

Phone

Birth Year

Previous physical therapy clinical education experiences (PHYT 850, PHYT 851, PHYT 852)

Student Instruction: Type of facility and brief description of your activities should be included.

A

B.

C.

Clinical educational experiences are critical components of a student’s training designed to prepare the student for entry-level physical therapy practice. This training may be individualized if the clinical instructor has knowledge of the student’s self-perceived performance level.

In the table below, the student has assessed his/her strengths and weaknesses. Objectives to address areas of weakness and to guide the clinical education of the student will be developed in a subsequent item of this form.

Student instruction: The student should refer to the *Clinical Performance Instrument*, the *Generic Abilities Self-Assessment*, and specific course syllabus objectives prior to completing the following table. Specific strengths and weaknesses must be stated for the first five items of the table.

	Strengths	Weaknesses
1. Patient examination/ re-examination		
2. Patient diagnosis, prognosis, and goal setting (choose one or several of these items)		
3. Establishing plan of care and performing interventions (choose one or several of these items)		
4. Communication with patient, family, and staff (written or oral)		
5. Integrating research into clinical practice.		

Develop objectives for the clinical education experience to address **each identified weakness on the previous table** and to guide your development toward the **entry-level** performance criterion.

State how you would like your CI to help you progress to entry-level performance on the above objectives.

Describe the level of supervision you are comfortable with.

Describe how and when you would like to receive feedback from your CI.

State or discuss anything else you think your CI should know.

Student Signature

Date

DCE Signature

Date

GENERIC ABILITIES

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the profession's core of knowledge and technical skills but are nevertheless required for success in the profession. Students will self-assess these abilities as a self-learning tool. **The clinical instructor assesses these abilities when the student has a problem not directly related to knowledge or psychomotor skill.** Ten generic abilities were identified through a study conducted at UW-Madison in 1991-92. The ten abilities and definitions developed are:

Generic Ability	Definition
Commitment to Learning	The ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.
Interpersonal Skills	The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.
Communication Skills	The ability to communicate effectively (i.e., speaking, body language, reading, writing, listening) for varied audiences and purposes.
Effective Use of Time and Resources	The ability to obtain the maximum benefit from a minimum investment of time and resources.
Use of Constructive Feedback	The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.
Problem-Solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
Professionalism	The ability to exhibit appropriate professional conduct and represent the profession effectively.
Responsibility	The ability to fulfill commitments and to be accountable for actions and outcomes.
Critical Thinking	The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
Stress Management	The ability to identify sources of stress and to develop effective coping behaviors.

GENERIC ABILITIES BEHAVIORAL CRITERIA

Instructions: Select criterion levels that best describe your current generic abilities for each category.

Generic Abilities	Beginning Level Behavioral Criteria	Developing Level Behavioral Criteria	Entry Level Behavioral Criteria
Commitment to Learning	Identifies problems; formulates appropriate questions; identifies and locates appropriate resources; demonstrates a positive attitude (motivation) toward learning; offers own thoughts and ideas; identifies need for further information.	Prioritizes information needs; analyzes and subdivides large questions into components; seeks out professional literature; sets personal and professional goals; identifies own learning needs based on previous experiences; plans and presents an in-service, or research or case studies; welcomes and/or seeks new learning opportunities.	Applies new information and re-evaluates performance; Accepts that there may be more than one answer to a problem; recognizes the need to and is able to verify solutions to problems; read articles critically and understands the limits of application to professional practice; researches and studies areas where knowledge base is lacking.
Interpersonal Skills	Maintains professional demeanor in all clinical interactions; demonstrates interest in patients as individuals; respects cultural and personal differences of others; is non-judgmental about patients' lifestyles; communicates with others in a respectful, confident manner; respects personal space of patients and others; maintains confidentiality in all clinical interactions; demonstrates acceptance of limited knowledge and experience.	Recognizes impact of non-verbal communication and modifies accordingly; assumes responsibility for own actions; motivates others to achieve; establishes trust; seeks to gain knowledge and input from others; respects role of support staff.	Listens to patient but reflects back to original concern; works effectively with challenging patients; responds effectively to unexpected experiences; talks about difficult issues with sensitivity and objectivity; delegates to others as needed; approaches others to discuss differences in opinions; accommodates differences in learning styles.
Communication Skills	Demonstrates understanding of basic English (verbal and written); uses correct grammar, accurate spelling and expression; writes legibly; recognizes impact of non-verbal communication; listens actively; maintains eye contact.	Utilizes non-verbal communication to augment verbal message; restates, reflects and clarifies message; collects necessary information from the patient interview.	Modifies communication (oral and written) to meet needs of different audiences; presents verbal or written messages with logical organization and sequencing; maintains open and constructive communication; utilizes communication technology effectively; dictates clearly and concisely.

Generic Abilities	Beginning Level Behavioral Criteria	Developing Level Behavioral Criteria	Entry Level Behavioral Criteria
Effective Use of Time and Resources	Focuses on tasks at hand without dwelling on past mistakes; recognizes own resource limitations and uses existing resources effectively; uses unscheduled time efficiently; completes assignments in timely fashion.	Sets up own schedule; coordinates schedule with others; demonstrates flexibility; plans ahead.	Sets priorities and reorganizes when needed; considers patient's goals in context of patient, clinic, and third party resources; has ability to say "No", performs multiple tasks simultaneously and delegates when appropriate; uses scheduled time with each patient efficiently.
Use of Constructive Feedback	Demonstrates active listening skills; actively seeks feedback and help; demonstrates a positive attitude toward feedback; critiques own performance; maintains two-way information.	Assesses own performance accurately; utilizes feedback when establishing pre-professional goals; provides constructive and timely feedback when establishing pre-professional goals; provides constructive and timely feedback when establishing pre-professional goals; develops plan of action in response to feedback.	Seeks feedback from clients; modifies feedback given to clients according to their learning styles; reconciles differences with sensitivity; considers multiple approaches when responding to feedback.
Problem-Solving	Recognizes problems; states problems clearly; describes known solutions to problem; identifies resources needed to develop solutions; begins to examine multiple solutions to problems.	Prioritizes problems; identifies contributors to problem; considers consequences of possible solutions; consults with others to clarify problem.	Implements solutions; reassesses solutions; evaluates outcomes; updates solutions to problems based on current research; accepts responsibility for implementing of solutions.
Professionalism	Abides by APTA Code of Ethics; demonstrates awareness of state licensure regulations; abides by facility policies and procedures; projects professional image; attends professional meetings; demonstrates honesty, compassion, and continuous regard for all.	Identifies appropriate professional role models; discusses societal expectations of the profession; acts on moral commitment; involves other health care professionals in decision-making; seeks informed consent from patients.	Demonstrates accountability for professional decisions; treats patients within scope of expertise; discusses role of physical therapy in health care; keeps patient as priority.
Responsibility	Demonstrates dependability; demonstrates punctuality; follows through on commitments; recognizes own limits.	accepts responsibility for actions and outcomes; provides safe and secure environment for patients; offers and accepts help; completes projects without prompting.	Directs patients to other health care professionals when needed; encourages patient accountability.

Generic Abilities	Beginning Level Behavioral Criteria	Developing Level Behavioral Criteria	Entry Level Behavioral Criteria
Critical Thinking	Raises relevant questions; considers all available information; states the result of scientific literature; recognizes “holes” in knowledge base; articulates ideas.	Feels challenged to examine ideas; understands scientific method; formulates new ideas; seeks alternative ideas; forms alternative hypotheses; critiques hypotheses and ideas.	Exhibits openness to contradictory ideas; assess issues raised by contradictory ideas; justifies solutions selected; determines effectiveness of applied solutions.
Stress Management	Recognizes own stressors or problems; recognizes distress or problems in others; seeks assistance when appropriate; maintains professional demeanor in all situations.	Maintains balance between professional and personal life; demonstrates effective affective responses in all situations; accepts constructive feedback; establishes outlets to cope with stressors.	Prioritizes multiple commitments, responds calmly to urgent situations; tolerates inconsistencies in health care environment.

GENERIC ABILITIES ASSESSMENT

**FORM 6
STUDENT
POSSIBLY CI**

***Instructions:** Assess each of the ten abilities based on the Generic Abilities Behavioral Criteria by circling the appropriate level. Please provide comments to support your assessments. Please sign and date the assessment. The student should self-assess using this tool before and during each clinical learning experience. The clinical instructor may assess the student using this tool if needed.*

Student Name _____

B – Beginning Level D – Developing Level E- Entry Level

Commitment to Learning	B	D	E
Comments: _____			

Interpersonal Skills	B	D	E
Comments: _____			

Communication Skills	B	D	E
Comments: _____			

Effective Use of Time and Resources	B	D	E
Comments: _____			

Use of Constructive Feedback	B	D	E
Comments: _____			

Problem Solving	B	D	E
Comments: _____			

Professionalism	B	D	E
Comments: _____			

Responsibility	B	D	E
Comments: _____			

Critical Thinking	B	D	E
Comments: _____			

Stress Management	B	D	E
Comments: _____			

Student Signature _____

Evaluator Signature _____

Date _____

STATE PRACTICE ACT REVIEW FORM

Student Name: _____

Facility Name: _____

The undersigned physical therapy student acknowledges that she/he has:

- read a copy of the _____ state physical therapy practice act for the clinical facility;
- noted all provisions requiring an obligation on the part of the student; and

Student Signature: _____

Date: _____

NEGATIVE CRIMINAL ACTIVITY AFFIRMATION

Student Name: _____

Facility Name: _____

The undersigned physical therapy student affirms that they:

- have not had any criminal convictions subsequent to the original criminal background check performed by the University of South Carolina physical therapy program.
- understand that a fraudulent affirmation of negative convictions may result in dismissal from the USC DPT program.

Student Signature: _____

Date: _____

CLINICAL GRADING POLICY

The physical therapy program at the University of South Carolina will utilize the *CPI-Web (Clinical Performance Instrument)* for the grading of PHYT 850, 851, 852, and 853 clinical education experiences. The PT *CPI-Web* is the recommended clinical performance assessment tool of the APTA and may not be altered. Each academic program develops its own grading criteria regarding usage of the *CPI*.

A series of clinical objectives for each clinical has been developed by the USC PT program. These objectives are printed in the course syllabus for each clinical course. The Clinical Instructor should assess progress toward these objectives in determining the level of achievement on each criterion of the PT *CPI*. The DCE determines the final clinical grade by evaluating student progress toward expectations outlined in the specific course syllabus as reported by the clinical instructor

Students will also assess their abilities and establish a few objectives prior to each clinical. This self-assessment is useful to the clinical instructor in designing the experience and understanding the perception of the student regarding his/her abilities.

Mid-term and final evaluations are required. The USC DPT Program requires weekly evaluations utilizing the *Clinical Instructor / Student Constructive Feedback Form* to review progress on previously set objectives and to establish objectives for areas identified as needing further improvement. The student will self-evaluate prior to receiving mid-term and final evaluations from the Clinical Instructor using the student self-evaluation *CPI*. Narrative comments when completing the *CPI* are required.

If a student is having problems or the clinical instructor has any questions regarding the clinical experience, the DCE should be called at 803-777-0478.

WEEK ONE STUDENT CONTACT SHEET

Clinical Education Experience: PHYT850 PHYT851 PHYT852 PHYT 853

Student Name

Date

Clinical Instructor

Facility

Phone

Do you have concerns regarding your performance or adjustment to this experience at this time?

Do you feel that you and your clinical instructor communicate well?

The DCE will call you if you answered “yes” to the first question or “no” to the second question.

WEEK ONE CI CONTACT SHEET

Clinical Education Experience: PHYT 850 PHYT 851 PHY T852 PHYT 853

Student Name

Date

Clinical Instructor

Facility

Phone

Does the student exhibit any performance or adjustment problems at this time?

Do you feel that you and the student communicate well?

Did you receive and review the student information packet for the Clinical Instructor?

Did you provide a departmental orientation to the student during the first few days of the clinical?

The DCE will call you if you answered “yes” to the first question or “no” to the second or third question.

STUDENT EVALUATION OF CLINICAL EDUCATIONAL EXPERIENCE

Student Name _____

CI Name(s) _____

Dates of Experience _____

Name of Facility _____

Facility Type _____

Patient Types _____

Please rate each statement by circling the appropriate number according to the scale below. Please comment as needed.

4 – strongly agree 3 – agree 2 – disagree 1 – strongly disagree NA – not applicable

Statement	Accreditation Criteria	Rating	Comment
1. I received an orientation that provided me with an awareness of the information and resources I would need for this experience.	4.1.4	4 3 2 1 NA	
2. I clearly knew the person(s) to whom I was directly responsible and accountable.	4.1.4, 3.6	4 3 2 1 NA	
3. The CI clearly identified and explained my responsibilities as a student physical therapist.	4.1.4, 3.6	4 3 2 1 NA	
4. My personal learning objectives were considered in planning my learning experience..	4.1.4, 3.6	4 3 2 1 NA	
5. During the first week of the clinical experience, my CI and I identified specific skills needing practice to achieve competency.	4.1.4, 3.6	4 3 2 1 NA	
6. Daily performance feedback was provided to me in an effective manner.	4.1.4, 3.6	4 3 2 1 NA	
7. Clinical learning objectives were appropriately evaluated and adjusted on a weekly basis.	4.1.4, 3.6	4 3 2 1 NA	
8. Learning experiences were modified according to my demonstrated level of performance.	4.1.4, 3.6	4 3 2 1 NA	
9. My level of supervision was adjusted appropriately as my abilities changed during the clinical experience.	4.1.4, 3.6	4 3 2 1 NA	
10. I was given an adequate time allotment for questions and discussion during individual patient evaluations and treatments.	4.1.4, 3.6	4 3 2 1 NA	

Statement	Accreditation Criteria	Rating	Comment
11. The staff effectively instructed me in patient care skills and behaviors that I needed to learn.	4.1.4, 3.6	4 3 2 1 NA	
12. I was given ample opportunity for hands-on practice.	3.6	4 3 2 1 NA	
13. My patient caseload during the experience was appropriate.	3.5	4 3 2 1 NA	
14. The clinical faculty served as appropriate professional role models for me.	3.5, 3.8.3.3	4 3 2 1 NA	
15. Clinical faculty consistently made provisions for patient privacy.	3.8.3.1, 3.8.3.3	4 3 2 1 NA	
16. Clinical faculty consistently made provisions for informed consent.	3.8.3.1, 3.8.3.3	4 3 2 1 NA	
17. The clinical faculty used clinical/research evidence to support their clinical practice.	3.8	4 3 2 1 NA	
18. The clinical faculty adhered to ethical and legal codes and standards.	3.8.3.4, 3.8.3.5	4 3 2 1 NA	
19. The physical therapy provided met a high standard of care.	3.5, 4.1.4	4 3 2 1 NA	
20. Clinical faculty appreciated and dealt with individual and cultural differences effectively.	3.8.3.2	4 3 2 1 NA	

21. Check the learning experiences that occurred in the clinical experience below:
- Administration and business management
 - Attended in-services/educational programs
 - Attended special clinics
 - Attended team meetings/conferences/grand rounds
 - Collaborative treatment with other disciplines to provide patient/client care (Please specify disciplines) _____
 - Directed and supervised PTA's and other support personnel
 - Observation of surgery
 - Opportunities for providing consultation
 - Performed systematic data collection as part of an investigative study
 - Presented in-service
 - Participated in wellness/health promotion programs
 - Provided clinical instruction to another student
 - Other _____

22. Using the 1-4 point scale below, describe the frequency with which you provided the following components of care (from the patient/client management model) during this clinical experience (Accreditation criterion 3.5)

1 = No experience encountered (never) **2 = ≤ 5 experiences encountered (rarely)**
3 = 6 – 10 experiences encountered (occasionally) **4 = > 10 experiences encountered (often)**

Component of Care	Accreditation Criteria	Experience Category			
		1	2	3	4
a. Examination					
Screening	3.8.3.15	1	2	3	4
History taking	3.8.3.16	1	2	3	4
Systems review	3.8.3.16	1	2	3	4
Tests and measures	3.8.3.16	1	2	3	4
b. Evaluation	3.8.3.17	1	2	3	4
c. Diagnosis	3.8.3.18-20	1	2	3	4
d. Prognosis	3.8.3.21	1	2	3	4
e. Plan of Care					
Setting Goals	3.8.3.22-26	1	2	3	4
Discharge Planning	3.8.3.22-26	1	2	3	4
f. Interventions					
Coordination, communication, documentation	3.8.3.1, 3.8.3.30	1	2	3	4
Patient/client-related instruction	3.8.3.29	1	2	3	4
Direct intervention	3.8.3.27-28	1	2	3	4
g. Outcomes assessment		1	2	3	4

List the five most common interventions provided

- 1.
- 2.
- 3.
- 4.
- 5.

What were the strengths of this clinical education experience?

What changes would you suggest for this clinical education experience?

Please state any other comments you may have.

Date of Discussion: _____

**(O P T I O N A L) S T U D E N T C U R R I C U L U M R E V I E W
F O R M**

This information is gathered in annual program review meetings with the DPT program director. You may choose to use this form at the end of each clinical experience to help you reflect on how the USC academic and clinical programs are preparing you to become a physical therapist. It may help you to provide input to the program director in her annual program review meetings with your class.

Clinical Education Experience: PHYT 850 PHYT 851 PHYT 852 PHYT 853

Clinical Site

Date

What recommendations do you have for changing the academic curriculum?

What recommendations do you have for changing the clinical program?

What recommendations do you have for changing the communication between the DCE and the student before, during, and after the clinical education experience?

What is the curriculum doing well?

**CLINICAL INSTRUCTOR (CI) CURRICULUM
REVIEW FORM**

Clinical Education Experience: PHYT 850 PHYT 851 PHYT 852 PHYT 853

Based on your experience with this student, what recommendations do you have for changes in their academic or clinical education?

How might the DCE improve co-ordination, communication, and/or interventions between the school and clinical site?

Did you receive adequate information regarding your rights and privileges as a clinical instructor of the USC DPT program? If not, how can our program communicate this information more effectively?

What is the curriculum doing well?

STUDENT EVALUATION OF USC DCE

Please evaluate Matthew Geary, the Director of Clinical Education (DCE) for the University of South Carolina using this form.

Clinical Education Experience: PHYT 850 PHYT 851 PHYT 852 PHYT 853

Name: _____ Date: _____

Site: _____

1. Please rate timeliness of communication from DCE regarding your clinical assignment.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

2. Please rate the adequacy of instruction in clinical education policies and procedures.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

3. Please rate the adequacy of instruction in grading procedures.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

4. Please rate the quality, frequency, and quantity of the communication with the DCE during the clinical education experience.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

5. Please rate the appropriateness of the homework assignment provided for this clinical.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

CI/SCCE EVALUATION OF USC DCE

Please evaluate Matthew Geary, the Director of Clinical Education (DCE) for the University of South Carolina using this form.

Name: _____ Clinical Role: SCCE CI

Site: _____

Date: _____

1. Please rate timeliness of communication from DCE regarding initial placement of the student
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

2. Please rate the pre-clinical information you received from the clinical site about the student and the program.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

3. Please rate the quality, frequency, and quantity of the communication with the DCE during the clinical education experience.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

4. Please rate the appropriateness of the homework assignment provided for this clinical.
- | | |
|-----------------|---------------------------|
| 2 | 1 |
| adequate | less than adequate |

Comments: _____

Additional Comments:

**CLINICAL INSTRUCTOR / STUDENT
CONSTRUCTIVE FEEDBACK FORM**

The University of South Carolina DPT program requires that Students and Clinical Instructors share formal feedback on a weekly basis. The student is expected to lead this process. Each week the student and the CI should answer the following questions by listing **only** 1 to 2 items for each category. After the first 3-4 weeks of the clinical experience, only the new objective and CI assessment of the previous week's objective achievement is required.

STUDENT

I appreciate the way my CI _____

It would be helpful if my CI _____

I would like to improve my ability to _____

CLINICAL INSTRUCTOR

The student demonstrated the following positive qualities or behaviors this week.

The student needs to improve in _____

The student needs additional exposure to _____


Did the student meet the objective established last week? YES NO _____ / _____
CI's Initials / Date

Write one objective for student performance to be achieved by the end of the following week. The student should lead this process, but both the CI and the student should sign that they have approved of this objective.

Student Signature

Clinical Instructor Signature

Date

 DCE please call: CI Student SCCE _____

INTERPROFESSIONAL COLLABORATION LOG AND SELF-REFLECTION

Name: _____ PHYT Course # _____ Facility Classification: _____

Check all appropriate boxes in the table to log your interprofessional communications and answer questions at the end of the document.

During this clinical experience, I participated in inter-professional collaboration

With the following professionals	0 x	1 – 5 x	> 5 x	By 1:1 personal verbal/phone communication	By 1:1 personal electronic or email communication	In a Team Conference	By therapy evaluation or MD progress notes
Physical Therapist Assistant							
Occupational Therapist							
Occupational Therapist Assistant							
Speech Language Pathologist							
Respiratory Therapist							
Recreational Therapist							
Nurse							
Medical Doctor							
Physician Assistant							
Nurse Practitioner							
Dietician							
Social Worker							
Prosthetist/Orthotist							
Pharmacist							
Interpreter							
Community Health Care Worker							
Dentist							
Administrative Staff							
Volunteer							
Student							

Describe:

- 1) how interprofessional collaboration assisted your management of the patient on this clinical experience.
- 2) how you will work to improve your interprofessional collaboration in the future.

CLINICAL PERFORMANCE INSTRUMENT AND INSTRUCTIONS

The Physical Therapist Clinical Performance Instrument (CPI) is only available electronically from PT CPI WEB at <https://cpi2.amsapps.com>. All Clinical Instructors who rate students on the CPI must satisfactorily complete training to use the tool from the APTA Learning Center. A representative from the USC DPT program will contact you with instructions regarding completion of this training when you are scheduled to clinically educate a USC DPT student.