A. Course Title: Clinical Education II

B. Course Number: PHYT 650

C. Credit Hours: 8 credit hours

D. Contact Hours: 10 hours of lecture; 320 hours (8 weeks) in clinic setting

E. Prerequisites: Satisfactory completion of all preceding curricular content

F. Semester offered: Spring/Summer

G. Faculty and Administrative Staff:

Course Coordinator/Director of Clinical Education:
Nikki Sleddens, PT, MPT, CEEAA
Office: BH 3013K
Office Phone: 402-559-4625
Office Email: nicole.sleddens@unmc.edu
Cell Phone: 402-499-7929
Office Hours by Appointment

Assistant Director of Clinical Education:
Tessa Wells, PT, DPT, GCS, CEEAA
Office: HSEC 249
Office Phone: 308-865-1141
Office Email: tessa.wells@unmc.edu
Office Hours by Appointment

Administrative
Michelle Hawkins, MS
Clinical Education Associate
Office: BH 3013L
Office Phone: 402-559-8173
Office Email: michelle.hawkins@unmc.edu

Clinical Education Team:
Nikki Sleddens, PT, MPT, CEEAA
Tessa Wells, PT, DPT, GCS, CEEAA
Michelle Hawkins, MS
Joseph Norman, PT, PhD, CCS, FAACVPR
Jung Chien, PhD

Other Faculty/Course Instructors:
The Division of Physical Therapy Education, in conjunction with the affiliating clinical facilities, provides the Clinical Education component of the curriculum. The Administration Staff of the program is under the direction of the Director of Clinical Education. Classroom preparation for clinical education courses is the responsibility of the Director of Clinical Education. On-site clinical education experiences are taught and supervised by the volunteer clinical faculty of the Division of Physical Therapy Education.

Course Website: https://apps.exxat.com
H. Class Days, Times, and Locations:

Any days missed due to cancelled clinical days, sickness, or any other issue must be reported to the Clinical Faculty and DCE.

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Instructor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 15, 2020</td>
<td>10:00 – 12:00 PM</td>
<td>Review of Syllabus / Assignments, PHYT 650 Clinical Preparation, Clinical Selection Preparation, EXXAT Intro</td>
<td>Sleddens</td>
</tr>
<tr>
<td>January 28, 2020</td>
<td>3:00 – 5:00 PM</td>
<td>TeamSTEPPS Modules: Leadership and Situation Monitoring</td>
<td>Sleddens</td>
</tr>
<tr>
<td>January 29, 2020</td>
<td>3:00 – 5:00 PM</td>
<td>TeamSTEPPS Modules: Mutual Support &amp; Summary</td>
<td>Sleddens</td>
</tr>
<tr>
<td>February 19, 2020</td>
<td>1:00 – 2:00 PM</td>
<td>PHYT 751/752 Clinical Education Selection Process</td>
<td>Sleddens</td>
</tr>
<tr>
<td><strong>OPTIONAL ADVISING</strong> February 26, 2020</td>
<td>12:00 – 1:00 PM</td>
<td>Optional Selection Advising Sessions with DCE and ADCE</td>
<td>Sleddens/Wells</td>
</tr>
<tr>
<td>March 6, 2020</td>
<td>1:00 – 5:00 PM</td>
<td>Madonna Application Finalists will be scheduled for face to face interviews with Madonna Staff at Madonna Proactive 7411 Stephanie Lane, Lincoln</td>
<td>Madonna Staff</td>
</tr>
<tr>
<td>March 10, 2020</td>
<td>3:00 – 5:00 PM</td>
<td>PHYT 650 Clinical Forms, Writing Clinical Goals</td>
<td>Sleddens</td>
</tr>
<tr>
<td><strong>OPTIONAL ADVISING</strong> April 1, 2020</td>
<td>11:00 – 12:00 PM</td>
<td>Optional Selection Advising Sessions with DCE and ADCE</td>
<td>Sleddens/Wells</td>
</tr>
<tr>
<td>April 10, 2020</td>
<td>8:00 – 10:00 AM</td>
<td>Reading Assignment: Clinical Education Manual &amp; Medicare Supervision Guidelines for Students</td>
<td>Sleddens</td>
</tr>
<tr>
<td><strong>OPTIONAL ADVISING</strong> April 29, 2020</td>
<td>10:00 – 11:00 AM</td>
<td>Optional Selection Advising Sessions with DCE and ADCE</td>
<td>Sleddens/Wells</td>
</tr>
<tr>
<td>May 5, 2020</td>
<td>1:00 – 2:00 PM</td>
<td>Case Study Assignment Instructions</td>
<td>Hageman</td>
</tr>
<tr>
<td>May 6, 2020</td>
<td>9:30 – 10:00 AM</td>
<td>Mandatory Meeting with PT3s</td>
<td>Sleddens</td>
</tr>
</tbody>
</table>

PHYT 650 Clinical Experience May 11 – July 3, 2020

Students required to work schedule of CI. This may include evenings, weekends, and holidays.

I. Clinical Expectation

At the completion of this 8-week clinical education experience, the student will achieve a rating between “Advanced Beginner Performance” and “Intermediate Performance” on CPI Clinical Performance Criteria, with appropriately supporting narrative comments.

Advanced Beginner Performance:

- A student who requires clinical supervision 75%-90% of the time managing patients with simple conditions, and 100% of the time managing patients with complex conditions.

- At this level, the student demonstrates consistency in developing proficiency with simple tasks (e.g., medical record review, goniometry, muscle testing, and simple interventions), but is unable to perform skilled examinations, interventions, and clinical reasoning skills.

- The student may begin to share a caseload with the clinical instructor.

Intermediate Performance:

- A student who requires clinical supervision less than 50% of the time managing patients with simple conditions, and 75% of the time managing patients with complex conditions.

- At this level, the student is proficient with simple tasks and is developing the ability to consistently perform skilled examinations, interventions, and clinical reasoning.

- The student is capable of maintaining 75% of a full-time physical therapist’s caseload.

J. Course Description

**Overview:** Clinical education courses are an integral part of the DPT curriculum. They allow for the clinical application of physical therapy theories and techniques acquired during lecture and laboratory instruction. As importantly, these courses provide the student with the opportunity to acquire the knowledge, skills and abilities most effectively taught in the clinical setting. The clinical education process is
designed to provide the student with periodic clinical exposure at key times throughout the curriculum, thus enabling to student to build clinical practice skills and confidence while being exposed to a variety of clinicians, patients, and facilities. Although each student will have different clinical education experiences, the process is designed to move the student along a continuum from observation, identification and description to analysis, demonstration, and evaluation. Consequently, the student will also progress from requiring fairly constant supervision by clinical instructors to requiring periodic guidance and eventually to entry level practice. The clinical faculty provides the student with clinical practice experience and specialty knowledge. This, coupled with the program curriculum, provides the foundational base of knowledge, skills and abilities necessary to begin entry level practice.

Specific Description: Clinical Education II is designed to allow the student to apply new didactic knowledge and continue to improve the application of didactic knowledge to clinical practice in an 8-week clinical experience.

K. Instruction: Teaching Methods and Learning Experiences

On site instruction/demonstration from clinical instructors with gradual progression from a student being closely supervised towards entry level application within the patient-client management model: physical therapy examination, evaluation, diagnosis, prognosis, plan of care development, screening and interventions. Learning experiences will include both observation of and participation in the wide variety of direct care and administrative functions performed by physical therapists in the clinical setting.

L. Course Goals

All clinical education courses use the Performance Criteria from the Clinical Performance Instrument (CPI) as course objectives. The Clinical Performance Instrument was developed by the American Physical Therapy Association and, “is applicable to a broad range of clinical settings and can be used throughout the continuum of clinical learning experiences”. The expected level of performance varies for each clinical education course. At the completion of this 8-week clinical education experience, the student will achieve a rating between “Advanced Beginner Performance” and “Intermediate Performance” on all of the following CPI Clinical Performance Criteria, with appropriately supporting narrative comments:

1. Practices in a safe manner that minimizes the risk to patient, self, and others.
2. Demonstrates professional behavior in all situations.
3. Practices in a manner consistent with established legal and professional standards and ethical guidelines.
4. Communicates in ways that are congruent with situational needs.
5. Adapts delivery of physical therapy services with consideration for patients’ differences, values, preferences, and needs.
7. Applies current knowledge, theory, clinical judgment, and the patient’s values and perspective in patient management.
8. Determines with each patient encounter the patient’s need for further examination or consultation by a physical therapist or referral to another health care professional.
9. Performs a physical therapy patient examination using evidence-based tests and measures.
10. Evaluates data from the patient examination (history, systems review, and tests and measures) to make clinical judgments.
11. Determines a diagnosis and prognosis that guides future patient management.
12. Establishes a physical therapy plan of care that is safe, effective, patient-centered, and evidence-based.
13. Performs physical therapy interventions in a competent manner.
14. Educates others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods.
15. Produces quality documentation in a timely manner to support the delivery of physical therapy services.
16. Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes.
17. Participates in the financial management (budgeting, billing and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal, and facility guidelines.
18. Directs and supervises personnel to meet patient’s goals and expected outcomes according to legal standards and ethical guidelines.

In addition to the CPI Clinical Performance Criteria, at the completion of the classroom preparation for PHYT 650 Clinical Education II, the student will be able to:

19. Conduct a self-assessment prior to the internship, developing written goals/objectives for the clinical experience.
20. Conduct a self-assessment of clinical education performance during the internship, both at mid-term and final, using the CPI.

Upon completion of the TeamSTEPPS module, the student will be able to:

21. Define briefs, huddles, and debriefs as strategies team leaders use to manage the workload and ensure shared mental models across the team.
22. Explain how having two types of leaders, designated and situational, improves the likelihood of achieving team goals.
23. Use situation monitoring to improve your awareness of the environment and to cross monitor other team members.
24. Communicate the outcomes of situation monitoring during briefs, huddles, and debriefs to create a shared mental model across your team.
25. Use the two-challenge rule and CUS to advocate for your patient.

M. **Required Textbooks:** None; course materials (including clinical education manual) are located on Blackboard.

N. **Recommended Textbooks:** Encouraged to take textbooks/materials from prior courses to clinical sites for reference.

O. **Additional References:** n/a

P. **Method of Evaluation/Grading System:**

All clinical education courses are Pass/Fail Courses. All assignments are Pass/Fail. Minimum requirements for a grade of a “Pass” include completing, submitting on time, and receiving a passing grade on all of the following:

<table>
<thead>
<tr>
<th>Date Due</th>
<th>Assignments &amp; Instructions</th>
<th>Grading Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Semester</td>
<td>Clinical Site Policies &amp; Procedures and Assignments given by Clinical Site and/or Clinical Faculty during clinical experience. (i.e. drug testing, compliance testing, SOAP notes, researching topics, etc.)</td>
<td>Adherence to all site-specific policies and procedures. Satisfactory completion of all assignments given by the Clinical Faculty.</td>
</tr>
<tr>
<td>All Semester</td>
<td>Clinical Education Policies and Procedures. See Clinical Education Handbook</td>
<td>Adherence to all policies and procedures</td>
</tr>
<tr>
<td>OPTIONAL: 2/21/2020</td>
<td>If interested in applying for a PHYT 751 or PHYT 752 clinical experience at Madonna, upload Resume and Cover Letter to EXXAT. “My Profile” “Resume.” These must be uploaded as one document.</td>
<td>Clinical education team will review resumes and cover letters and submit up to 20 finalists (50/50 PT1s &amp; PT2s) to Madonna SCCEs for interviews. Must be submitted by due date for consideration.</td>
</tr>
<tr>
<td>3/20/2020</td>
<td>Begin contacting 650 SCCE &amp; reviewing/completing site requirements. SCCE contact information and site requirements can be found by going to “My Placements,” “PHYT 650,” and reviewing “Site Details,” “Requirements,” “Site Documents,” and “Notes for Students.”</td>
<td>n/a</td>
</tr>
<tr>
<td>4/3/2020</td>
<td>Complete all sections of “Related Information” in “My Profile” After updating all sections, submit “Review and Sign.”</td>
<td>Completion by due date with required information in all sections.</td>
</tr>
<tr>
<td>5/8/2020</td>
<td>Clinical selections entered on spreadsheet</td>
<td>If clinical preferences are not entered by due date, your placement will be determined by Clinical Education Team</td>
</tr>
<tr>
<td>5/11/2020</td>
<td>Clinical Selection Letter emailed to Clinical Education Team at <a href="mailto:ptclined@unmc.edu">ptclined@unmc.edu</a> regarding clinical placement preference (if more than 1 student on a location).</td>
<td>If letter not submitted by due date, consideration will not be given for placement at that site.</td>
</tr>
<tr>
<td>5/15/2020</td>
<td>Complete “CI Details” found “My Placements,” “PHYT 650,” “CI Details.”</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>5/15/2020</td>
<td>Enter address where you will be staying during your clinical experience. “My Profile,” “Student Address.” Address type is “Placement Address.”</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>5/22/2020</td>
<td>Complete “Week Two Update.” “My Placements,” “PHYT 650,” “Week Two Update.”</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>5/22/2020</td>
<td>Remind Clinical Instructor to sign up for midterm phone call. They should have received email with link</td>
<td>n/a</td>
</tr>
<tr>
<td>6/5/2020</td>
<td>Mid-term Clinical Performance Instrument (CPI)</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>Student Clinical Performance</td>
<td>Achieve between Advanced Beginner and Intermediate on CPI with supporting comments.</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>Final Clinical Performance Instrument (CPI).</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>Complete “Student Evaluation of Clinical Site.” “My Placements,” “PHYT 650,” “Student Evaluation of Clinical Site.” Review with Cl.</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>Complete “Student Evaluation of Clinical Instructor.” “My Placements,” “PHYT 650,” “Student Evaluation of Clinical Instructor.” Review with Cl.</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>After submitting “Student Evaluation of Clinical Site” and “Student Evaluation of Clinical Instructor,” student and CI must sign <strong>hard copy</strong> of “Signed Signature Form.” The “Signed Signature Form can be found “My Placements,” “PHYT 650,” “Session Reference Documents.” Upload the “Signed Signature Form” to “Student Evaluation Sign Off.”</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>Date</td>
<td>Task Description</td>
<td>Due Date</td>
</tr>
<tr>
<td>------------</td>
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</tr>
<tr>
<td>7/3/2020</td>
<td>Complete &quot;Clinical Site Overview.&quot; The Clinical Site Overview form can be found &quot;My Placements,&quot; &quot;PHYT 650,&quot; &quot;Session Reference Documents.&quot; Upload the &quot;Clinical Site Overview&quot; to “Clinical Site Overview &amp; Weekly Planning Form,&quot; “Clinical Site Overview” tab.</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>Complete &quot;CI Clinical Hours.&quot; &quot;My Placements,&quot; &quot;PHYT 650,&quot; &quot;CI Clinical Hours&quot;</td>
<td>Completion by due date as directed</td>
</tr>
<tr>
<td>7/3/2020</td>
<td>PHYT 650 Course Evaluation. Link found on Canvas &quot;PT Class of 2021 Clinical Education&quot;</td>
<td>n/a</td>
</tr>
</tbody>
</table>

Q. **Grading Scale:** Pass or Fail

R. **Grading Requirements:**

To make satisfactory academic progress within the Department of Physical Therapy Education, students must:

- Receive a passing grade of "C-" or better or "PASS" in all courses required in the physical therapy curriculum, regardless of the department, school, or college offering the course;
- Maintain an overall grade point average (GPA) of 2.33 (C+) or better in each semester of the program and cumulatively throughout the curriculum (See Evaluation Policies and Procedures in Student Handbook).

**ADA Accommodations:**

It is the policy of the University of Nebraska Medical Center to provide flexible and individualized accommodation to students with documented disabilities. To receive reasonable accommodations, students must complete a Request for Services application and provide documentation to the Services for Students with Disabilities office. Information is available at the Counseling and Student Development Center website at [http://www.unmc.edu/stucouns/services/disabilities/](http://www.unmc.edu/stucouns/services/disabilities/). The office is located in Bennett Hall, 6001 within the Counseling and Student Development Center. Meetings are by appointment. Adequate time for processing, up to four weeks, is recommended.

**Statement of Academic Integrity:**

The University of Nebraska Medical Center has established a policy on academic integrity and professional conduct. This policy may be found in the UNMC Student Handbook. All students are expected to adhere scrupulously to this policy. Cheating, academic misconduct, fabrication, and plagiarism are viewed as serious matters and will lead to disciplinary action as described in the UNMC Student Handbook under Procedural Rules Relating to Student Discipline. Additional materials related to Responsible Conduct in Research can be found in the UNMC Student Handbook. Selected sections from the UNMC Student Handbook follow:

**Cheating:**

A general definition of cheating is the use or attempted use of unauthorized materials or information for an academic exercise. Examples of cheating include but are not limited to:

1. Using unauthorized materials such as books, notes, calculators or other aids during an examination or other academic exercises;
2. Receiving unauthorized assistance from another person during an exam or exercise such as copying answers, receiving answer signals, conversation or having another person take an examination for you;
3. Providing assistance to another person during an exam or exercise, such as allowing your answers to be copied, signaling answers or taking an exam for someone else;
4. Obtaining answers and/or other information without authorization from someone who has previously taken an examination;
5. Including all or a portion of previous work for another assignment without authorization;
6. Appropriating another person’s ideas, processes, result, or words without giving appropriate credit, i.e. an appropriate attribution or citation (plagiarism). For example, a student who quotes verbatim the results of a previous student’s work in a required term paper, but fails to credit the individual through citation. The work is recent and thus cannot be considered common knowledge.

**Academic Misconduct:**

Academic misconduct is defined as the falsification of official documents and/or obtaining records, examinations or documents without authorization. Several examples of academic misconduct are:

1. The unauthorized acquisition of all or part of an un-administered test;
2. Selling or otherwise distributing all or part of an un-administered test;
3. Changing an answer or grade on an examination without authorization;
4. Falsification of information on an official university document such as a grade report, transcript, an instructor’s grade book or evaluation file or being an accessory to an act of such falsification;
5. Forging the signature of an authorizing official on documents such as letters of permission, petitions, drop/add, transcripts, and/or other official documents;
6. Unauthorized entry into a building, office, file or computer data base to view, alter or acquire documents.

**Research misconduct:**

Research misconduct has been defined by the Federal DHHS Office of Research Integrity (ORI) and UNMC subscribes to this definition: "Research misconduct is defined as fabrication, falsification, or plagiarism in proposing, performing, or reviewing research, or in reporting research results." Research misconduct does not include honest error or differences of opinion. It is important that every student understand the meaning of fabrication, falsification, and plagiarism.

**Fabrication** is making up data or results and recording or reporting them. Some examples are:

1. Indicating a laboratory experiment had been repeated numerous times or
2. Done in a controlled environment when it had not, thus leading to an invented or uncorroborated conclusion.

**Falsification** is manipulating research materials, equipment, or processes, or changing or omitting data or results such that the research or academic performance is not accurately represented in the research or academic records.

Some examples are:

1. Altering an original source document, misquoting or misrepresenting a source to support a point of view or hypothesis;
2. Using computer software to change research images so they show something different than the original data.

**Plagiarism** is the appropriation of another person's ideas, processes, results, or words without giving appropriate credit, i.e. an appropriate attribution or citation. An example is:

1. In the methods section of a thesis, a graduate student describes a procedure used in research for the thesis. The procedure was developed by a fellow graduate student in the laboratory of their major professor; however, neither the student who developed this procedure nor the major professor was given credit in the thesis. This implies that the author had himself developed the procedure.
2. In the background section of a thesis, a graduate student quotes verbatim the results of a previous investigator's work but fails to credit the individual through citation. The work is recent and thus cannot be considered common knowledge.