



UNIVERSITY OF  
NEW ENGLAND

INNOVATION FOR A HEALTHIER PLANET

DEPARTMENT OF PHYSICAL THERAPY  
STUDENT HANDBOOK

DOCTOR OF PHYSICAL  
THERAPY (DPT)  
PROGRAM

(Effective August 16, 2022 to August 15, 2023)

Approved by faculty on August 16, 2021

## Disclaimer

The provisions of this Department of Physical Therapy Student Handbook do not constitute a contract, express or implied, between The University of New England and any applicant, student's family, or faculty or staff member. The University of New England Department of Physical Therapy reserves the right to change the policies, procedures, rules, regulations, and information in this Handbook at any time. Changes will become effective at the time the proper authorities so determine and the changes will apply to both prospective students and those already enrolled. This handbook is a general information publication only, and it is not intended to - nor does it - contain all regulations that relate to students.

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## **I. UNIVERSITY OF NEW ENGLAND DEPARTMENT OF PHYSICAL THERAPY OVERVIEW**

The DPT Program at the University of New England is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE) to award the Doctor of Physical Therapy (DPT) degree.

The program aspires to graduate exceptional entry-level clinicians who are prepared to practice in culturally diverse health care settings. The department prepares students for generalist and advanced specialized practice in Physical Therapy.

### **A. INTRODUCTION TO THE STUDENT HANDBOOK**

The Doctor of Physical Therapy (DPT) Student Handbook outlines the mission, goals and objectives, and philosophy of the Department of Physical Therapy at the University of New England (UNE). It also contains department policies and procedures that affect students enrolled in the DPT program. The policies are intended (1) to protect and make explicit student rights and responsibilities, and (2) to ensure that DPT program operation is consistent with its obligations as a professional physical therapist education program.

Students are responsible for being familiar with the contents and verifying the contents when questions arise. Student appeals of any department decision or action resulting from an academic or conduct review will follow the procedures as outlined in the UNE Student Handbook and/or the WCHP Graduate Program Progression Policies. Similarly, students are expected to abide by the [APTA Core Values and Professional Behaviors](#) of accountability, altruism, collaboration, compassion and caring, duty, excellence, integrity, and social responsibility.

## B. MISSION, VISION, AND GOALS

The mission of the Department of Physical Therapy supports the missions of the Westbrook College of Health Professions and the University of New England. By preparing students to be physical therapists and contributing members of society, the DPT program fosters achievement of the university mission.

### 1. University Mission Statement<sup>†</sup>1

The University of New England prepares students to thrive in a rapidly-changing world and, in so doing, to improve the health of people, communities, and our planet.

### 2. Westbrook College of Health Professions Mission Statement<sup>†</sup>

The Westbrook College of Health Professions educates a dynamic, collaborative workforce responsive to the evolving needs of society, thus advancing the health and well-being of all people.

### 3. Department of Physical Therapy Mission Statement<sup>†</sup>

The Department of Physical Therapy is dedicated to preparing students for contemporary physical therapy and advances the profession through its steadfast commitment to excellence in academics, clinical education, scholarship, and service.

### 4. Department of Physical Therapy Vision Statement 2017<sup>†</sup>

The Department of Physical Therapy will be highly regarded for its innovative curriculum; diverse student body; international opportunities and initiatives; student and faculty scholarship; inclusivity of faculty, professional staff and students in department life; community partnerships and engagement; and stewardship of its resources.

### 5. Doctor of Physical Therapy Program Goals<sup>†</sup>

- a) Core Attributes: To promote a culture that fosters a professional, collegial, and collaborative environment in which all people can thrive
- b) Academics: Foster academic excellence and lifelong learning.
- c) Clinical Practice: To promote faculty and student involvement in physical therapy clinical practice across the continuum of care in a variety of settings.
- d) Research and Scholarship: To generate and disseminate new knowledge.
- e) Service: Promote opportunities for faculty and student engagement in service to local, national, global, and professional communities.
- f) Administration: Optimize utilization of internal and external resources to maximize the experience of students and faculty.

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<sup>1</sup> † indicates material that also appears in the Faculty Handbook

### **C. COMMITMENT TO JUSTICE, DIVERSITY, AND INCLUSION†**

Physical therapists are committed to social justice, diversity, inclusion, and anti-oppression. The UNE Physical Therapy Program recognizes these as active values that require all of us to advocate for equality in every aspect of our personal and professional practices. Enacting these values is a process, one to which the UNE Physical Therapy Program is dedicated. We acknowledge that as a department and society much needs to be done to rectify injustices of the past and to achieve social inclusivity and equality practices in the present and for the future. In this department, we strive to create a learning culture that encourages constructive and respectful exchange; one that supports brave and authentic conversations that may make some of us feel uncomfortable knowing that this discomfort is where important change and progress is made. At the same time, we do our best to foster a sense of belonging within the community of the department. We invite students to be honest and curious; to question and contribute to strengthening the department's commitment to antiracism, anti-ableism, anti-agism, LGBTQ+ rights, recognition of historic and current trauma, and our obligation to culturally and linguistically responsive. We must hold one another accountable to ensure that together, we take the steps necessary to co-create a dynamic culture of inclusion that extends beyond the department and into our many respective communities.

### **D. CHOSEN NAMES AND PRONOUNS†**

The University of New England department of Physical Therapy is committed to fostering an inclusive environment for every student, staff member, faculty member, or guest that participates in our community. An initial step in this process is to recognize and acknowledge the significance of pronouns and gender inclusive language in our classrooms and university culture as a whole. In practice, this may look like faculty members sharing their own pronouns in person and on their syllabi, as well as creating space for students to share their chosen names and pronouns in the classroom as they are comfortable. The Department of Physical Therapy pledges to create an affirming environment by respecting chosen names and pronouns.

In addition to implementing sharing pronouns in classrooms, we can also work to eliminate everyday gendered language. Some examples of more gender-neutral language include "their," "everyone," "folks," and "y'all." We will also work to include more examples, case studies, research, and literature featuring voices of transgender and gender-nonconforming people.

As we commit to learning together, the UNE Department of Physical Therapy acknowledges that these changes align with our mission and vision for a more inclusive and affirming community for all.

### **E. EQUAL OPPORTUNITY†**

UNE operates in accordance with Title IX of the Education Amendments of 1972, the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964 as amended, the Maine Human Rights Act, and all other appropriate civil rights laws and regulations.

The UNE Non-discrimination and Anti-Harassment Official Policy Statements can be found at: [une.edu/title-ix-civil-rights-compliance](http://une.edu/title-ix-civil-rights-compliance)

## **F. ACCOMODATIONS**

UNE seeks to promote respect for individual differences and to ensure that no UNE student is denied benefits or subjected to discrimination due to disability. If you are a student with a qualified disability, the University or department will provide reasonable accommodations for you.

The work to provide adjustments or accommodations is an on-going collaborative process that involves continued communication, reassessment, and modification. Self-disclosure is a necessary first step to receiving modifications or accommodations. This can be done at <https://www.une.edu/student-access-center/request-for-accommodations>. Available services from the student access center are available at <https://www.une.edu/student-access-center/services>.

Please also refer to discussion of Essential Technical Standards and testing accommodations on [p.14](#) below.

## **G. COMPLIANCE WITH ACCREDITATION†**

The DPT Program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 3030 Potomac Ave., Suite 100 | Alexandria, VA | 22305-3085; telephone: 800-999-2782; email: [accreditation@apta.org](mailto:accreditation@apta.org); website: <http://www.capteonline.org>. The program has been an accredited program since its beginnings (first graduating class in 1984). The program, through the policies and procedures outlined in this Handbook, is committed to assuring compliance with the [CAPTE Accreditation Handbook](#). In addition to those policies and procedures described below, the PD ensures the timely submission of accreditation dues, annual accreditation reports, and notification regarding expected or unexpected substantive changes within the program, notification regarding changes in institutional accreditation by the [New England Commission of Higher Education, Inc.](#) or legal authority to provide post-secondary education. In any instance where the program is found to be out of compliance, the PD is also responsible for ensuring that the department comes into compliance within two years of such notice.

### **1. Filing a Complaint with CAPTE**

Any person may file a complaint with CAPTE if that person believes that the Department of Physical Therapy program at UNE is failing to fulfill its commitment to CAPTE accreditation standards. To file such a complaint, follow this link <http://www.capteonline.org/Complaints/>

## **II. DPT EDUCATION PROGRAM**

### **A. Description**

The program aspires to graduate entry-level clinicians who are prepared to practice in culturally diverse health care settings. The curriculum is devised to prepare students to be a part of a doctoring profession by developing skills to promote evidence-based evaluation, care, and referral. The 106-credit DPT Program is three calendar years (8 semesters) in length and includes a combination of classroom, laboratory, and clinical practicum experiences. The curriculum begins with the foundational sciences, through which the student explores and studies normal human structure and function, and fundamental physical therapy techniques. From this critical underpinning, the student engages in the evidence-based approach to the physical therapy management of various health conditions affecting individuals across the lifespan. The curriculum sequence is generally organized according to key body systems (i.e., musculoskeletal, cardiopulmonary, neuromuscular, integumentary). Coursework includes study of the functional and psychosocial impacts of health conditions, relevant medical and surgical interventions, and the physical therapy tests, measures, and interventions utilized

within the patient/client management model.

The student is also introduced to the physical therapist's role in disease prevention and health promotion, education, consultation, legislation and policymaking, and administration. The student receives training and engages in scholarly inquiry under the direction and mentorship of a faculty member. The student may also explore topics beyond those required in professional curriculum through elective courses or workshops offered by the Department and College.

Each student completes 3 full-time clinical practica, totaling 36 weeks of clinical experience. Clinical sites around the United States are available to provide a broad base of experiences in a variety of settings. The sites represent the continuum of health care practice settings including acute care hospitals, rehabilitation hospitals, skilled nursing facilities, home health care, outpatient private practices, ambulatory care centers, and school/preschool programs. Full-time clinical practical experiences are integrated in the second and third professional years, enabling students to apply information learned in didactic courses to patients and clients. In addition, the student will participate in an Integrated Clinical Experience (ICE).

## **B. Graduation Requirements**

To be awarded the degree of Doctor of Physical Therapy, the student must complete each required course, not inclusive of optional or elective courses, with a grade of B- or higher or "Pass" (see [Academic Progression Policies](#) for more details). Transfer credits are rarely awarded to students who transfer from another physical therapy program. The PT Program Director will review and award transfer credits on a case-by-case basis.

## **C. Comprehensive Examination and Electronic Portfolio**

Students are required to take PTH 610 Comprehensive Exam 1 (Year 2 - Spring) and 711 Comprehensive Exam 2 (Year 3 - Spring). As part of PTH 711, students submit an electronic portfolio of activities that document their experiences during the program in professional development, cultural self-awareness and cultural competence, teaching and learning, and health promotion and leadership. The e-portfolio requirement for PTH 711 is introduced to students during the first or second semester of the program, at which time students gain access to their individual e-portfolios. Each e-portfolio is pre-populated with learning objectives, instructions, and helpful resources. Academic advisors serve as the primary point of contact for guidance and feedback for students about their developing portfolios over the course of the program.

**D. DPT CURRICULUM BY SEMESTER 2021-2022**

YEAR 1

YEAR 2

YEAR 3

	Credits		Credits		Credits
		AY2 – Summer BIO 504 – Neuroscience PTH 516 – Pathology & Med Management: Cardiovascular PTH 522 – PT Management of Patients: Disorders of the Cardiovascular and Pulmonary Systems Systems PTH 525 – Practice Management 1 PTH 524 – Clinical Education Seminar	11 4 1 4 1 1	AY3 – Summer PTH 607 – Clinical Practicum 2	8 8
AY1 Fall BIO 502 – Gross Anatomy PTH 501 – Foundations of PT Practice 1 PTH 502 – Kinesiology PTH 507 – Introduction to Clinical Medicine	17 6 5 5 1	AY2 – Fall PTH 601 – Clinical Practicum 1 PTH 602 – Scientific Inquiry 2 (Distance Education Course)	10 8 2	AY3 – Fall PTH 700 – Practice Management 2 PTH 701 – Pathology & Med Management: Disorders of the Integumentary System PTH 703 – PT Management of Patients: Disorders of the Integumentary System PTH 704 – Disease Prevention & Health Promotion PTH 710 – Complex Case Management PTH 795 – Scholarship II	13 2 1 4 3 1 2
AY1 – Spring PTH 503 – Normal Development PTH 504 – Integrated Clinical Experience (ICE) PTH 506 – Psychosocial Aspects of Disability and Illness PTH 508 – Pathology & Med Management: Musculoskeletal System PTH 510 – PT Management of Patients: Disorders of the Musculoskeletal System PTH 514 – Scientific Inquiry 1	19 2 1 1 2 11 2	AY2 - Spring PTH 603 – Pathology & Med Management: Disorders of the Neuromuscular System PTH 604 – PT Management of Children with Special Health Needs PTH 605 – PT Management of Adults: Disorders of the Neuromuscular System PTH 610 – Comprehensive Exam I PTH 695 – Scholarship I	17 3 5 6 1 2	AY3 – Spring PTH 706 – Public Policy and Physical Therapy PTH 707 – Clinical Practicum 3 PTH 711 – Comprehensive Exam II	11 2 8 1

## **E. Philosophy of Education†**

The faculty is committed to excellence in teaching and believes it is their responsibility to facilitate learning by actively involving the student in the teaching-learning process. The faculty strives to create a secure and open environment for learning that fosters the development of critical thinking and problem-solving skills. Further, the faculty believes that education and learning occur inside and outside the educational program.

Clinical education is an integral part of the curriculum – providing opportunities for students to integrate, employ, and refine the knowledge, skills, and attitudes they develop in the classroom (see also Clinical Education Handbook).

By participating in clinical, educational, research, professional, and community activities, the faculty model lifelong learning and professional growth. Program graduates are expected to continue to participate in professional and community activities that prepare them to meet the evolving physical therapy needs of society.

## **F. Student Learning Outcomes†**

The primary educational outcome of the program is to prepare students for clinical practice wherein physical therapists transform society by optimizing movement to improve the human experience. This program recognizes that movement is a key to optimal living and quality of life for all people that extends beyond health to every person's ability to participate in and contribute to society. The complex needs of society, such as those resulting from a sedentary lifestyle, beckon for the physical therapy profession to engage with consumers to reduce preventable health care costs and overcome barriers to participation in society to ensure the successful existence of society far into the future. ([Vision Statement for the Physical Therapy Profession, 2019](#))

The Department of Physical Therapy, the Westbrook College of Health Professions, and the University of New England are committed to offering a quality physical therapist education program that complies with the evaluative criteria of the Commission on Accreditation in Physical Therapy Education (CAPTE). The program provides learning experiences to enable students to achieve the following outcomes required for the practice of physical therapy upon graduation:

After completing the DPT curriculum, students will:

1. Integrate concepts from the biological, physical, behavioral, and clinical sciences into physical therapy services
2. Exhibit professional conduct and behaviors that are consistent with the legal and ethical practice of physical therapy
3. Demonstrate compassion, caring, integrity, and respect for differences, values, and preferences in all interactions with patients/clients, family members, health care providers, students, other consumers, and payers
4. Demonstrate culturally sensitive verbal, nonverbal, and written communications that are effective, accurate, and timely

5. Collect and critically evaluate data and published literature to apply in the delivery of care, practice management, and to examine the theoretical and scientific basis for physical therapy
6. Screen patients/clients to determine if they are candidates for physical therapy services or if referral to, or consultation with, another health care professional or agency is warranted
7. Complete a patient/client examination/reexamination and evaluate and interpret the examination data to determine a physical therapy diagnosis and prognosis
8. Employ critical thinking, self-reflection, and evidence-based practice to make clinical decisions about physical therapy services
9. Collaborate with patients/clients, caregivers, and other health care providers to develop and implement an evidence-based plan of care that coordinates human and financial resources
10. Provide services and information related to health promotion, fitness, wellness, health risks, and disease prevention within the scope of physical therapy practice
11. Advocate for patient/client and profession
12. Provide consultative services and education to patients/clients, caregivers, health care workers, and the public using culturally sensitive methods that are adapted to the learning needs, content, and context
13. Employ effective leadership skills in the context of supervising, delegating and mentoring within the profession

## **G. POLICIES AND PROCEDURES**

The following policies and procedures are intended to augment those policies and procedures governing all students at the University of New England described in the [UNE Student Handbook](#).

All policies and procedures apply equally to in-person or virtual activities conducted by the department.

### **1. Essential Technical Standards**

Enrollment in the DPT Program assumes certain essential cognitive, emotional, and technical skills. The [Essential Technical Standards](#) contain those abilities and skills that degree candidates must possess to engage safely and competently in required learning activities. The abilities and skills are described in five domains: observation skills; communication skills; motor skills (fine and gross); intellectual-conceptual, integrative and quantitative abilities; and behavioral and social/emotional attributes. Students are required to affirm their ability to meet Essential Technical Standards at the beginning of the program, following a change in health condition, and when returning from a leave of absence.

A student's affirmation that he or she meets the Essential Technical Standards indicates the following:

- a) The student can engage safely and competently without restriction in required learning activities occurring in the classroom, skills laboratory, community, or during clinical practica. Such learning activities not only require students to actively practice physical therapy skills from all 5 domains, but at times require students to serve as a "mock patient" for the benefit of classmates' clinical skills practice.
- b) The student can engage safely and competently without restriction during graded course assessments (e.g., exams, lab skills checks and practical exams, assignments).

Students who cannot affirm their ability to meet Essential Technical Standards for any reason and at any point while enrolled as a DPT student may be at risk of poor academic performance, and therefore, of delaying their academic progression or of being dismissed from the program.

### **2. Essential Technical Standards Accommodations**

The program will provide reasonable accommodations to students who cannot affirm their ability to meet the Essential Technical Standards, but only to those students with documented disabilities who are registered with the UNE Student Access Center while completing the academic and clinical requirements for graduation. Such accommodations from the DPT program can only be provided to students who take the following steps:

Report the limiting issue immediately to the Student Access Center for a determination of whether or not accommodations for the limitation can be identified.

Provide current course instructors with a copy of the Student Access Center documentation that describes any identified accommodations that might be relevant to their respective courses.

Each instructor then will communicate with the Program Director if the accommodations can be reasonably handled within the context of their course. The Program Director, in turn, will evaluate the recommendations of the current course instructors and decide whether or not future course instructors might also need to evaluate the reasonableness of the accommodations for their upcoming courses. Based on this comprehensive collection of faculty input, the Program Director then will decide whether or not it is reasonable for the student to continue progressing in the program with the accommodations in place.

The Program Director will communicate the outcome of the review process to the student in writing, outlining the specific accommodations that will be made. Course instructors with a need to know about the accommodations, as well as the students' academic advisor, also will receive a written copy of the review outcome. When accommodations cannot be reasonably made by the program, the student may elect to take a Leave of Absence until the limiting issue resolves and he or she once again can affirm the ability to meet the Essential Technical Standards. If the limiting issue is unlikely to resolve even after a Leave of Absence, the student will be dismissed from the program.

Students who have received accommodations by the program should remember to:

Provide a copy of current the Student Access Center documentation to course instructors at the beginning of each new semester in which accommodations are needed.

Re-register with the Student Access Center at the beginning of each academic year in which accommodations are needed.

### 3. Testing Accommodations†

The Department follows the testing accommodation policy as set forth by the Student Access Center: <https://www.une.edu/student-access-center/services/testing>

### 4. Potential Health Risks and Standard Precautions

There are numerous health risks associated with being a student physical therapist, including but not limited to 1) exposure to infectious diseases, 2) exposure to toxic substances, and 3) strains and sprains, and trauma from slips, trips and falls. The faculty is committed to educating students in practices that minimize these risks. During new student orientation and annually thereafter, students will review the "Hospital e-Tool: Physical Therapy Module" created by the Occupational Safety and Health Administration at:

<https://www.osha.gov/SLTC/etools/hospital/clinical/pt/pt.html>. Students must provide documentation to the Department they have reviewed and understand health risks and precautions by the end of the first week of the first fall semester.

In accordance with the UNE Safety Manual, faculty will provide students with information regarding potential health risks they may encounter within their respective courses, as well as policies and procedures governing use of standard precautions, storage and use of any hazardous materials, safety regulations and emergency procedures. Faculty who teach courses involving off-campus learning experiences and/or community activities will also provide students with this information.

For any accident and/or injury that occurs on-campus or off-campus during school related activities the student should immediately seek medical attention commensurate with the nature of the accident or injury. Students are responsible for all charges related to the accident or injury not covered by their health insurance, whether they occur on or off campus.

Students must report any injuries sustained during any on or off-campus school related activity to the course instructor and the Program Director. If any accident and/or injury occurs on clinical rotations students should follow the medical facility's established procedures. Injuries sustained while on Clinical Practica must be reported to the CI and the ACCE / DCE.

When sustained off campus during non-school related activities, injuries or illnesses that compromise a student's ability to meet course requirements or Essential Technical Standards, must be reported to Course Instructors and the Program Director.

Further information may be obtained from the UNE Student Handbook under the Emergency Preparedness and Response policies at <<https://www.une.edu/emergency/emergency-procedures/accident-reporting>>.

## 5. Required Training and Testing

Prior to the start of each semester, students in the program are asked to show proof of compliance with immunization, criminal background check, HIPAA training, CPR training, and related health and safety requirements. Compliance is demonstrated through submission of documentation at <https://une.medicatconnect.com/>. The deadline for demonstrating compliance typically is set for 2 weeks before the beginning of each didactic semester. Deadlines may vary for clinical semesters. Students are responsible for ensuring that all of their documentation is up to date and can be produced upon request. Students who are not in compliance with any requirement after the posted deadline will be notified, and required to rectify the issue immediately; failure to do so will result in the student being prohibited from attending UNE classes, including clinical practica, until their non-compliance issue(s) have been resolved.

## 6. HIPAA

The Health Insurance Portability and Accountability Act (HIPAA) was enacted nationally in an effort to protect an individual's rights to privacy and confidentiality. All students are required to provide documentation to the Department they have successfully completed UNE's HIPAA training by the end of the first week of the first fall semester and thereafter on an annual basis.

Students may also be required to complete HIPAA training at various clinical sites throughout their clinical education experiences. The [UNE Student Handbook](#) also contains information on the required annual HIPAA training.

#### 7. CPR

Each student is required to obtain cardiopulmonary resuscitation certification (CPR) for Healthcare Professionals, with hands on training, through the American Heart Association or Red Cross prior to clinical practicum (CP) I. This certification must be maintained throughout the remainder of the DPT program. They must provide documentation to the Department they have successfully completed CPR (health care provider/professional) training by submitting a copy of their card. It is the student's responsibility to ensure the maintenance of this certification. Failure to provide verification will result in their inability to begin or continue with the assigned CP.

#### 8. Health Requirements

Students are required to meet all health requirements as designated by the university and clinical facilities where education of UNE DPT students is conducted. The student should consult the University's health requirements and the [Department Clinical Education Handbook](#) for more detailed information.

#### 9. Background Checks and Drug Screening

Consistent with WCHP Criminal Background Check policy ([Appendix 2](#)), all students are required to have a criminal background check prior to beginning the program. Further information regarding this requirement will come from the Program Director.

Some clinical facilities where education of UNE DPT students is conducted may require further tests such as drug screening and/or follow-up criminal background checks. They may also require site specific training such as Occupational Safety and Health Administration (OSHA) training, etc. prior to the arrival at the site and/or during the course of the educational experience. The student is responsible for any additional costs associated with these tests, screens or training unless specified by the clinical site. Students are informed of any additional tests, screens or training as they have been communicated by the clinical site to UNE.

Students should be aware that information obtained during a criminal background check or drug screening could jeopardize their ability to complete a scheduled clinical experience and/or impact eligibility for licensing as a physical therapist. Any information obtained will be sent to the relevant clinical facility provided the student has consented to this. The student has the right to choose to directly deliver the results to the clinical facility. The clinical facility, not UNE, will determine if the information provided affects a student's eligibility to participate in a practicum at their site.

#### 10. Academic Advising

Each student is assigned to a faculty advisor at the time of matriculation to the program. Advisors are members of the core faculty who serve as an academic and professional resource. Ordinarily this person continues as the advisor for the duration of the student's time in the program, unless the student or advisor requests a change through the Program Director. Students also are welcome to seek additional mentorship from other faculty members in the program.

Students are responsible to meet with their advisor as needed to discuss their academic progress, including their work on the electronic portfolio associated with PTH 711 Comprehensive Exam 2. Appointments to meet with an advisor should be made directly with the advisor. The faculty advisor will maintain a record for each advisee that includes notes of student meetings, progress and other issues. A list of faculty advisors follows:

11. Department Faculty

<b>Name</b>	<b>Proctor Hall</b>	<b>Phone ext</b>	<b>Email Address</b>
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## **H. Student Development Committee (SDC)**

The primary function of the SDC is to conduct reviews of student performance to support students' academic progression. SDC reviews are required in cases where a student is failing to maintain academic standards in the classroom or field placement, is suspected of engaging in professionally inappropriate behavior, or is suspected of violating academic integrity.

The SDC automatically reviews the general performance of each student twice per semester (i.e., at mid-term and at the end of the term) and facilitates a vote of the core faculty approving that students' progress in the program. The SDC also may review the performance of a student by request when specific concerns arise from faculty (core or adjunct), the student's advisor, the Program Director (PD), other students, professional staff, clinical instructors, other UNE constituents or stakeholders, or members of the general public. Through the review process, the SDC evaluates the merits of expressed concern(s) and works with a student to develop an action plan, as needed. Action plans identify strategies to resolve an issue, define criteria for success (e.g., performance needed to remove probationary status), describe consequences of failure to achieve identified goals (e.g. progression delay), and identify responsible parties and expected dates of actions. The SDC communicates the outcome of its review and any recommended action plan to the PD for consideration. The PD communicates to the student in writing the final outcome of the review process, including any change in student status (i.e., good standing, probation, dismissal). Once a student's action plan has been implemented, the SDC continues to monitor and support the student until the student resolves the identified issues and communicates progress to the program faculty, who eventually vote on successful or unsuccessful completion of the action plan.

The SDC is comprised of at least three faculty members, one of whom typically is a member of the Clinical Education team. Students referred to the SDC are required to participate in the review process, either in person or remotely (i.e., via Zoom or phone conference call). Student participation includes providing information as requested and playing an active role in the development of the action plan. Students may invite their faculty advisor to join them at SDC meetings, if needed. Other support personnel (e.g., parents, friends, or other advocate) are not permitted.

SDC action plans depends on the nature of the student performance issue:

**Academic Performance Issues:** The SDC encourages students struggling academically to meet with their advisors to develop an action plan designed to address the student's learning issues (e.g., consultation with the Student Academic Success Center, Student Access Center, or medical/mental health providers). When necessary, the SDC facilitates course instructors' development of academic remediation opportunities to provide students with additional time to master course material. When students are unsuccessful with academic remediation, the SDC helps students develop plans to prepare for a future retaking of a course.

**Professional Conduct Issues:** The SDC helps students struggling with professional conduct to develop an action plan designed to address the behavioral issue(s). When the conduct issue is minor and an isolated occurrence, action plans are largely student-driven and geared toward helping the student avoid additional problems. Such action plans do not typically include an SDC

recommendation for a change in student status. In contrast, when patterns of multiple minor unprofessional conduct issues emerge, or if a conduct issue is more substantial (e.g., academic dishonesty), the SDC may recommend to the PD that the action plan include a change in student status from good standing to probation or from probation to dismissal.

### 1. Probationary Status

As a consequence of more substantial academic performance or professional conduct issues, the PD may change a student's status in the program from "good standing" to "probation." Probation is defined as a relatively short period of time during which a student must quickly return to full compliance with academic and conduct standards. Similar to students with minor issues, students on probation develop and implement an action plan. Although students on probation often may continue to progress in the program, probation rescinds student eligibility to participate in selected activities outside of the required curriculum (i.e., enrolling in elective courses; holding office as a student class representative; serving as a student ambassador; serving as a graduate assistant). Probation may also limit student options for clinical placement.

In some cases, a student's progression in the DPT program beyond the current semester may be temporarily suspended pending successful completion of a mandatory remediation plan. Remediation plans are developed by the SDC to provide additional structure, resources, and support to students while they address identified issues. Depending on the nature and timing of the issues, the SDC will determine when a remediation plan must be completed (e.g., during the current semester, prior to starting the following semester, or during a formal Leave of Absence). Students who are in the process of working on a remediation plan may not begin a new semester (didactic or clinical) until the plan has been successfully completed and student progression is approved by vote of the core faculty.

Conditions and an expected time frame for returning to Good Academic Standing from Probation are described in a letter from the PD. Students who violate the terms of their probation (e.g., failing to avoid additional academic performance or conduct issues; failing to complete a mandatory remediation plan) will be dismissed from the program.

## I. Academic Progression

Students enrolled in the DPT Program will adhere to the [WCHP Graduate Program Progression Policies](#). Students are responsible for familiarizing themselves with these policies. Students seeking clarification of these policies should meet with their advisor or the Program Director.

The policies described below either clarify, operationalize, or add to the WCHP Graduate Program Progression Policies.

### 1. Grading

All courses in the department of physical therapy use the following scale to determine grades:

94 – 100	A
90 – 93	A-
87 – 89	B+
84 – 86	B
80 – 83	B-
77 – 79	C+
74 – 76	C
70 – 73	C-
64 – 69	D
< 64	F

NOTE: Fractional numeric grades are rounded at the discretion of the instructor. This will be clearly denoted in the syllabus.

If the instructor elects to round, the following will apply: if the first number after decimal is less than 5, the whole number will not change; if the first number after the decimal is five or greater, the whole number will be rounded to next higher digit. For example, an 89.45 will be rounded to 89 and an 89.51 will be rounded to 90.

## 2. Passing Standard for Final Course Grades - 80% (B-) or higher

DPT students must pass all courses in the program with a final course grade  $\geq$  B- (80%) (or "Pass" in Pass/Fail courses) in order to progress in the curriculum and meet the requirements for graduation. Elective courses are not included in this policy.

## 3. Final Course Grade Below Passing Standard

A final course grade of C+ (79%) or lower is considered a failing grade in the program. Course remediation is offered, in some cases, to give students the opportunity to raise their grade to a passing grade.

### i) Failed-Remediation Offered (74-76% (C) or 77-79% (C+))

Students are offered the opportunity to participate in course "Remediation" to raise their grade if their original course grade was C or C+.

#### (1) If remediation is successful:

- (a) The student's final course grade will be changed to B- (passing).
- (b) The student is allowed to progress in the program.

(2) If the remediation is unsuccessful, the student's original course grade will stand and the student will follow the procedures for Failed-No Remediation regardless of the grade they earned after remediation.

ii) Failed-No Remediation.

Grades of 73% (C-) or lower are classified as Failed-No Remediation because too much content was deficient to be remediated in time to be prepared for the next semester.

Students earning C- or lower may request to take a leave of absence (LOA) for academic reasons. The request is considered by the entire faculty and requires a majority vote to be granted.

(1) If the request for LOA for academic reasons is not granted, the student will be dismissed from the program.

(2) If the request for an LOA related to failing a course is granted, the following will occur:

(a) The student returns the following year to re-take the failed course

(b) Final course grade on re-take is B- or higher (80% or higher), student continues in the program

(c) Final course grade on re-take is below B- (80%), student is dismissed from program

Students are permitted to re-take only one academic or clinical course in the curriculum. If, on re-take, a student fails the course OR they fail a second required course, academic or clinical, with a grade lower than 80% (B-) or a grade of "Fail", the student will be dismissed from the program.

### 3. Academic Performance during Progression in the Program

All courses with numerical grading (as opposed to "pass/fail" grading), whether required or elective, are used to calculate the semester and cumulative course grades. The WCHP standard is  $GPA \geq 3.0$  to be considered in Good Academic Standing. The following applies to the policies regarding cumulative grade point averages (GPA).

i) Cumulative GPA < 3.0

Students are put on Academic Probation if the cumulative GPA falls below 3.0. In the subsequent semester:

(1) When the cumulative GPA reaches 3.0 or higher

(a) Student will come off Academic Probation

(2) If the cumulative GPA improves but remains < 3.0

(a) The student will remain on probation and continue to progress in the program.

(3) If the cumulative GPA does not improve

(a) The student remains on probation and continues to progress

(b) If after 3 semesters (consecutive or non-consecutive) the student may be dismissed from the program per vote of the faculty.

## **J. Conduct Code**

Students enrolled in the DPT program are expected to conduct themselves according to the UNE Student Handbook and Conduct Expectations in the [WCHP Graduate Program Progression Policies](#), as well as the following policies. Students are responsible for seeking clarification of any aspect of the conduct code about which they have questions, especially in the event of receiving notice of conduct concerns.

The DPT Program follows the conduct code described in the [UNE Student Handbook](#) and the professional conduct code described in the American Physical Therapy Association's (APTA) [Guide for Professional Conduct](#) and the APTA's [Code of Ethics](#).

The DPT faculty considers professional conduct to be one of the most important requirements for recommending any student for graduation from UNE. Just as professional conduct standards extend to physical therapists' public and private lives, the requirements for students to adhere to professional conduct standards is not limited to DPT program activities and on campus behavior. The requirement extends to all aspects of the student's life, including, for example, oral, written, pictorial, or video communication, postings or discussions in any form, inclusive of, but not limited to, on-line social media, email, newspapers, etc.

Details of department management of allegation of professional misconduct are detailed above in the SDC policy.

All documentation related to conduct violations will become part of the student's permanent record within the department. Conduct violations allegations may also result in referral to the UNE Judicial Process (see page 49 of the [UNE Student Handbook](#)).

## **K. Academic Remediation**

Students whose final course grade is between 74% (C) and 79% (C+) will be offered the opportunity to participate in Academic Remediation offered by the department that provides additional time and faculty input to remediate deficient knowledge or skills.

There are 3 types of Academic Remediation that are described below:

- Didactic Course Remediation (see below)
- Skills Check Re-Takes (see below)
- Clinical Practicum remediation (see clinical education handbook)

### **1. Didactic Course Remediation:**

Didactic courses are defined in this handbook as any required course in the curriculum other than the three, full-time Clinical Practicum Courses. At the faculty's discretion, Didactic Course Remediation may be offered during the semester after individual course exams (in-class remediation), or at the end of the semester following the last exam (after-class remediation). The specific form and timing of Didactic Course Remediation is at the discretion of each faculty member and based on the needs of the student and available resources.

If the course faculty member chooses to have the student remediate after each exam (or assessment), and the student remediates more than half of the exams, they will be classified as having completed one Didactic Course Remediation (as opposed to a remediation of an individual exam/assessment).

Once notified of their eligibility to remediate the course by earning a C (74%) thru C+ (79%), students must respond to the remediation coordinator within one business day to confirm their intent to participate.

Within two business days after student confirmation of the intent to participate, the remediation coordinator will communicate to the student the specific content areas in which the student was deficient and should improve upon in order to demonstrate competence in the course material. The coordinator will also communicate the format of the assessment at the end of the remediation (e.g., written exam, oral exam, etc.). Determination of successful remediation is the responsibility of the remediation coordinator.

Students participating in a Remediation may be charged a fee through the department to cover the cost of faculty time. If it is not possible for the course coordinator to provide the remediation, then a faculty member with expertise in the content area will be identified by the Program Director.

During their tenure in the program, students may use the Course Remediation (Didactic or Clinical Practicum) in two different courses according to the stipulations above. If, on a 3rd course, the student earns below 80% (B-) on the final course grade, no remediation will be offered and the student will be classified as having failed the course and their progress will follow the policy for a course that was Failed-No Remediation.

#### **L. Clinical Skills Remediation on a Skills Check or Practical Assessment**

The following policies pertain to student performance on clinical skills checks or practical exam/assessments. In an attempt to improve their performance of the relevant skill(s) or behaviors, students are required to re-take a skills check or practical under any one of the following circumstances:

- Students whose performance on the Skills Check or Practical is below the expected level of 80%
- Students whose performance on one or more section(s) (content area(s)) of a Skills Check or Practical) is below the expected level of 80%
- A student demonstrates an error so egregious that if they were working with a patient, the error would put the patient in imminent danger of bodily injury or other serious health risk (“safety fail”)

The format and mechanism for each re-take will be outlined in each course syllabus. All re-takes will be accompanied by guidance and feedback from course faculty regarding the student’s area of deficiency. The criteria for “safety fails” and the timing of the repeat attempt are determined by individual course instructors.

Progression and Grades

### 1) Successful Skill Check Retake

Students who repeat the Skills Check or Practical Exam and successfully demonstrate competent, safe skill(s) performance will earn a final Skills Check or Practical Exam/assessment grade of 80% for that section of the Skills Check.

### 2) Unsuccessful Skill Check Retake

Students do NOT successfully demonstrate competent, safe skill(s) performance on the section(s) of the Skills Check will receive a 0% on that section, skills check, or practical and be required to complete a didactic course remediation. This procedure will follow the policy as outlined under “Academic Remediation.”

## **M. Change of Enrollment Status:**

A leave of absence is a period of time when a student is not enrolled in classes but typically intends to reenroll. Because the department understands other things may arise in a student’s life, students may request a leave of absence from the Doctor of Physical Therapy Program. Examples of reasons a student may request a leave include medical conditions, mental health, death in the family, or other emergencies.

Students who wish to change their enrollment status through requesting a [leave of absence](#) or [withdrawing from a course](#) should meet with their advisor and/or the Program Director. Students must complete the necessary forms and following the procedures available on the web site of the [Office of the Registrar](#).

A student who withdraws from any class offered by the Department of Physical Therapy before the course is 2/3 completed shall have a grade of “W” (Withdrawn) entered as the course grade. If the course withdrawal is after the course is 2/3 complete, a grade of “WP” (Withdrawn Passing) or “WF” (Withdrawn Failing) will be entered as the course grade, based on the student’s prorated grade at that point in the semester as determined by the course coordinator/instructor. W and WP grades are not computed as part of the semester or cumulative grade point average. WF grades are computed in semester and cumulative grade point averages as a Failing grade (F).

A return to the program must be negotiated with the Program Director at the time of the Leave request. Before resuming class(es), all students returning from a Leave of Absence must:

Meet with the Program Director (or designee) to:

- Review the DPT student handbook and agree to the contents in writing
- Reaffirm their ability to meet Essential Technical Standards
- Reaffirm the absence of criminal activity and/or positive drug tests.
- Complete HIPPA certification
- Complete any other requirements as communicated by the Program Director in the Leave of Absence approval letter.

In addition, returning students are strongly encouraged to meet with their academic advisor to develop an action plan, as needed, to help the student reintegrate into the DPT program.

#### **N. Elective courses**

All students in good academic standing are encouraged to consider taking elective courses, typically offered during the fall semester of the 3rd year. All students will be provided with the deadline for registration. If more students request an elective than seats are available, seats will be filled using a process that meets the needs of students and faculty. Students will be limited to enrolling in no more than two electives during any academic semester, not including Global Travel Courses.

#### **O. Independent Study**

Independent Study (IS) courses are developed by students in consultation with a supervising faculty member to meet individualized learning objectives in a particular area of focus. They require a department or adjunct faculty member to serve as an advisor. Before developing an IS course, students are required to:

- Be in good academic standing
- Identify a supervising faculty member and discuss their idea for an IS course
- Consult with their advisor to make sure they can handle the additional workload

To proceed with developing an IS course, students must complete the “Independent Study Contract Form” for WCHP Graduate Programs (<https://www.une.edu/registrar/registration/registration-forms>) with required signatures from the supervising faculty member, academic advisor, Program Director, and Dean.

As with other elective courses, the department course grade standard does not apply to IS courses. However, the IS course grade, if numerical, will be factored into the student’s GPA and therefore may affect progression in the program and academic standing.

#### **P. Attendance**

As members of a graduate professional education program, all students are expected to model professional behaviors. Students are expected to be present, prepared for class, and actively engaged as evidenced by critical thinking and meaningful participation. Absences can and do occur, but students should inform their instructors in advance if they know they will be absent. Excused absences are acknowledged for major unplanned events (e.g. death in the family, emergency health conditions, mandatory military service commitment), and do not include planned events (e.g. scheduled appointments, weddings, vacations, birthdays). An excused absence is required to make up graded activities.

There are some circumstances in which a missed class due to attendance at a PT-related professional conference will be considered an excused absence. If the absence is considered to be excused, the student -

Must receive approval in advance from the course coordinator; and  
Is responsible for all missed class materials; and  
Will make up all graded course activities according to a time table set by the course instructor

1. NPTE Preparation Course

All students are required to participate in the NPTE preparation course organized by the program. If a student is unable to attend this course, the student should inform the program director as soon as possible.

2. Service or Volunteer Learning

If a student commits to participate in a service or volunteer learning activity, it is expected that the student will honor the commitment in the absence of a serious unforeseen circumstance.

**Q. Dress Code**

All students should be familiar with the WCHP guidelines for professional dress, as described in the [WCHP Graduate Program Progression Policies](#). In the Department of Physical Therapy, each course coordinator will further articulate dress expectations for activities in each course.

**R. Professional Salutations**

Students should address faculty, guests, and colleagues in a professional manner, given the specific setting and situation. Each faculty member will make it clear in their class how they expect to be addressed (e.g. by degree, first name, etc.). All adjunct faculty and guest lecturers shall be addressed in a professional manner (e.g. Dr., Professor, Mr./Mrs.) at all times, unless they give permission to do otherwise.

**S. Deadlines**

Students are expected to meet all deadlines pertaining to various operations of the DPT program, as communicated to them by course coordinators or instructors, clinical education faculty and staff, PT administrative staff, or the Program Director. When extenuating circumstances prevent the on-time submission of required course assignments, clinical education paperwork, meetings, or other information, students are expected to immediately contact the person who established the deadline with a plan for rectifying the situation. Students who miss course-related deadlines should consult the course syllabus for a description of grade-related consequences. A pattern of missed deadlines, regardless of when or in what circumstances they occur, may be considered a professional conduct violation.

**T. Audiovisual Recording of Class Sessions**

The lecture and lab content of courses in the DPT curriculum are considered the intellectual property of course instructors and guest lecturers. Students must receive permission to make audio or video recordings of class or lab sessions. If granted, permission to record does not confer permission to share, post, or otherwise distribute the recording to any other person (including classmates), in any format, in either a public or private location. Students must seek additional permission from the instructor or lecturer to do so.

## **U. ExamSoft Testing**

Students will take all DPT course exams electronically via laptop computer. Students will access this system using ExamSoft “Exemplify” software.

### **1. Student Responsibilities**

In taking electronic exams, students are required to possess a laptop in working order that meets the required specifications listed for Exemplify software on the ExamSoft website:

Windows:

<https://examsoft.force.com/emcommunity/s/article/Exemplify-Minimum-System-Requirements-for-Windows>

Mac

<https://examsoft.force.com/emcommunity/s/article/Exemplify-Minimum-System-Requirements-for-Mac-OS-X>

Please note that even though the ExamSoft website indicates that you can use an iPad to take an electronic exam, the UNE DPT program will not allow you to do so.

On the day of an examination, students should:

- Assure the laptop is virus free
- Have an A/C power cord available
- Ensure the laptop battery has a full charge (at least 2 hours) in the event there is a power disruption during the examination
- Ensure that the internal clock is set to the correct date and time (EST or EDT)
- Disable sleep/hibernate mode prior to the scheduled examination
- Disable or whitelist antiviral software

Students must install and maintain a current version of ExamSoft’s Exemplify application on any laptop that will be used during an exam. The Exemplify download is available after logging into ExamSoft at <https://ei.examsoft.com/GKWeb/login/unept>

Students are expected to download the examination prior to arriving to take the exam. Students who have not downloaded the examination prior to arrival will not be provided extra time to take the examination.

With the exception of a laptop, power adapter, all personal belongings must be placed at the designated area immediately before each exam. This includes food/beverage, mobile phones, watches, calculators, or any other devices/materials which are not explicitly authorized. Phones must be turned off or placed in silent mode and left with belongings. The room clock or proctor's watch is the basis for timing the exam. While students may utilize the exam timing feature in Exemplify to assist with timekeeping, the room clock or proctor's watch is the official exam timer. The Exemplify exam timer may be incorrect due to a delayed exam start, computer reboots or other factors. Students must complete and submit their examination when instructed by a proctor. Students should place all belongings at the designated area and take their seat. The student should be seated with the laptop on and Exemplify opened so that he/she is ready to enter the exam password immediately at the start of the exam. Students arriving late and/or not having Exemplify open and ready at the start of the exam will not be granted additional time to complete the exam. Students who experience computer issues after the examination has started must call for a proctor to help resolve the issue.

Students may not exit the exam prior to showing the proctor the green Exemplify screen, unless he/she is leaving to use the restroom. In this instance, individual students may only leave once during an exam. No more than one student may leave the exam at the same time for reasons other than finishing the exam. When leaving, students are expected to enable the Exemplify "Hide Exam" function so it cannot be viewed by a classmate.

## 2. ExamSoft Technological Issues

Technology accommodations and other technological issues will be dealt with as follows:

Student is unable to download and install Exemplify: Students unable to download or install Exemplify must notify both the course coordinator(s) and the designated ExamSoft administrator 24 hours prior to the start of the examination. This will help enable diagnosis and resolution of the issue prior to when the exam is scheduled.

Student's laptop is undergoing repair: It is recognized that student laptops may need to be taken to external repair services for warranty work, etc. In such cases, the student will take a paper-based examination

Student arrives to exam with non-working laptop (e.g. will not connect to Internet, will not boot, will not open Exemplify, etc): In such situations, the student will be permitted to take the exam on paper.

Student arrives to exam without a laptop: Any student arriving without their laptop will be permitted to take the exam on paper, with a verbal warning not to repeat the behavior. Repeat occurrence(s) may be considered a professional conduct violation.

Student is unable to upload exam: Because students must show a green screen prior to leaving the exam room, upload issues will be addressed immediately by the course coordinator, proctor, or designated ExamSoft administrator.

## **V. Evaluation of Courses, Instructors, Program**

Evaluation of courses are used to improve the physical therapy curriculum, course designed, and teaching activities of each course. Course evaluations are used as part of faculty members' annual performance appraisal and as part of reappointment, promotion, and tenure. The purpose of the evaluation is to provide constructive feedback to faculty in areas in which a person does particularly well or in areas in which improvement is possible. Students who complete the CourseEval when requested will have immediate access to their transcript and course grades. A "transcript hold" will be placed on student transcripts for students who do not complete course and faculty evaluations.

In addition, before graduation, students are asked to complete a Comprehensive Program Survey, which evaluates all aspects of the physical therapy program. In addition, student focus-groups are conducted to obtain additional feedback throughout and at the conclusion of the program.

## **W. Equipment and Use of the Skills Laboratories**

The skills laboratories will be available at times when regularly scheduled classes are not in session for study and practice. Skills laboratories have UNE ID card access, allowing students to enter the laboratory rooms for practice outside of class time without seeking entrance assistance from faculty.

Students should notify the Department administrative staff if their ID card is not properly programmed to provide entry into the identified skills laboratories.

Students are expected to clean up the laboratory after use to include:

- Placing used linens in the laundry basket.
- Returning equipment to the appropriate storage location.
- Ensuring that the room has been straightened up, windows closed (e.g., Blewett 012) and that the laboratory door is locked when exiting the room.
- Sanitizing used equipment and surfaces

In order to promote a safe and positive learning environment, it is expected that DPT students will engage in safe and acceptable behavior during all supervised and unsupervised use of the skills laboratories. Students may only use Department of Physical Therapy equipment for practice after the equipment has been presented in a physical therapy class. Students are not to use any equipment that has not yet been presented in a physical therapy class. Practice is only allowed with other physical therapy students who have also been trained in the use of the respective equipment. Likewise, students may only practice examination and intervention procedures that have been presented and practiced in a physical therapy class. Practice is only allowed with other physical therapy students who have also been trained in the use of the examination or intervention procedures. Students engaging in unsafe or unprofessional behavior may lose their unsupervised

access privileges to the laboratories. Students may also be held responsible for damage to equipment and supplies if the damage is related to inappropriate use.

It is the policy of the Department to insure 1) routine maintenance and safety inspections of equipment on an annual basis and 2) repair or replacement of defective equipment as appropriate. If equipment is broken or damaged, please notify the course coordinator and/or the Department of Physical Therapy Administrative Assistant immediately.

#### **X. Informed Consent for Teaching and Learning Activities, Images, and Materials**

Any patient or guest participating in teaching and learning activities sponsored by the Department must give their written consent to do so ([Appendix 3](#)). The activities include, but are not limited to: being interviewed, being photographed, videotaped, or tape recorded, allowing faculty to demonstrate examination and treatment procedures, and allowing students to practice examination or treatment procedures or conduct research. The activities may occur at the University or in the community.

Many courses in the physical therapy curriculum involve a laboratory component. In these labs, it is expected that each student participates by practicing the techniques taught. Most often, students will work in pairs or small groups during this practice time. Additionally, on occasion an individual student may be asked, but not required, to act as the 'model' for demonstration purposes. It is vitally important that each student feels safe and respected while in class and lab. If a student does not feel comfortable with having a classmate practice on him or her, or acting as a model for demonstration, the student should discuss the matter with the course coordinator. Please also refer to the discussion of [Essential Technical Standards](#) above.

When using images or other materials during Clinical Practicum, the student is expected to follow the clinical facility's policies and procedures for obtaining informed consent. In the absence of facility policies and procedures regarding informed consent, students should use the Department's form pending approval from the clinical facility manager. Further detail regarding the use of images or other materials during clinical practica is found in the Department's Clinical Education Handbook.

#### **Y. Medical Advice**

Students shall not ask any faculty member, including full-time or adjunct faculty or guest speakers, for medical advice regarding a medical problem before, during, or after a class or lab session. This includes medical problems of the student, acquaintance, family member, etc. If a student would like to discuss a medical problem with any faculty member, an appointment should be made in advance at the faculty member's convenience.

#### **Z. Student Files and Personal Identifiable Information**

It is the policy of the Department faculty and staff to insure the confidentiality of student records and personal identifiable information. An electronic file for each enrolled student is kept. Faculty are responsible for ensuring that a copy of any correspondence, letters, written communication, etc.

to the student or about the student be placed in the student file. All faculty and staff are responsible for ensuring that all files on student advisees and other confidential materials are stored in secure electronic and/or hard copy files congruent with University and federal/state policies, e.g. the Family Educational Rights and Privacy Act (FERPA). To further protect the confidentiality of files housed in the Department, the main office will be locked when no one is present.

Other personal identifiable information, including but not limited to, University email addresses, contact information, username and password accounts used in University online programs such as Brightspace and U-Online, is also protected congruent with University and federal/state policies (e.g. FERPA).

#### **AA. Use of Department Equipment and Administrative Support**

The Department has administrative support personnel to support the daily operations of the DPT program, located in the Physical Therapy Department Office in Proctor Hall, Room 214. Student requests for office supplies or assistance, including duplication of materials for class presentations or in-services, must be submitted to the course instructor for approval before submitting to an administrative support personnel. Photocopiers are located in the library for students' personal use.

Students may use department telephones and fax machine when given permission by faculty or administrative support personnel in an emergency or for school-related business. The Physical Therapy Department refrigerator and microwave are for use by faculty and staff only. Student facilities are located in Blewett Hall (lower level, lounge area).

#### **BB. Membership in the American Physical Therapy Association**

All students are expected to join the American Physical Therapy Association (APTA) and to maintain membership throughout the professional program. Students are also encouraged to participate at the state and national level. This is excellent preparation for a student's future role as a physical therapist. APTA student membership information is available [on-line](#).

#### **CC. Social Media**

In line with the [APTA Standards of Conduct in The Use of Social Media Position Statement](#), the DPT Program views websites, blogs, and other information published on media accessible by the public positively and it respects the rights of students to use them as a medium of self-expression. If you choose to identify yourself as a student in the UNE PT Program or to discuss matters specific to the Program, please bear in mind that although the information will typically be viewed as personal expression, some readers may nonetheless view you as a de facto spokesperson for the Program.

Students should also remember that social media postings are available for review by PT clinical sites, residency programs, and employers. What is posted in the present, whether as personal expression or professional discourse, has the potential to impact career opportunities either positively or negatively in the future. Students should not assume that simply deleting a post or hiding it will permanently remove it from view by others.

When using social media, students should adhere to the following guidelines:

- UNE computers and electronic systems are limited to business use only.
- Be mindful that you are an informal ambassador for the Program and it is the hope of the Program that you will represent it in a positive way.
- Make it clear that the views expressed are yours alone and do not represent the views of the PT Program or its faculty.

If you blog or publish information about the Program you should include/disclose that you are a student in the Program.

- Understand that you assume full responsibility and liability for your public statements.
- Do not disclose patient information/pictures or proprietary information without consent. You must abide by non-disclosure and confidentiality policies, including those of the Board of Physical Therapy Licensure, the American Physical Therapy Code of Ethics, and HIPAA at all times.
- UNE and PT Program logos should be used only as allowed by the Program and /or University.
- Making discriminatory, defamatory, libelous, or slanderous comments when discussing the Program, faculty, staff, patient/clients, clinical sites, and fellow students is unacceptable.
- Social networking and blogging are subject to all other student policies, including harassment and anti-bias policies/statements.
- When in doubt, consult the faculty or Program Director for guidance about the appropriate use of social media.

If the information you publish via social networking and blogging is accessible to the general public, the PT Program hopes your comments will be truthful and respectful of the Program, its faculty and staff, patients/clients, clinical sites, and fellow students. If you are going to criticize individuals, consider discussing the criticism personally before making it public. The Program will not tolerate statements about the Program, faculty and staff, patients/clients, clinical sites, and fellow students that are defamatory, obscene, threatening, or harassing.

Failure to comply with this policy may lead to discipline, up to and including, dismissal from the program, and if appropriate, legal action.

#### **DD. Licensure and the National Physical Therapy Exam (NPTE)**

Taking the National Physical Therapy Exam (NPTE) (often referred to as “The Boards”) and becoming licensed to practice as a physical therapist in a state are two separate - but linked – processes. In some states the processes are more closely linked.

The Federation of State Boards of Physical Therapy (FSBPT) is the organization that coordinates the examination process and provides a wide variety of resources related to the exam and to the licensure process. The NPTE can be taken anywhere, then you choose where to submit your scores to apply for licensure. This involves several steps.

The UNE PT Program will create your FSBPT profile and provide you with log-in information. The UNE PT Program will validate graduation. This is a mandatory step, required prior to registering for the NPTE. This is done during the second week of March in the year that you graduate. We will not validate graduation any earlier than that. You submit all required components for NPTE registration. You take the exam. You apply for licensure in the state you expect to practice in.

Some states may require a letter from UNE (with or without a UNE seal) for either the NPTE or licensure. If you need one, your request/the form should be sent to the Administrative Assistant in the PT Department who will get it taken care of for you, send it to the state, and provide you with a copy. You can also go directly to the UNE Registrar's Office to take care of this.

Students are encouraged to explore the FSBPT website early on so that they understand the process and are familiar with their individual (state-specific) requirements and requirements for the NPTE. The FSBPT Journey Map is a very helpful overview of the process that will tell you whether or not the state you choose has additional requirements that need to be met to take the NPTE. If you have questions regarding those requirements you should contact that state licensing board directly. <https://pt.fsbpt.net/UserJourneyMap>

The FSBPT offers the NPTE four times per year (January, April, July, October). The UNE curriculum and calendar are designed to prepare graduates to take the July exam - following graduation and receipt of degree.

#### 1. Taking the NPTE Exam Early

FSBPT allows candidates to sit for the NPTE up to ninety days prior to their validated graduation date. Students wanting to take the NPTE prior to graduation, are required to get PT Program Verification that the student is expected to have met the requirements for graduation within 90 days of the exam date.

Program Verification will be granted by the Program Director when the student has completed the following:

1. Met with their academic advisor to discuss the pros and cons of taking the exam early.
2. Verified that the Director or Assistant Director of Clinical Education has confirmed that the student has successfully completed CP3 **OR** they are on track to successfully complete CP3 by the time of the exam.

The above criteria must be documented on the **NPTE Early Exam Approval Form** in Appendix 6.

The signed NPTE Early Exam Approval Form can be scanned and emailed to the PT Program Director and must be received **no later than March 15**.

**\*\*IMPORTANT\*\***

Some states allow students to take the exam prior to graduation, and some DO NOT allow you to take the NPTE prior to graduation if you intend to apply for licensure in that state. Please follow link for state-specific restrictions/requirements. Verification will not be completed for states in which this is not allowed.

<https://www.fsbpt.org/Free-Resources/Licensing-Authorities-Contact-Information>

### **III. GENERAL INFORMATION**

#### **A. Membership in the DPT Student Council**

The DPT Student Council serves as the primary vehicle through which students communicate collectively with the DPT program faculty, the College and University Administration, UNE academic programs, UNE Graduate Student Government, the APTA, and various community organizations. Through the council, students gain access to a variety of professional development, community service, and fund-raising opportunities. All students are strongly encouraged to participate.

At the beginning of the fall semester, the DPT Student Council will elect class representatives. Students must be in Good Standing with the department, college, and university to be eligible to serve in leadership positions on the DPT Student Council.

##### **1. Offices**

- President
- Vice President
- Secretary
- Treasurer / Graduate and Professional Student Association (GAPSA) Councilor
- GAPSA Senator
- APTA Liaison
- Interprofessional Student Advisor Team (IPSAT) Representative
- Social Media Officer

##### **2. Responsibilities**

The responsibilities of these individuals may include, but are not limited to:

- Communicating on behalf of the class at faculty meetings and/or faculty retreats
- Serving on Department ad hoc committees
- Representing the program on the UNE Graduate Student Government and Interprofessional Student Advisory Team (IPSAT).
- Communicating with liaisons at the APTA, Maine Chapter of the APTA, and other outside groups.

A list of class representatives and current officers of the DPT Student Council is kept in the DPT program office.

3. Department News and Student Information

## **B. Department Website**

The Department web site provides links to various resources relevant to prospective and current students in the DPT program including but not limited to:

1. [The University Catalog](#)
2. [Recruitment and admissions information](#)
3. [University academic calendars](#)
4. [Essential technical standards](#)
5. [Acceptance and matriculation rates](#)
6. [Student outcomes](#),
7. including graduation rates, employment rates, pass rates on licensing examinations, and other outcome measures
8. [Costs for DPT Students](#)
9. [Financial aid](#)
10. [Job/career opportunities](#)
11. [Student Health Care](#)
12. [Student Academic Success Center](#)
13. [Student Counseling Center](#)
14. [Student Access Center](#)
15. [Student Malpractice Insurance requirements](#)
16. [Clinical Education Handbook](#)
17. [Health Insurance Requirements](#)
18. [Required Health History, Immunization & Physical Forms](#)
19. [Faculty and student news](#)

## **IV. APPENDICES**

## A. Appendix 1 DPT Program Professional Behaviors

Professional Behaviors	Definition
1. Critical Thinking	The ability to question logically, identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision-making process.
2. Communication	The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
3. Problem-Solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. Interpersonal Skills	The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.
5. Responsibility	The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.
6. Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.
7. Use of Constructive Feedback	The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.
8. Effective Use of Time and Resources	The ability to manage time and resources effectively to obtain the maximum possible benefit.
9. Stress Management	The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.
10 Commitment to Learning	The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

1 May WW et al. Model for ability-based assessment in physical therapy education. J Phys Ther Educ. (1995): 9:3-6.

## **B. Appendix 2 UNE Westbrook College of Health Professions Criminal Background Check Policy (July 2017)**

**Purpose:** The University of New England Westbrook College of Health Professions (WCHP) strives to undertake utmost precaution when assigning students to required field and clinical placements. Healthcare education requires interactions with clients and patients in an intimate setting involving both emotional and physical elements. It is the intent to provide the safest care possible to all patients and clients. With this in mind, WCHP has initiated the following policy to verify students are appropriately screened prior to placement in learning environments to ensure patient safety.

**Policy:** At the University of New England Westbrook College of Health Professions, it is policy that programs are responsible for safeguarding clinical site personnel, patients, and other students through the use of appropriate criminal background checks on students engaged in clinical rotations, internships or other experiential learning activities.

**Process:**

- Students accepted into WCHP programs are required to initiate their own criminal background check through Castlebranch Inc., or a company identified by WCHP, prior to their first observation or clinical placement. Individual programs will determine timing for the initial criminal background check, commonly the semester prior to starting clinical practicum experiences, and subsequent background checks as needed.
  
- WCHP, in concert with the programs and clinical sites, will determine the specifics of the required background check. The minimum recommended background checks should meet the following criteria:
  1. Extend back seven (7) years.
  2. Reflect a national search.
  3. An Interpol search should be done for international students.
  
- Students found to have a positive criminal history (either prior to matriculation or while enrolled in the program) shall be required to submit a written explanation of the circumstances to the program director or designee.

The program director or designee will review the written explanation and will make a determination of disposition to the student.

The disposition may range from an entry into the educational record and continuation in the program to dismissal for inability to adequately place the student in an appropriate clinical educational setting.

3. In the event of a positive criminal background check, the program director and Assistant Dean of Student and Clinical Affairs will consult with legal counsel as needed and a determination will be made as to the process for disclosure of positive findings – both within WCHP as well as external site
  
4. Failure to disclose a conviction, or material misrepresentation of information, is deemed to be falsification of the program application and may result in dismissal from the University of New England when discovered





**D. Appendix 4 DPT Program Professional Behaviors Remediation Plan Form**

The DPT program faculty has recommended you complete a remediation plan to recognize current deficits in professional behaviors, and to develop measurable goals and a plan to address those issues.

Student Name: \_\_\_\_\_ Faculty Advisor: \_\_\_\_\_ Date Referred to SDC: \_\_\_\_\_

Section A. Professional Behaviors Table: The areas listed below are the same as those in the Critical Incident Report that prompted your referral to the SDC.

		Level of Professional Behavior at time of SDC referral	
Professional Behaviors	Student Handbook Definition	Unsatisfactory	Not Applicable
1. Critical Thinking	The ability to question logically, identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.		
2. Communication	The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.		
3. Problem-Solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.		
4. Interpersonal Skills	The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.		
5. Responsibility	The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.		
6. Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.		
7. Use of Constructive Feedback	The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.		
8. Effective Use of Time and Resources	The ability to manage time and resources effectively to obtain the maximum possible benefit.		

9.	Stress Management	The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.		
10.	Commitment to Learning	The ability to self-direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.		

Summary of specific Behaviors needing remediation

For each professional behavior noted as “Unsatisfactory”, specific examples of the behaviors involved in the CIR are highlighted in the tables below. After each table, please reflect on the behaviors and describe in your own words what led to the problem(s). Please provide clear, comprehensive responses.

<p>1. Critical Thinking - The ability to question logically, identify, generate and evaluate elements of logical argument; recognize and differentiate facts, appropriate or faulty inferences, and assumptions; and distinguish relevant from irrelevant information. The ability to appropriately utilize, analyze, and critically evaluate scientific evidence to develop a logical argument, and to identify and determine the impact of bias on the decision making process.</p>			
<p><b>Unsatisfactory:</b>            Fails to raise relevant questions            Fails to consider all available information            Unable to articulates ideas            Fails to understand the scientific method            Unable to states the results of scientific literature and is unable to critically appraise findings (i.e. methodology and conclusion)            Fails to recognizes holes in knowledge base            Does not acceptance responsibility for limited knowledge and experience in knowledge base</p>	<p><b>Beginning Level:</b>            Raises relevant questions            Considers all available information            Articulates ideas            Understands the scientific method            States the results of scientific literature but has not developed the consistent ability to critically appraise findings (i.e. methodology and conclusion)            Recognizes holes in knowledge base            Demonstrates acceptance of limited knowledge and experience in knowledge base</p>	<p><b>Intermediate Level:</b>            Feels challenged to examine ideas            Critically analyzes the literature and applies it to patient management            Utilizes didactic knowledge, research evidence, and clinical experience to formulate new ideas            Seeks alternative ideas            Formulates alternative hypotheses            Critiques hypotheses and ideas at a level consistent with knowledge base            Acknowledges presence of contradictions</p>	<p><b>Entry Level:</b>            Distinguishes relevant from irrelevant patient data            Readily formulates and critiques alternative hypotheses and ideas            Infers applicability of information across populations            Exhibits openness to contradictory ideas            Identifies appropriate measures and determines effectiveness of applied solutions efficiently            Justifies solutions selected</p>

Student Reflection:

<p>2. Communication - The ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.</p>			
<p><b>Unsatisfactory:</b>            Does not understand the English language (verbal and written): fails to use correct grammar, accurate spelling and expression, handwriting is illegible            Fails to recognize impact of non-verbal communication in self and others            Fails to recognize the verbal and non-verbal characteristics that portray confidence            Fails to utilize electronic communication appropriately</p>	<p><b>Beginning Level:</b>            Demonstrates understanding of the English language (verbal and written): uses correct grammar, accurate spelling and expression, legible handwriting            Recognizes impact of non-verbal communication in self and others            Recognizes the verbal and non-verbal characteristics that portray confidence            Utilizes electronic communication appropriately</p>	<p><b>Intermediate Level:</b>            Utilizes and modifies communication (verbal, non-verbal, written and electronic) to meet the needs of different audiences            Restates, reflects and clarifies message(s)            Communicates collaboratively with both individuals and groups            Collects necessary information from all pertinent individuals in the patient/client management process            Provides effective education (verbal, non-verbal, written and electronic)</p>	<p><b>Entry Level:</b>            Demonstrates the ability to maintain appropriate control of the communication exchange with individuals and groups            Presents persuasive and explanatory verbal, written or electronic messages with logical organization and sequencing            Maintains open and constructive communication            Utilizes communication technology effectively and efficiently</p>

Student Reflection:

3. Problem Solving – The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.			
<p>Unsatisfactory:</p> <ul style="list-style-type: none"> <li>Does not recognize problems</li> <li>Does not state problems clearly</li> <li>Does not describe known solutions to problems</li> <li>Does not identify resources needed to develop solutions</li> <li>Does not use technology to search for and locate resources</li> <li>Does not identify possible solutions and probable outcomes</li> </ul>	<p>Beginning Level:</p> <ul style="list-style-type: none"> <li>Recognizes problems</li> <li>States problems clearly</li> <li>Describes known solutions to problems</li> <li>Identifies resources needed to develop solutions</li> <li>Uses technology to search for and locate resources</li> <li>Identifies possible solutions and probable outcomes</li> </ul>	<p>Intermediate Level:</p> <ul style="list-style-type: none"> <li>Prioritizes problems</li> <li>Identifies contributors to problems</li> <li>Consults with others to clarify problems</li> <li>Appropriately seeks input or guidance</li> <li>Prioritizes resources (analysis and critique of resources)</li> <li>Considers consequences of possible solutions</li> </ul>	<p>Entry Level:</p> <ul style="list-style-type: none"> <li>Independently locates, prioritizes and uses resources to solve problems</li> <li>Accepts responsibility for implementing solutions</li> <li>Implements solutions</li> <li>Reassesses solutions</li> <li>Evaluates outcomes</li> <li>Modifies solutions based on the outcome and current evidence</li> <li>Evaluates generalizability of current evidence to a particular problem</li> </ul>

Student Reflection:

4. Interpersonal Skills – The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community in a culturally aware manner.

<p>Unsatisfactory: Fails to maintain professional demeanor in all interactions Fails to demonstrates interest in patients as individuals Does not communicate with others in a respectful and confident manner Does not respect differences in personality, lifestyle and learning styles during interactions with all persons Fails to maintain confidentiality in all interactions Fails to recognize the emotions and bias that one brings to all professional interactions</p>	<p>Beginning Level: Maintains professional demeanor in all interactions Demonstrates interest in patients as individuals Communicates with others in a respectful and confident manner Respects differences in personality, lifestyle and learning styles during interactions with all persons Maintains confidentiality in all interactions Recognizes the emotions and bias that one brings to all professional interactions</p>	<p>Intermediate Level: Recognizes the non-verbal communication and emotions that others bring to professional interactions Establishes trust Seeks to gain input from others Respects role of others Accommodates differences in learning styles as appropriate</p>	<p>Entry Level: Demonstrates active listening skills and reflects back to original concern to determine course of action Responds effectively to unexpected situations Demonstrates ability to build partnerships Applies conflict management strategies when dealing with challenging interactions Recognizes the impact of non-verbal communication and emotional responses during interactions and modifies own behaviors based on them</p>
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Student Reflection:

5. Responsibility – The ability to be accountable for the outcomes of personal and professional actions and to follow through on commitments that encompass the profession within the scope of work, community and social responsibilities.

<p>Unsatisfactory</p> <ul style="list-style-type: none"> <li>Fails to demonstrate punctuality</li> <li>Fails to provide a safe and secure environment for patients</li> <li>Does not assume responsibility for actions</li> <li>Does not follow through on commitments</li> <li>Fails to articulate limitations and readiness to learn</li> <li>Fails to abide by all policies of academic program and clinical facility</li> </ul>	<p>Beginning Level:</p> <ul style="list-style-type: none"> <li>Demonstrates punctuality</li> <li>Provides a safe and secure environment for patients</li> <li>Assumes responsibility for actions</li> <li>Follows through on commitments</li> <li>Articulates limitations and readiness to learn</li> <li>Abides by all policies of academic program and clinical facility</li> </ul>	<p>Intermediate Level:</p> <ul style="list-style-type: none"> <li>Displays awareness of and sensitivity to diverse populations</li> <li>Completes projects without prompting</li> <li>Delegates tasks as needed</li> <li>Collaborates with team members, patients and families</li> <li>Provides evidence-based patient care</li> </ul>	<p>Entry Level:</p> <ul style="list-style-type: none"> <li>Educates patients as consumers of health care services</li> <li>Encourages patient accountability</li> <li>Directs patients to other health care professionals as needed</li> <li>Acts as a patient advocate</li> <li>Promotes evidence-based practice in health care settings</li> <li>Accepts responsibility for implementing solutions</li> <li>Demonstrates accountability for all decisions and behaviors in academic and clinical settings</li> </ul>
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Student Reflection:

6. Professionalism – The ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.

<p><b>Unsatisfactory:</b> Fails to abide by all aspects of the academic program honor code and the APTA Code of Ethics Unaware of state licensure regulations Fails to project a professional image Does not attend professional meetings Fails to demonstrate cultural/generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers</p>	<p><b>Beginning Level:</b> Abides by all aspects of the academic program honor code and the APTA Code of Ethics Demonstrates awareness of state licensure regulations Projects professional image Attends professional meetings Demonstrates cultural/generational awareness, ethical values, respect, and continuous regard for all classmates, academic and clinical faculty/staff, patients, families, and other healthcare providers</p>	<p><b>Intermediate Level:</b> Identifies positive professional role models within the academic and clinical settings Acts on moral commitment during all academic and clinical activities Identifies when the input of classmates, co-workers and other healthcare professionals will result in optimal outcome and acts accordingly to attain such input and share decision making Discusses societal expectations of the profession</p>	<p><b>Entry Level:</b> Demonstrates understanding of scope of practice as evidenced by treatment of patients within scope of practice, referring to other healthcare professionals as necessary Provides patient/family centered care at all times as evidenced by provision of patient/family education, seeking patient input and informed consent for all aspects of care and maintenance of patient dignity Seeks excellence in professional practice by participation in professional organizations and attendance at sessions or participation in activities that further education/professional development Utilizes evidence to guide clinical decision making and the provision of patient care, following guidelines for best practices Discusses role of physical therapy within the healthcare system and in population health Demonstrates leadership in collaboration with both individuals and groups</p>
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Student Reflection:

<p>7. Use of Constructive Feedback – The ability to seek out and identify quality sources of feedback, reflect on and integrate the feedback, and provide meaningful feedback to others.</p>			
<p>Fails to demonstrate active listening skills          Fails to assess own performance          Does not actively seek feedback from appropriate sources          Fails to demonstrate receptive behavior and positive attitude toward feedback          Does not incorporate specific feedback into behaviors          Fails to maintain two-way communication without defensiveness</p>	<p><b>Beginning Level:</b>          Demonstrates active listening skills          Assesses own performance          Actively seeks feedback from appropriate sources          Demonstrates receptive behavior and positive attitude toward feedback          Incorporates specific feedback into behaviors          Maintains two-way communication without defensiveness</p>	<p><b>Intermediate Level:</b>          Critiques own performance accurately          Responds effectively to constructive feedback          Utilizes feedback when establishing professional and patient related goals          Develops and implements a plan of action in response to feedback          Provides constructive and timely feedback</p>	<p><b>Entry Level:</b>          Independently engages in a continual process of self evaluation of skills, knowledge and abilities          Seeks feedback from patients/clients and peers/mentors          Readily integrates feedback provided from a variety of sources to improve skills, knowledge and abilities          Uses multiple approaches when responding to feedback          Reconciles differences with sensitivity          Modifies feedback given to patients/clients according to their learning styles</p>

Student Reflection:

8. Effective Use of Time and Resources – The ability to manage time and resources effectively to obtain the maximum possible benefit.			
<p>Unsatisfactory:</p> <p>Is unprepared for the day's activities/responsibilities</p> <p>Fails to identify resource limitations (i.e. information, time, experience)</p> <p>Does not determine when and how much help/assistance is needed</p> <p>Fails to access current evidence in a timely manner</p> <p>Does not verbalize productivity standards and identify barriers to meeting productivity standards</p> <p>Does not self-identify and initiate learning opportunities during unscheduled time</p>	<p>Beginning Level:</p> <p>Comes prepared for the day's activities/responsibilities</p> <p>Identifies resource limitations (i.e. information, time, experience)</p> <p>Determines when and how much help/assistance is needed</p> <p>Accesses current evidence in a timely manner</p> <p>Verbalizes productivity standards and identifies barriers to meeting productivity standards</p> <p>Self-identifies and initiates learning opportunities during unscheduled time</p>	<p>Intermediate Level:</p> <p>Utilizes effective methods of searching for evidence for practice decisions</p> <p>Recognizes own resource contributions</p> <p>Shares knowledge and collaborates with staff to utilize best current evidence</p> <p>Discusses and implements strategies for meeting productivity standards</p> <p>Identifies need for and seeks referrals to other disciplines</p>	<p>Entry Level:</p> <p>Uses current best evidence</p> <p>Collaborates with members of the team to maximize the impact of treatment available</p> <p>Has the ability to set boundaries, negotiate, compromise, and set realistic expectations</p> <p>Gathers data and effectively interprets and assimilates the data to determine plan of care</p> <p>Utilizes community resources in discharge planning</p> <p>Adjusts plans, schedule etc. as patient needs and circumstances dictate</p> <p>Meets productivity standards of facility while providing quality care and completing non-productive work activities</p>

Student Reflection:

<p>9. Stress Management – The ability to identify sources of stress and to develop and implement effective coping behaviors; this applies for interactions for: self, patient/clients and their families, members of the health care team and in work/life scenarios.</p>			
<p>Unsatisfactory:            Fails to recognize own stressors            Fails to recognize distress or problems in others            Fails to seek assistance as needed            Does not maintains professional demeanor in all situations</p>	<p>Beginning Level:            Recognizes own stressors            Recognizes distress or problems in others            Seeks assistance as needed            Maintains professional demeanor in all situations</p>	<p>Intermediate Level:            Actively employs stress management techniques            Reconciles inconsistencies in the educational process            Maintains balance between professional and personal life            Accepts constructive feedback and clarifies expectations            Establishes outlets to cope with stressors</p>	<p>Entry Level:            Demonstrates appropriate affective responses in all situations            Responds calmly to urgent situations with reflection and debriefing as needed            Prioritizes multiple commitments            Reconciles inconsistencies within professional, personal and work/life environments            Demonstrates ability to defuse potential stressors with self and others</p>

Student Reflection:

10. Commitment to Learning – The ability to self direct learning to include the identification of needs and sources of learning; and to continually seek and apply new knowledge, behaviors, and skills.

<p>Unsatisfactory: Fails to prioritizes information needs Fails to analyze and subdivide large questions into components Does not identify own learning needs based on previous experiences Does not welcome and/or seek new learning opportunities Does not seek out professional literature Fails to plan and present an in-service, research or cases studies</p>	<p>Beginning Level: Prioritizes information needs Analyzes and subdivides large questions into components Identifies own learning needs based on previous experiences Welcomes and/or seeks new learning opportunities Seeks out professional literature Plans and presents an in-service, research or cases studies</p>	<p>Intermediate Level: Researches and studies areas where own knowledge base is lacking in order to augment learning and practice Applies new information and re-evaluates performance Accepts that there may be more than one answer to a problem Recognizes the need to and is able to verify solutions to problems Reads articles critically and understands limits of application to professional practice</p>	<p>Entry Level: Respectfully questions conventional wisdom Formulates and re-evaluates position based on available evidence Demonstrates confidence in sharing new knowledge with all staff levels Modifies programs and treatments based on newly-learned skills and considerations Consults with other health professionals and physical therapists for treatment ideas</p>
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Student Reflection:

Section C. Goals and Formal Development Plan:

Goals: Please develop at least one goal to address each of the problems/professional behaviors identified and add them to the Remediation Plan Table below. Consider the following points when developing your goals:

All goals should be written as “SMART” goals: specific, measurable, achievable, relevant and time bound. Specifically consider what you should stop doing, start doing, or what you should do differently.

Communication skills, both verbal and non-verbal, should be considered in your goal setting.

Example attributes to consider in your professional behavior goals are often closely associated with emotional intelligence (EI), also referred to as the emotional quotient (EQ). EI/EQ is defined as:

“A set of emotional and social skills that influence the way we perceive and express ourselves, develop and maintain social relationships, cope with challenges, and use emotional information in an effective and meaningful way.”<sup>2</sup>

The five realms and individual components of EI/EQ are listed in the table below. Refer to the text *The Student EQ Edge Student Workbook*<sup>3</sup> by Kanoy, Book and Stein, available from the SDC, to develop your goals, measurable outcomes and plan.

SELF-PERCEPTION	SELF-EXPRESSION	INTERPERSONAL	DECISION MAKING	STRESS MANAGEMENT
Self-Regard	Emotional Expression	Interpersonal Relationships	Problem Solving	Flexibility
Self-Actualization	Assertiveness	Empathy	Reality Testing	Stress Tolerance
Emotional Self-Awareness	Independence	Social Responsibility	Impulse Control	Optimism

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<sup>2</sup> Stein, S, Book, H, Kanoy, K. *The Student EQ Edge: Emotional Intelligence and Your Academic & Personal Success*. San Francisco, CA: Jossey-Bass;2013:4.

<sup>3</sup> Kanoy, K, Book, H, Stein, S. *The Student EQ Edge: Emotional Intelligence and Your Academic & Personal Success Student Workbook*. San Francisco, CA: Jossey-Bass;2013:3.

Specific Behavior Needing Improvement	Achievable, Relevant Goal	Measurable Outcome	Plan to achieve goal;	Time-frame

Section D. Consequences: Please clearly and thoroughly reflect on the potential outcomes if you're unsuccessful in meeting your goals within the stipulated timeframe (250 word minimum). This narrative can universally cover the entire plan and does not need to address each goal individually, but feel free to do so.

## **E. Appendix 5 Student Scholarship Group Assignment Procedure**

### Middle of Summer Year 2

In the spring of year 2, students enroll in PTH695 Scholarship I, a 2 credit course that is followed by PTH 795 Scholarship II offered in fall year 3. Students are given the choice of four categories of scholarship on which they will work:

- Case Report – students write a case report on a patient that was treated in Clinical Practicum 2.
- Research – Students work on a faculty research project
- Teaching and Learning – students learn about teaching and learning and conduct an educational scholarship project
- Leadership and Service – students learn about leadership and apply the skills to: (1) a specific service project that is offered by a faculty member or (2) a service project that is developed by the students during the first semester of the 2 course sequence.

### Assessment of Faculty Availability

1. Each year, faculty, in consultation with the Program Director, determine who is going to be available to offer a Research project(s) on which students can work, offer a specific Leadership/Service project, mentor a section of Case Report or Teaching and Learning.
2. Faculty determine the number of students per group with whom they can work on the faculty member's research or defined service project.

### Student Meeting

- Faculty who offer research projects or specific Leadership/Service projects create short videos (no more than 5 min) describing the experience. Students view the videos on their own time prior to a Scholarship Class Meeting
- A Scholarship Class Meeting is held during the summer of year 2 in which faculty will answer questions about the Scholarship Options.
- Students are given at least 2 weeks to consider options and identify/determine potential group/work partner(s). Generally, 4 group members is maximum number of students for research groups.
- Students are asked to rank their 1st thru 4th choices on the prepared ranking sheet. They also indicate other students with whom they want to work on the scholarship.
- Students are assigned to scholarship options based on many factors including: student choice, faculty availability, current faculty projects, preferred group size, and other factors.
- Students are notified of the scholarship track and group to which they have been assigned at the end of the summer semester of year 2.
- Because of the number of stakeholders and considerations needed to determine the scholarship choices each year, changes to the Scholarship groups after they are officially assigned, are made only in extreme circumstances.

## F. Appendix 6 NPTE Early Exam Approval Form

**Student Name:** \_\_\_\_\_ **Date of Request:** \_\_\_\_\_

The above named student requests to take the NPTE before graduation.

The signature of the student's academic advisor below attests to the following:

1. I have met with the above named student and discussed the pros and cons of taking the NPTE early. The discussion involved:
  - a. Relationship between GPA and NPTE scores
  - b. Importance of adequate time to study for the exam
  - c. Testing Limits
    - i. Students cannot test more than three consecutive times. If students have tested three consecutive times, they must skip the next exam date.
    - ii. Students cannot test more than six times in their lifetime. They may test up to six times if they are otherwise qualified to test.
    - iii. Students cannot test if they previously took the exam twice and received two very low scores, defined as any scaled score below 400.
  - d. Other factors affecting the request to take the NPTE early

Advisor's Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date of Advisement: \_\_\_\_\_

The above named student has consulted with the Clinical Education Faculty to ensure that there are no concerns about the student successfully completing Clinical Practicum 3.

DCE / ADCE Name (print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In lieu of a signature from the DCE or ADCE, students may attach a copy of an email communication from the DCE or ADCE confirming that the clinical education faculty have no concerns about the student successfully completing Clinical Practicum 3.