

Department  
*of*  
Physical Therapy  
Faculty  
Manual



The following policies and procedures are written to supplement and expand upon those discussed in the [\*Faculty Constitution and Handbook\*](#) of the University of Mount Union. Faculty in the Physical Therapy Department are responsible for reading and following the policies and procedures outlined here in addition to those described in the aforementioned document.

These policies are as current as the date published; therefore, faculty must ensure they are referencing the most current version. It is important to note that policies and procedures contained herein may be updated from time to time in accordance with established Department processes.

# Physical Therapy Faculty Handbook

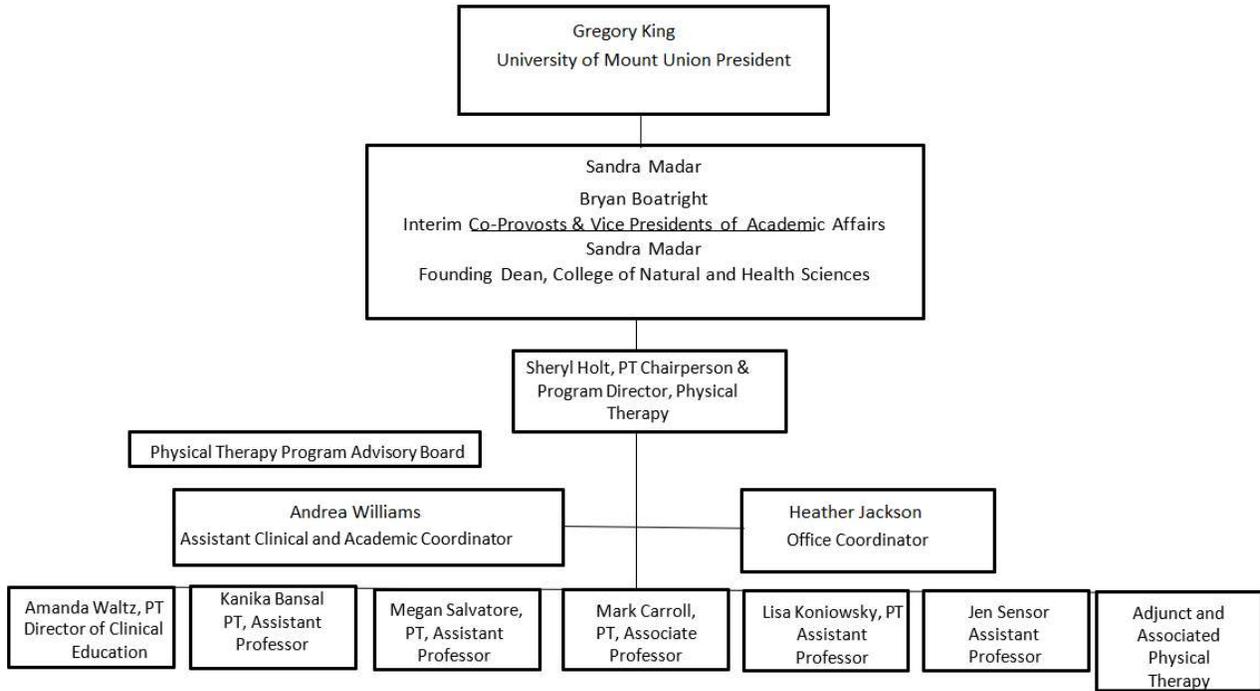
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# Physical Therapy Program



**University Mission**

The mission of the University of Mount Union is to prepare students for fulfilling lives, meaningful work and responsible citizenship.

**Program Mission**

The mission of the Physical Therapy Program is to prepare sensitive, responsive Doctors of Physical Therapy who aptly integrate evidence, best practice, lifelong service, and advocacy for the betterment and care of their clients and society.

**Program Vision**

The Physical Therapy Program of the University of Mount Union will be known by our university and professional peers as providing a program of study that blends the best of traditional and problem-based learning methodologies to create a dynamic interprofessional patient-centered learning curriculum. This unique curriculum prepares graduates for a vocation as compassionate, confident, and active professional members of the healthcare team, who are capable of managing health and wellness together with the complex issues of disease.

**Educational Philosophy**

The physical therapy educational program at the University of Mount Union is a hybrid curriculum blending elements of traditional lecture lab and problem-based theories<sup>1</sup> built upon a Socratic and Andragogic methodology. This methodologic foundation is used to deliver a curriculum, which, coupled with interprofessional practice opportunities, places the patient/client at the center of all clinical decisions.

The faculty encourage students to understand themselves and their relationships to others and the world. In the merging style of Bachelard's philosophy of science and we see this awareness as helping to foster the students' ability to develop and embrace professional evolution over time.<sup>2,3,4</sup> These efforts are made to produce dynamic Doctors of Physical Therapy who utilize evidence-based practices and have the courage to inspire new truths. This philosophy and associated efforts to integrate it in our program brings relevance to contemporary exemplars within the field of rehabilitative medicine.

**Curriculum Model** *(See illustration that follows)*

To fulfill the mission, the curriculum includes interprofessional coursework and incorporates the curricular threads of wellness and rehabilitation medicine, in addition to lifespan growth and development. The curriculum is delivered over a three-year period using seven unique cogs: foundational sciences, clinical sciences, professional courses, patient/client management, discovery, physical therapy practice, and clinical education. Each cog is composed of multiple courses; the courses introduce the student to the unique skill sets, knowledge base, and professionalism that are essential elements of physical therapy practice.

## Curricular Cogs

### Foundation Sciences

This curricular cog represents the foundational knowledge base that a physical therapist must master and build upon to provide the most efficient and effective care for patients. The elements of this cog are: human anatomy; neuroanatomy; human movement; pharmacology; and medical foundations I, II, and III. The medical foundations courses present pathophysiology, syndromes and conditions, and medical diagnostics respectively.

### Clinical Science Courses

This cog represents the four clinical preferred practice patterns used in physical therapy practice. The elements include: cardiopulmonary, integumentary, musculoskeletal, and neuromuscular courses.

### Professional Courses

This curricular cog represents the qualifications, roles, and professionalism of the physical therapist and of other members of the healthcare team who interact regularly with physical therapists. The elements are divided into two distinct areas: professional development, and interprofessional practice. The professional development series covers teaching/learning theories, psychological and social development, legal/ethical & safe practice, continued competence, wellness principles and community health, personal development, and societal responsibilities. Within the interprofessional series, students work and study with other professional discipline students: physician assistants, nursing, and physicians. The series provides the student with the ability to examine and clarify their role on the healthcare team.

### Patient/Client Management

The Patient/Client Management cog represents the practice settings and types of patients/clients physical therapists treat. This cog is divided into two distinct series: practice affairs, and clinical interventions & treatments. The elements of the practice affairs series cover: physical therapy delivery setting, professional roles of the physical therapist, support roles, clinical management, and the healthcare system in the United States and abroad. The elements of the clinical interventions & treatment series contain patient case studies that range from birth to death; encompass cultural diversity; and focus on basic, intermediate, and entry level medical/rehabilitative conditions and syndromes.

### Discovery

This cog represents the role that research, and evidence play in clinical practice. Students are introduced to the elements of research design, interpretation, and levels of evidentiary support. Students then have an opportunity to work through an individual or group process to put into practical application the skills they learned by completing one of three project options.

### Physical Therapy Practice

This curricular cog represents the tests and measurements, and the procedural interventions that physical therapists utilize. The elements of the methods & techniques series specifically address tests and measures, and the assessment, design, and application of orthotics and prosthetics. The therapeutic interventions series specifically addresses the elements of exercise, physical agents, and motor control.

### Clinical Education

Students are placed on clinical education experiences with licensed physical therapists to work

with patients in various clinical settings throughout the lifespan. Emphasis on critical thinking, clinical management, and hands-on experiences serve as the mainstay of this curricular cog. Three full-time clinical education experiences are planned throughout the curriculum and integrated clinical experiences occur within the didactic courses in the curriculum.

### **Curricular Threads**

The curricular threads are components of the curriculum that are consistently discussed, referenced, reinforced, and built upon in every cog. The curricular threads provide perspective for the physical therapist; historical and futuristic. Each thread has a past, present, and future impact on clinical practice.

#### **Wellness**

This curricular thread presents content related to both the physical and financial concepts of wellness. Physical wellness promotes the prevention of disease and dysfunction, balanced with maintaining a healthy lifestyle which includes diet, exercise, stress reduction, and behavior modification. Fiscal wellness addresses concepts related to the cost of healthcare and making sound decisions for patients, the physical therapy practice, and society at large. The ethical challenges of balancing fiscal wellness, cost and reimbursement, and physical wellness are explored.

#### **Rehabilitation Medicine**

This curricular thread focuses on the science behind the practice of physical therapy, the related interconnectedness of the International Classification of Functioning, Disability, and Health (ICF), and the mind-body connection. Advances in medicine; surgery; pharmacology; and orthotics and prosthetics are discussed in the larger context of rehabilitation.

#### **Lifespan Growth**

This curricular thread discusses content associated with the biologic and physical growth that individuals experience throughout the lifespan as well as chronology of developmental milestones. While in theory it is possible to distinguish lifespan growth from development (next curricular thread) the two concepts are often intricately linked.

#### **Lifespan Development**

This curricular thread discusses content related to the intellectual and social development of the individual over time, specifically focused on the emotional and psychosocial aspects of development. In addition, a strong sense of self includes the spiritual dimension; therefore, spiritual development is included.

In the following depiction of the curricular model, discussed above, the rope represents the well-prepared graduate of the University of Mount Union Physical Therapy Program. The rope imagery suggests that our graduates then become the lifeline of the community in which they live and work; prepared for the future of practice, keeping the patient/client central to their work and decision-making. Much like one would utilize a rope, this individual will be able to provide stability, security, and assistance with heavy lifting.

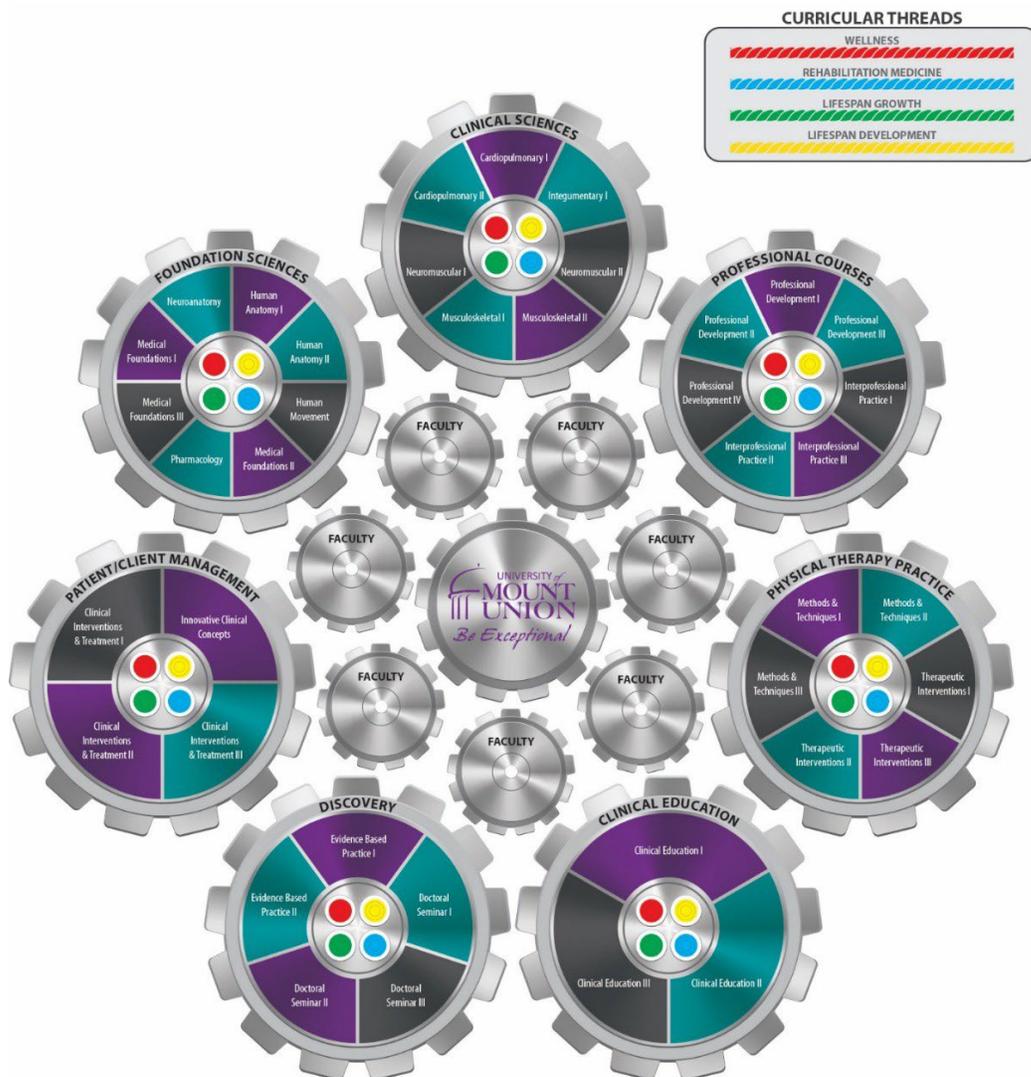
The University is at the center of the process of educating students; all resources and support are provided by the institution. As such, the institution represents the power source for the rope (graduate) making process. Faculty are hired by the university to provide instruction to students. The faculty are responsible for weaving the content together and ensuring the curriculum is being delivered in a seamless and cohesive manner. Together, the University and program

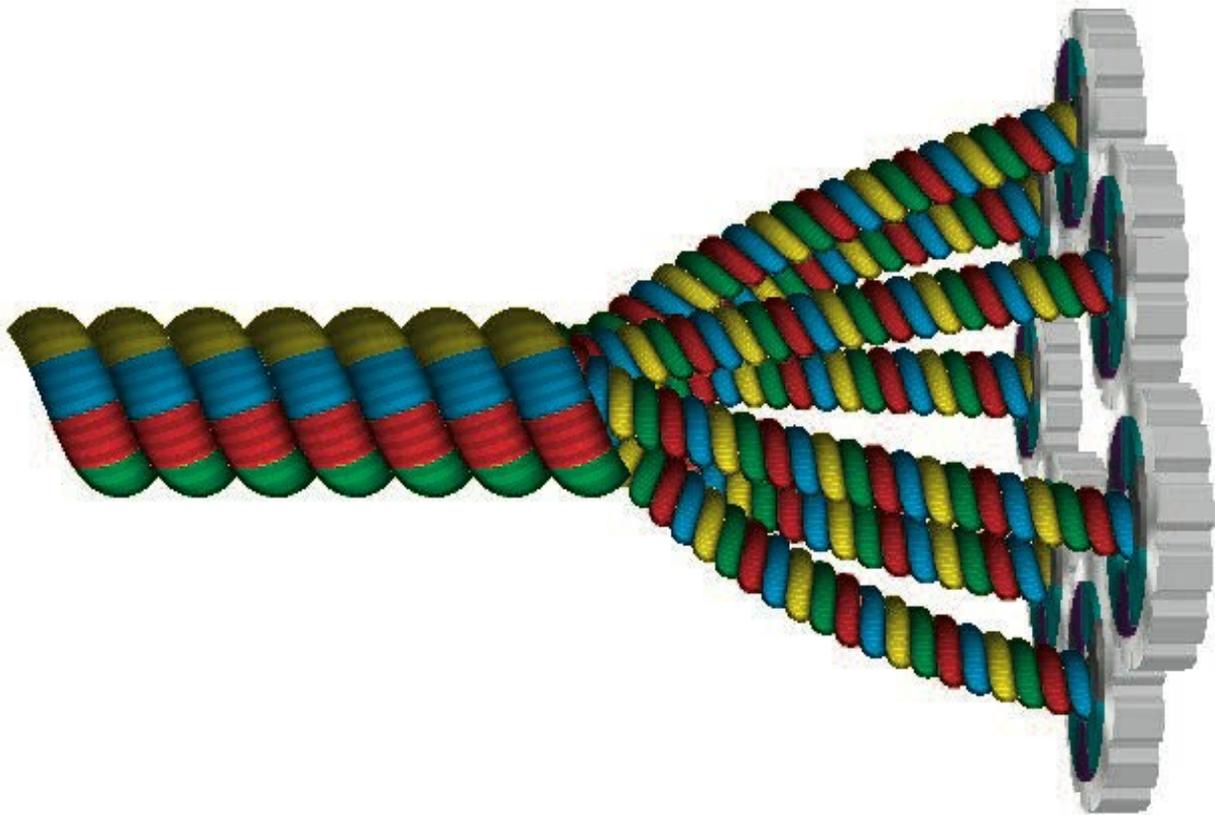
faculty are the central power and driving force in the students' educational process.

*References:*

1. Saarinen-Rahiika H. Binkley JH. Problem-Based Learning in Physical Therapy: A Review of the Literature and Overview of the McMaster University Experience. PTJ 1998. 78(2). 195-207
2. Bachelard, Gaston, 1884-1962. The New Scientific Spirit. Boston: Beacon Press, 1984.
3. Kuhn, Thomas S. The Structure of Scientific Revolutions. 50th anniversary. Ian Hacking (intro.) (4th ed.). University of Chicago Press. 2012.
4. Roger, L. The Pedagogical Philosophy of Bachelard. Antistasis, 2014 4(2).

## Curriculum Model Diagram





### **PROGRAM GOALS- PROGRAM STUDENT LEARNING OUTCOMES (PSLO'S)**

PSLO 1: Students will demonstrate excellence in their entry level clinical practices of physical therapy in ways that integrate their didactic and clinical understanding and their applications of aims integral to each of our curricular cogs

PSLO 2: Students will demonstrate effective test preparation that enables passing of the NPTE and early entry into their careers, contributing the aims identified in our current program effectiveness outcomes.

PSLO 3: Students will demonstrate integrated professional values in their written, interpersonal, and personal presentations of themselves across all vital environments in classrooms, community settings, and clinic, consistent with the aims of our program and the APTA core values.

### **STUDENT LEARNING OUTCOMES (SLO'S)**

SLO 1: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate comprehensive integrated clinical knowledge and related skills consistent with foundational and entry-level practice of clinical science, within didactic clinical science course curriculum.

SLO 2: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate critical clinical reasoning in the routine

selection and appropriate use of evidence-based practice principles, ICF applications, and selection of outcome measures. These will contribute to the development and modification of ICF conscious evidence-based PT plans of care and related interventions.

SLO 3: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate critical skills in the investigation, selection and application of evidence-based knowledge: identifying appropriate and timely resources, establishing sound reasoning in PT practices and research, disseminating their research, and showing evidence in labs and clinicals, the translation of their understandings into well applied evidence-based practices.

SLO 4: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate competency in clinical applications (basic to complex) of patient examination, evaluation, and intervention within diverse patient applications across multiple didactic settings.

SLO 5: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate competency in administration of patient outcome assessments across patient populations and clinical settings.

SLO 6: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate attitudes and behaviors that manifest cultural sensitivity, professionalism, ethical practices, and consistency with the overarching UMU and DPT missions including competency in self-assessment, professional development and lifelong learning.

SLO 7: Integrating critical thinking and clinical reasoning established through didactic, clinical, research, and other formative learning opportunities within their Mount Union education experiences, UMU DPT students will demonstrate patient advocacy, consistent with the UMU DPT mission, by taking on leadership roles that impact patient outcomes: coordinating care across disciplines and healthcare settings. Delivering patient centered care that leads to comprehensive and financially responsible outcomes.

### **PROGRAM EFFECTIVENESS OUTCOMES (PEO's)**

PEO 1: Utilizing UMU DPT comprehensive resources for learning, students will function at entry-level clinical competence prior to graduation.

PEO 2: Utilizing UMU DPT comprehensive resources for learning, students will demonstrate professional behaviors, attitudes, and actions consistent with APTA's 7 core values and UMU and DPT

PEO 3: Utilizing UMU DPT comprehensive resources for learning, students will maintain a graduation rate  $\geq 90\%$  within 150% of the expected time.

PEO 4: Utilizing UMU DPT comprehensive resources for learning, students and graduates will maintain a first-time National Physical Therapy Exam (NPTE) rate  $\geq 85\%$ .

PEO 5: Utilizing UMU DPT comprehensive resources for learning, students and graduates will maintain a program ultimate National Physical Therapy Exam (NPTE) rate  $\geq 85\%$ .

PEO 6: Utilizing UMU DPT comprehensive resources for learning, program graduates will maintain an employment rate  $\geq 90\%$  one year after graduation.

PEO 7: Utilizing UMU DPT comprehensive resources for learning, support, and development, faculty and administrative staff will meet established departmental goals consistent with CAPTE, HLC, and University and Departmental missions.

### **CURRICULAR GOALS**

The following Curricular Goals are based upon the evaluative criteria used by the Commission on Accreditation of Physical Therapy Education (CAPTE).

- 1.0 Establish culturally competent communication when engaged with faculty, staff, students, patients/clients, and other healthcare professionals, in addition to demonstrating appropriate verbal, non-verbal, and written communication. **(7D7)**
- 2.0 Incorporate an understanding of the implications of individual and cultural differences when engaged in all physical therapy roles. **(7D8)**
- 3.0 Identify, assess and promote the health needs of individuals, groups and communities, including screening, prevention and wellness programs that are culturally appropriate within the practice of physical therapy. **(7D5,7D34)**
- 4.0 Demonstrate appropriate professional behavior by:
  - 4.1 Demonstrating caring, compassion, respect, empathy and understanding, personal responsibility and trustworthiness in interactions with others. **(7D4,7D10)**
  - 4.2 Adhering to the standards of practice, state and federal laws. **(7D1,7D5,7D25)**
  - 4.3 Practicing physical therapy in a manner congruent with the professional code of ethics and core values. **(7D4,7D19,7D5,7D25)**

- 4.4 Participating in peer and self-assessment activities. **(7D5)**
- 4.5 Reflecting on and appropriately address both positive and negative outcomes resulting from assessment activities and personal behavior. **(7D5,7D25)**
- 4.6 Participating in clinical education activities **(7D13)**
- 4.7 Formulating and implementing a plan for personal and professional career development. **(7D15)**
- 5.0 Complete screening activities to determine the need for further examination or consultation by a physical therapist or referral to another health care professional. **(7D16)**
- 6.0 Examine movement related impairments, functional limitations, and disabilities across the lifespan by:
  - 6.1 Using the medical record, interview process, and other related sources to compile the patient history. **(7D17)**
  - 6.2 Completing a relevant review of the musculoskeletal, neuromuscular, cardiopulmonary, and integumentary systems as related to movement and movement dysfunction. **(7D18)**
  - 6.3 Demonstrating knowledge of the scientific basis and effectiveness of physical therapy tests and measures. **(7D10,7D11,7D19,7D20)**
  - 6.4 Selecting and implementing culturally appropriate and age-related test and measures. **(7D11,7D19,7D34)**
- 7.0 Synthesize examination data to complete the physical therapy evaluation by:
  - 7.1 Identifying impairments and functional limitations that can be minimized or alleviated through physical therapy **(7D20)**
  - 7.2 Specifying conditions beyond the scope of their abilities or the practice of physical therapy and referring to the appropriate professional. **(7D20)**
- 8.0 Use Critical Thinking skills to:
  - 8.1 Interpret written or oral communications, physical therapy problems and data. **(7D7, 7D20, 7D31, 7D40)**
  - 8.2 Analyze research, concepts, arguments, situations. **(7D9, 7D10,7D11)**
  - 8.3 Evaluate information, claims/arguments. **(7D6, 7D41, 7D42)**
  - 8.4 Construct inferences based on syllogistic reasoning and principles of logic. **(7D10, 7D11, 7D16, 7D19, 7D20, 7D22, 7D25, 7D26)**
  - 8.5 Explain ones' reasoning and conclusions. **(7D7)**
  - 8.6 Monitor, reflect on and question one's own thinking in order to minimize errors and enhance patient/client outcomes. **(7D10)**
  - 8.7 Participate in the design and implementation of clinical practice patterns. **(7D5)**
- 9.0 Efficiently establish a physical therapy diagnosis by:
  - 9.1 Utilizing examination data and evaluation results to establish a differential diagnosis for patients across the lifespan. **(7D22)**
  - 9.2 Considering the policies and procedures of the practice setting. **(7D22)**
  - 9.3 Communicating diagnostic results and clinical impressions with other practitioners as appropriate. **(7D22)**
- 10.0 Determine patient prognoses based on the results of the physical therapy examination, evaluation, and diagnostic process **(7D23)**
- 11.0 Develop and execute a safe and effective plan of care by:

- 11.1 Collaborating with clients, families, payers and other health care professionals to establish an appropriate and culturally competent plan. **(7D5,7D7,7D24,7D28)**
- 11.2 Constructing physical therapy goals and functional outcomes that are realistic, measurable, and delineate a specific time frame for achievement. **(7D24)**
- 11.3 Complying with administrative policies and procedures for a given practice environment. **(7D41)**
- 11.4 Evaluating and modifying treatment plans and goals according to patient feedback and analysis of outcome measures. **(7D24,7D26)**
- 11.5 Maintaining a fiduciary responsibility to all patient/clients. **(7D4,7D10)**
- 12.0 Provide physical therapy intervention by:
  - 12.1 Selecting and executing appropriate therapeutic procedures in order to achieve defined goals **(7D27)**
  - 12.2 Carrying out all physical therapy interventions safely. **(7D27)**
  - 12.3 Incorporating patient and family education into all treatment plans. **(7D12)**
  - 12.4 Completing effective written/electronic documentation of the physical therapy examination, evaluation, diagnosis, prognosis, interventions, and outcomes. **(7D32)**
  - 12.5 Applying principles of risk management and taking appropriate action in an emergency in any practice setting. **(7D33,7D37)**
- 13.0 Appropriately utilizing outcome assessment data by:
  - 13.1 Selecting measures that are reliable and valid and take into account the practice setting, individual differences, and societal influences. **(7D31)**
  - 13.2 Collecting accurate information to allow for analysis of individual patient/client outcomes. **(7D30)**
  - 13.3 Analyzing and applying results to allow for modification of the plan of care. **(7D30,7D31)**
- 14.0 Function in the role of an administrator by:
  - 14.1 Appropriately delegating to and supervising physical therapy related services to support personnel, physical therapist assistants and family members. **(7D5,7D25,7D29)**
  - 14.2 Demonstrating a basic understanding of the history, current status, and future projections for healthcare delivery in the United States. **(7D28,7D41)**
  - 14.3 Participating in management functions such as planning, organizing, leading, controlling, and evaluating as appropriate for a given practice environment. **(7D42, 7D43)**
  - 14.4 Participating in financial management of the practice. **(7D42)**
  - 14.5 Establishing a business plan on a programmatic level for a given practice setting. **(7D42)**
  - 14.6 Participating in activities related to marketing and public relations. **(7D5,7D42)**
- 15.0 Provide and manage care in a variety of care delivery systems by:
  - 15.1 Providing physical therapy through direct access or referral based on patient or client goals, expected functional outcomes, and knowledge of one's own and other's capabilities. **(7D34,7D35,7D39)**
  - 15.2 Managing human and material resources and services to provide high-quality, efficient physical therapy services based on the patient/client's goals, expected

- outcomes. And plan of care. **(7D29,7D36,7D42)**
- 15.3** Interacting with patients, clients, family member's other health care providers, and community-based organizations for the purpose of coordinating activities to facilitate culturally competent, efficient and effective patient/client care. **(7D34,7D39)**
- 15.4** Empowering the patient/client to be an active participant in all aspects of his/her care and treatment. **(7D5)**
- 16.0 Function as an effective educator by applying concepts of teaching and learning theories in designing, implementing and evaluating learning experiences for individuals, organizations and communities. **(7D11)**
- 17.0 Demonstrate the ability to function in the role of consultant by providing consultation to individuals, businesses, schools, government agencies or other organizations. **(7D16,7D35,7D38,7D39)**
- 18.0 Demonstrate the ability to function in the role of researcher, evidence-based practitioner, and clinical decision maker by:
- 18.1** Demonstrating professional judgment and consideration of patient/client values in the application of current theory and knowledge to patient/client management. **(7D4,7D10,7D11)**
- 18.2** Utilizing information technology to access appropriate sources of information in support of clinical decisions. **(7D11)**
- 18.3** Critically evaluating current literature and information sources related to physical therapy practice, research, administration, consultation, and education. **(7D11)**
- 18.4** Participating in scholarly activities that contribute to the body of physical therapy knowledge. **(7D11)**
- 19.0 Demonstrate social responsibility by:
- 19.1** Becoming involved and demonstrating leadership in professional organizations and activities through membership and service. **(7D13)**
- 19.2** Displaying professional behaviors as evidenced by the use of time and effort to meet patient or client needs, by providing *pro bono* services, and placing the patient's/client's needs above the physical therapist's needs. **(7D5,7D42)**
- 19.3** Displaying good citizenship through health and wellness advocacy, including participation in community and human service organizations and activities. **(7D5,7D14,7D34)**
- 19.4 Raising awareness, challenging the status quo and facilitating best practice. **(7D14,7D40,7D41)**
- 19.5** Participating in legislative and political processes **(7D14,7D40,7D41)**
- 20.0 Function as a self-directed lifelong learner by:
- 20.1** Completing projects requiring selection of a topic and independent integration of information from a number of sources. **(7D10, 7D11)**
- 20.2** Understanding the dynamic nature of the knowledge base of physical therapy and the need to stay current through practice, professional literature, and education. **(7D11, 7D15)**
- 20.3** Seeking out new information regarding the practice of physical therapy. **(7D9, 7D10, 7D11)**

- 21.0 Students will function at the level of competence required for their clinical rotation according to Clinical Education Benchmarks – CIET Student Performance Expectations by their respective clinical.
- 21.1 PT-781: Clinical Education I
  - Professional Behaviors (Section 1): “Always” at Midterm and Final
  - Patient Management (Section 2): “Below” by Final
  - Global Rating of Student Clinical Competence: 2 by Final
- 21.2 PT-782: Clinical Education II
  - Professional Behaviors (Section 1): “Always” at Midterm and Final
  - Patient Management (Section 2): “At that level for all familiar patients” by Final
  - Global Rating of Student Clinical Competences: 5 by Final
- 21.3 PT-783: Clinical Education III
  - Professional Behaviors (Section 1): “Always” at Midterm and Final
  - Patient Management (Section 2): “At that level for all patients” by Final
  - Global Rating of Clinical Competence: 8 by Final, Equivalent to entry-level clinical competence

## Assessment Plan

### UNIVERSITY MISSION

The mission of the University of Mount Union is to prepare students for fulfilling lives, meaningful work, and responsible citizenship.

### PROGRAM MISSION

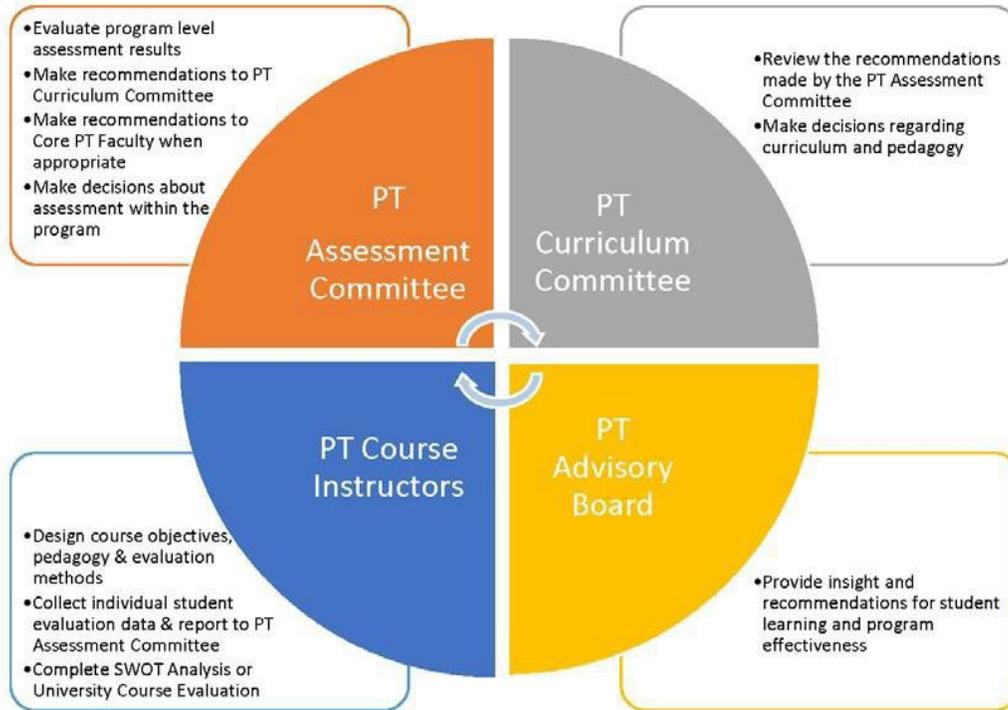
The mission of the Physical Therapy Program is to prepare sensitive, responsive Doctors of Physical Therapy who aptly integrate evidence, best practice, lifelong service, and advocacy for the betterment and care of their clients and society.

### ASSESSMENT PLAN OVERVIEW

The plan is a comprehensive, ongoing, systematic review of all aspects of the Physical Therapy Education program through direct and indirect measures. The aim of the plan is to be proactive in identifying whether or not the program is meeting its mission, goals, and outcomes, and (2) to assess the overall performance of student learning from didactic, problem based, and clinical assessments. The plan has two parts: (1) program assessment of student learning, and (2) assessment of program effectiveness. Execution of the plan requires input from multiple stakeholders: program faculty, staff, students, clinical education instructors and coordinators, and university administrators.

### PROGRAM ASSESSMENT OF STUDENT LEARNING

Information is collected from a variety of tools. The review of this data is completed by the Physical Therapy Assessment Committee. The Assessment Committee is a subset of physical therapy faculty, comprised of core faculty. This committee is asked to interpret, review, and determine the strengths and weaknesses of the program specifically with regard to student learning based on the data; then make recommendations to the program Curriculum Committee and or core faculty for consideration and possible modification.



#### STUDENT LEARNING OUTCOMES ASSESSMENT TOOLS

The DPT program at University of Mount Union utilizes a variety of indirect and direct measures to perform both formative and summative assessments at multiple stages throughout the program duration.

#### Indirect Measures of DPT Student Learning

- Graduation and retention rates
- Job placement rates after graduation (of those seeking employment)
- Student evaluations of courses and instructors

#### Direct Measures of DPT Student Learning

- Clinical Internship Evaluation Tool (CIET) data
- Professional Behavior Inventory Check
- Program comprehensive examinations
- Program comprehensive practical exams
- Milestone Measures: Clinical Science course lab practical examination
  - PT-550 Methods & Techniques I
  - PT-551 Methods & Techniques II
  - PT-571 Cardiopulmonary Systems II
  - PT-673 Musculoskeletal Systems I
  - PT-675 Neuromuscular Systems I

## A SUMMARY OF STUDENT LEARNING OUTCOMES AND ASSESSMENT METHODS

Student Learning Type (Knowledge/Skill/Disposition)	Student Learning Outcomes	Assessment Method
Knowledge	Integrate curricular content knowledge within didactic, problem based, and clinical settings to demonstrate comprehensive clinical reasoning skills consistent with entry level physical therapy. <b>(CG 8)</b>	Comprehensive Exams Comprehensive Practical Clinical Internship Evaluation Tool Lab Practical Examinations (PT 550, 551, 571, 674, 675)
Knowledge	Demonstrate critical reasoning in the routine selection and appropriate use of evidence-based practice principles and outcome measures in the development and modification of PT plans of care. <b>(CG 13, 18)</b>	Comprehensive Exams Comprehensive Practical Lab Practical Examinations (PT 550, 551, 571, 674, 675)
Skill	Demonstrate competency in clinical applications of patient examination, evaluation, and intervention within all patient applications across all didactic and clinical settings. <b>(CG 5,6,7, 9, 11, 12)</b>	Comprehensive Practical Clinical Internship Evaluation Tool Lab Practical Examinations (PT 550, 551, 571, 674, 675)
Skill	Demonstrate competency in administration of patient outcome assessments across patient populations and clinical settings. <b>(CG 10,11, 13)</b>	Clinical Internship Evaluation Tool Lab Practical Examinations (PT 550, 551, 571, 674, 675)
Disposition	Demonstrate culturally sensitive professional and ethical behavior within the didactic and clinical setting. <b>(CG 1, 2, 3, 4, 15)</b>	Comprehensive Exams Comprehensive Practical Clinical Internship Evaluation Tool
Disposition	Demonstrate competency in self-assessment and commitment to professional development and lifelong learning. <b>(CG 16, 17, 20)</b>	Professional Behaviors Inventory checks
Disposition	Demonstrate patient advocacy by taking on leadership roles in coordinating care across disciplines and healthcare settings to deliver comprehensive and financially responsible outcomes. <b>(CG 14, 15, 19)</b>	Clinical Internship Evaluation Tool Professional Behaviors Inventory checks

Curricular Goals (CG)

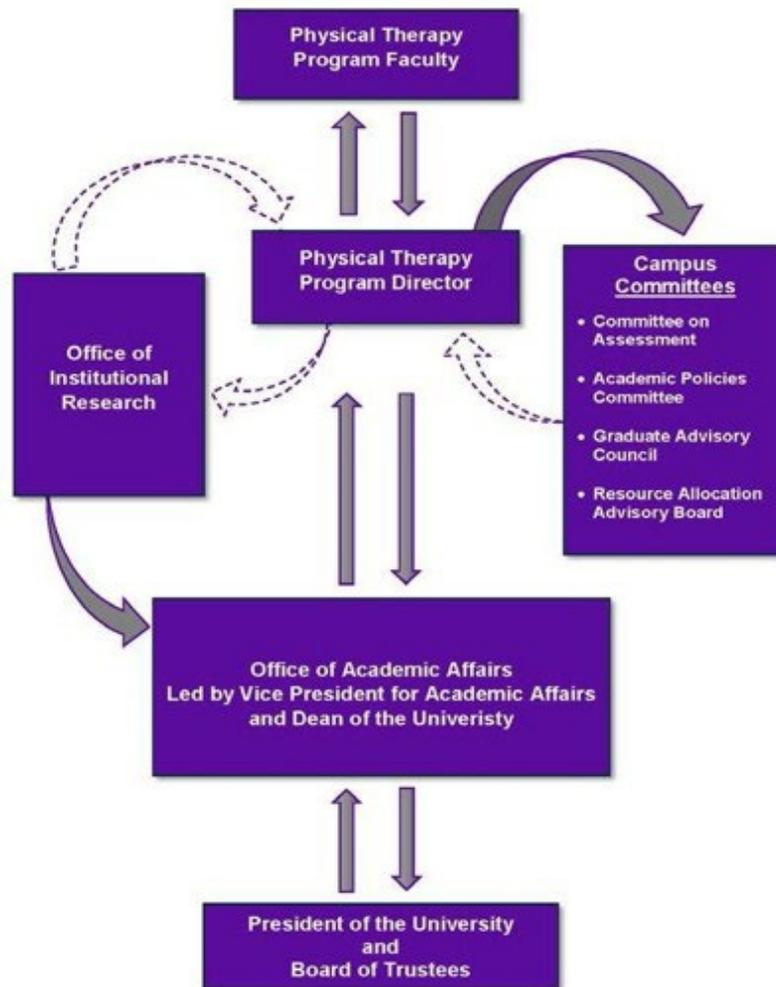
## A. ASSESSMENT TIMELINE

	Assessment 1	Assessment 2	Assessment 3	Assessment 4	Assessment 5
<b>Method</b>	Comprehensive Exam	Comprehensive Practical	Professional Behaviors Portfolio	Clinical Internship Evaluation Tool	Course Lab Practical Examinations
<b>SLO</b>					
<b>Knowledge</b>					
Clinical Reasoning	Year 1 Year 2 Year 3	Year 1 Year 2 Year 3		CIET Criteria V 3, V 5, V 7 PT 781 (sem 4) PT 782 (sem 7)	PT 550 (sem 1) PT 551 (sem 2) PT 571 (sem 4) PT 674 (sem 5) PT 675 (sem 5)
Development Modification of POC	Year 1 Year 2 Year 3	Year 1 Year 2 Year 3			PT 550 (sem 1) PT 551 (sem 2) PT 571 (sem 4) PT 674 (sem 5) PT 675 (sem 5)
<b>Skills</b>					
Examination, Evaluation, Intervention		Year 1 Year 2 Year 3		CIET Criteria V 1, V 4, V 6, V 8, VI, VIII PT 782 (sem 7)	PT 550 (sem 1) PT 551 (sem 2) PT 571 (sem 4) PT 674 (sem 5) PT 675 (sem 5)
Outcome Assessments				CIET Criteria V 2, VIII 5, VIII 7 PT 782 (sem 7)	PT 550 (sem 1) PT 551 (sem 2) PT 571 (sem 4) PT 674 (sem 5) PT 675 (sem 5)
<b>Dispositions</b>					
Cultural <sup>1</sup> Sensitivity & Ethical Behavior	Year 1 Year 2 Year 3	Year 1 Year 2 Year 3		CIET Criteria I I PT 781 (sem 4) PT 782 (sem 7)	
Professional Development & Lifelong Learning			PB Matrix Criteria # 1,2,3,6,7,10 Year 1: Intermed Year 2: EL		
Advocacy			PB Matrix Criteria # 2,4,5,6 Year 1: Intermed Year 2: EL	CIET Criteria VII 3, VII 4, VIII 4, VIII 6 PT 781 (sem 4) PT 782 (sem 7)	

### UNIVERSITY ASSESSMENT PROCESS OF PROGRAM EFFECTIVENESS

The University of Mount Union has established a process to monitor and assess the effectiveness of each program with the Vice President of Academic Affairs (VPAA) and the College of Natural and Health Science Dean playing a central role. The following information outlines how the Physical Therapy Assessment Plan is a part of the University's overall assessment process.

The findings of the Physical Therapy Assessment Committee are reported to the Physical Therapy Program Director who in turn provides an annual report to the VPAA and several university level committees. The VPAA reports to the University President and the University Board of Trustees. The University committees include: Committee on Assessment (CoA), Academic Policies Committee (AcPol), and the Graduate Council (GC). The Program Director also receives information from the Office of Institutional Effectiveness and shares information from all the above sources with the Physical Therapy Department faculty. The diagram below illustrates the University's process. For a complete description of Campus Committee composition and function, please refer to the Faculty Constitution and Handbook under Article VIII Committees.



### PROGRAM EFFECTIVENESS ASSESSMENT TOOLS

The DPT Program Assessment Committee will conduct an annual review of data collected from indirect and direct measures of program effectiveness. Collaboration with University stakeholders to review enrollment and retention data helps to ensure program efficiency and effectiveness.

#### Indirect Measures of Program Effectiveness

- Target Enrollment
- Admission and Enrollment Data
- Graduation and Retention Rates

#### Direct Measures of Program Effectiveness

- Instructional Expenditures per Student
- Performance on the National Physical Therapy Examination (NPTE)
- CAPTE guidelines

## B. PROGRAM RESOURCES ASSESSMENT TIMELINE

Assessment Method Resources Assessed	Course Evaluations by Students	Review of learning spaces	Faculty Assessment of Students (Annual)	Faculty meetings and retreat	Exit Interviews of Students (Annual)
Faculty	End of each Course Each Semester				
Curriculum		Annual	Review of PSLOs student & faculty workload	Preparedness for teaching assignments	Content sequencing
Facilities		Annual		Adequate Space for research & teaching	Study and Learning space
Equipment		Annual		Adequate in number, type, and condition	Learning tools
Students			Admission, Graduation, Retention, Employment, NPTE		

## ASSESSMENT CYCLE FOR PROGRAM EFFECTIVENESS

The DPT program at the University of Mount Union utilizes a continual process improvement model supported by the Office of Academic Affairs. Feedback from faculty, key educational program stakeholders, and the University is evaluated against clearly defined organizational goals in an ongoing effort to improve the program in incremental steps with each cohort. By developing a single source of relevant key performance indicators for all processes and procedures, it is easy for each of the participants in the continual improvement process to find what they need, to know which potential changes impact their role and to foster collaboration between the multiple stakeholders. By following the continual improvement process, the PT Assessment Committee can convey information to key individuals empowered to take constructive action consequently.



## General Program Policies and Positions Program Admissions

The Physical Therapy Program enrolls up to 30 students each admissions cycle. The program envisions each cohort comprised of diverse and academically qualified students. The Admissions Committee, along with the Office of Admission, assures equitable practices in setting admissions criteria by routinely monitoring the entire admissions process. Program faculty members of the Department Admissions Committee determine the academic prerequisites and materials for admissions. These may include all required courses for application, Bachelor's Degree, grade point requirements (pre-req, cum and graduate GPA) , graduate record exam (GRE) scores, letters of recommendations, extra-curricular activities, focused essays, observation hours, or other objective measures.

The Department Admissions Committee works collaboratively with the Program Director to determine if there is any needed adjustment to the maximum class size of 30, based on current and projected resources. This is a multifaceted analysis in which data is used to determine if the program is meeting expected curricular and program outcomes.

### ADMISSIONS PROCESS/POLICIES

The admissions process is conducted in several phases: (1) application to the Program, (2) review of applications with determination of potential interviewees, (3) conducting interviews and seating the class. The Program recognizes and adheres to all non-discrimination policies. Preference will be given to University of Mount Union graduates who apply to the program; the admissions review rubric identifies the extent of such preference.

Students make application to the Doctor of Physical Therapy program utilizing:

Physical Therapy Central Application Service (PTCAS)- all subsequent cohorts

Applications are screened for completeness and compliance with program prerequisite coursework, grade point averages, and standardized testing scores.

Complete and valid applications are reviewed by the Physical Therapy Admissions Committee for determining candidates for interview.

The Admissions Committee may utilize additional means to determine candidates for interview.

Campus or virtual interviews are used prior to seating each cohort.

All decisions of the Physical Therapy Admissions Committee are final.

### STUDENT RIGHTS/RESPONSIBILITIES

The Physical Therapy Program supports and recognizes that students have certain rights and responsibilities for their education. The following rights of the student are recognized as among those which the University/Department of Physical Therapy has a duty to foster and protect: The right to pursue educational, recreational, social, religious, and cultural activities.

The right to maintenance of a campus environment is characterized by safety and good order.

The right to organize, join, and maintain membership in associations to promote reasonable and non-discriminatory University activities.

The equal right with others to appropriate available services of the faculty, administrative offices and counseling agencies of the University.

The right to fair and impartial evaluation of the student's academic work.

The right to have complete and accurate records kept by the University of the student's own academic performance and equally accurate records of fellow students with whom he or she is compared for grading and awarding of degrees.

The right to have the University maintain and protect the confidential status of the student's academic conduct and counseling records. Except under legal compulsion, information contained in such records with the exception of name, address, dates of attendance and degrees obtained will not be released to agencies outside the University without the express consent of the student.

#### STAFF RIGHTS/RESPONSIBILITIES

The staff of the Department of Physical Therapy are entitled to all granted rights consistent with all staff of the University of Mount Union. The staff should reference the University of Mount Hourly Staff Handbook for specific information.

#### POLICY TITLE: Privacy and Confidentiality of Academic Records

Policy: The Department of Physical Therapy takes the custody of student records seriously. Disclosure of student information is limited to directory information unless specific requests for information are provided and authorized by the student.

Similarly, the use of patient/client health information is used only after obtaining the appropriate release for use as identified by the individual owner of such information. The Department adheres to all FERPA and HIPAA requirements.

Students may request to view their academic records.

The Physical Therapy Faculty and Program Director will follow the University of Mount Union procedures outlined in the Graduate Catalog to address the student's request.

The Physical Therapy Administrative Assistant may be the individual charged with supervision and collection of the student's academic record per University policy and procedure.

Student records will only be released to persons outside the university if express written permission is provided by the student.

POLICY TITLE: Privacy and Confidentiality of Faculty/Staff Records

Policy: The Department of Physical Therapy takes the custody of faculty and staff records seriously and will strive to ensure the rights and privacy of each employee is protected.

The Program Director maintains a file for each member of the department. Said files contain: employment contract; resume/curriculum vitae; professional licensure/certification information; performance evaluations, and notes, memos or documents relating to the employee's job performance. These files are stored securely in a locked drawer within the Program Director's locked office.

The employee file maintained by the Program Director is confidential. Access to contents is limited to the following individuals on a need-to-know basis:

1. Physical Therapy Accrediting Body
2. Performance Evaluation materials will be shared with the University's Vice President for Academic Affairs and Dean of the University, and the Associate Dean of the Faculty.

A faculty or staff member of the Department of Physical Therapy has the right to examine his or her file kept by the Program Director. The department member shall submit a request to the Program Director in order to schedule a meeting during normal business hours for review of the file by and with the department member and Program Director.

POLICY TITLE: GRIEVANCES INTERNAL TO THE PROGRAM

I. Student-Student, Student-Faculty Grievances

It is expected that issues arising from the classroom and or the laboratory setting will be first addressed with the instructor of record for the course in question. In the event that students seek immediate intervention from the Director of the Physical Therapy Program they will be referred to the instructor of record to begin a conversation that addresses their issues or concerns. In the event that such a resolution is not determined the student and or instructor of record may seek consultation from the Physical Therapy Program Director. If at that point a solution specific to the issues or concerns raised is not reached, the Physical Therapy Program Director or the student may seek the counsel of the Office of Academic Affairs.

II. Faculty-Program, Faculty-Faculty Grievances

Issues and or concerns arising from the daily operations of the Department of Physical Therapy or the interactions among and between faculty members in the department should be immediately and directly discussed with the Director of the Physical Therapy Program. It is understood that some issues may be considered confidential and that certain issues may be personal in nature. Every effort will be made to maintain the personal and confidential nature of issues and or concerns. It should however be realized that if there is a need to take action to address a personal confidential issue, there is a distinct possibility that the issue will not remain personal

and or confidential. Every effort will be made to reconcile issues at the department level with the Director of the Physical Therapy Program. It may be necessary to seek the counsel of the Vice-President for Academic Affairs, Dean of the Faculty to resolve the issue or concern. In either situation described above, written summaries of the discussions, proposed resolutions, and consultations, if necessary, will be kept in a locked file in the Physical Therapy Program Director's office. In certain situations, it may be necessary for the Director to provide copies of such interactions with the Office of Academic Affairs and or the Office of Human Resources.

POLICY TITLE: Grievances External to the Program

In the event a clinical site, community member, or other external agency has a complaint about the Physical Therapy Program, the faculty, staff, or students, that complaint must be made in writing to the attention of the Physical Therapy Program Director before it is deemed actionable. An actionable complaint/grievance will identify specifically the situation or circumstances in question, the individual(s) involved, and the approximate date/time of the occurrence, and must be signed by the complainant. Any actionable complaint will be reviewed and investigated by the Physical Therapy Program Director or their designee. A formal letter of findings and or actions taken will be provided to the complainant. To the extent possible, specific information related to the findings and or actions will be included. It should be noted that it may be necessary for the Physical Therapy Program Director to provide copies of such interactions with the Office of Academic Affairs and or the Office of Human Resources. Due process will be afforded to all parties involved when addressing such situations as those described above.

POLICY TITLE: Harassment

The department, program, faculty, and staff are committed to maintaining a professional, respectful, and collegial environment. To that end, any deviant behaviors, derogatory discourse, or discrimination directed to isolate, control, or otherwise belittle a member of the faculty, staff, or students will not be tolerated. The policies outlined in [the University's Faculty Constitution and Handbook](#) will be followed exclusively concerning definitions of harassment, types of harassment, and grievance procedures.

POLICY TITLE: Emergency Services

Policy: Every effort is made to provide a safe teaching and learning environment for students, faculty, and staff. There may be occasions when, despite the best efforts of all involved in the program, emergencies arise. Please follow the policy below during such an unfortunate event.

Procedure:

1. Individuals involved in an emergency should remain calm.
2. Assess the extent of the situation (e.g. smoke, fire, trauma, injuries).
3. Dial 911
4. After calling 911, dial Campus Security at (330) 428-1344 or dial S-A-F-E from campus phones to report the situation. Campus Security will direct emergency services and assist as necessary.

In addition, Blue Light Phones are located strategically across campus for emergencies. Students need only to push a button on these phones to alert the Alliance Police Department and Campus Safety and Security of an emergency. It is important to speak clearly and state the nature of the problem and location. Please note these phones are only to be used in cases of an actual emergency as they connect directly to the Alliance Police Department.

POLICY TITLE: Hazardous Material

Policy: The Physical Therapy Program retains chemical products for: purposes of disinfecting equipment and surfaces; products used as a medium to provide therapeutic modalities; and products used to cleanse and/or disinfect wounds as part of providing basic first aid. Each of the chemical solutions and products has a material safety data sheet (MSDS). The program will retain and make available the MSDS for inspection upon request.

Procedure:

1. MSDS will be obtained for all chemical items used to clean, disinfect, or serve as a medium for therapeutic modalities.
2. The original copies of the MSDS will keep in the Department Office in a binder accessible by the Administrative Personnel and/or program faculty.
3. Copies of the MSDS will be kept in the Overflow Laboratory (Gallaher #323) and Teaching Laboratories (Gallaher #320, #322).
4. In the event of an accidental exposure or contact with surfaces or areas for which the solution is not intended by the manufacturer, the MSDS will be consulted for the recommended removal method and/or treatment.
5. Follow-up of any accidental exposure will entail a written incident report to the Program Director and notification of emergency services if necessary. Completed incident reports will be kept in the Program Director's office.

In the case of leaks or spills:

1. Evacuate to a safe distance if necessary.
2. Consult MSDS manual located in the Department Office, Equipment Storage Room, or Teaching Laboratories.
3. Evacuate to a safe distance if necessary.
4. Call 330-428-1344 (campus security).
5. Give description and location of material.

6. Remain at a safe distance until Security arrives, preventing access to the area.
7. Security will contact the manager in charge of the area to determine if an emergency exists.
8. Seek medical attention if necessary.
9. Do not return to area until given clearance by Security.

#### RIGHTS AND RESPONSIBILITIES OF THE PHYSICAL THERAPY FACULTY

The faculty of the Department of Physical Therapy are entitled to all granted rights consistent with all faculty of the University of Mount Union. The Faculty should reference the University of Mount Union Faculty Constitution and Handbook for specific information.

#### ITEMS CONTAINED IN THE CONSTITUTION:

- Faculty Constitution
- Committee Structure
- Faculty Election Procedures
- Absentee Voting
- Administrative Chart

#### ITEMS CONTAINED IN THE FACULTY HANDBOOK:

##### Faculty Personnel

- Salary and Compensation
- Fringe Benefits
- Professional Development
- Teaching and Related Matters
- Personnel Counseling, Evaluation, and Procedures for Redress
- Degrees Used for Promotion and Tenure

#### EXPECTATIONS OF PHYSICAL THERAPY FACULTY

Core Physical Therapy Faculty are expected to be present, when possible, on campus to conduct mentoring and remediation sessions, attend committee meetings, meet teaching assignments, and fulfill Department responsibilities. This presence may vary throughout the twelve-month contract period, but when actively teaching and when physically possible, should be consistent with an average of 3.5 of five days per week with teaching emphasis. Attendance is not taken; professional expectations would require that faculty keep the Director of Physical Therapy apprised of their schedule each semester, which would include teaching assignments, office hours, clinic or research opportunities and demands. A minimum of three hours per week should be set aside for full-time faculty to meet with students.

Faculty members in the department of physical therapy do not earn or accrue vacation time. Time off will be granted in the following manner unless there is some unforeseen program or university matter that requires your attention:

- Fall semester: break begins after the conclusion of finals until the beginning of Spring semester, including both Christmas and New Year's Day.
- Thanksgiving break includes Thursday and Friday.
- Spring semester: one week provided at Spring Recess.

- Two weeks beginning at the conclusion of commencement.
- Summer semester: one week may be arranged during the summer sequence.
- Fourth of July may extend depending on where it falls in the summer calendar.

Faculty members will continue to follow the Holiday schedule and other fringe benefits policies outlined by the University of Mount Union in accordance with the [Faculty Constitution and Handbook](#).

#### PROFESSIONAL DRESS AND ATTIRE

In order to model professional attire for students, all Physical Therapy Faculty will adhere to the University of Mount Union's business casual dress code. Mount Union clothing can be worn individually or collectively. The emphasis is on professionalism that acknowledges the traditions of professional dress while recognizing the diversity of our profession both culturally and with regard to gender. The intent for professional dress is to garner self and other respect as well as personal and professional responsibility and boundaries. It is expected that attire for events or parties hosted by the faculty or students on campus or off campus with official nature will allow reasonable leeway for comfort in a given setting, but still appropriated for professional expectations fitting for the event.

## FACULTY ORIENTATION AND ADJUSTMENT

### *Introduction*

The objective of this process is to assist all new faculty to integrate into and participate in all aspects of the University and the Physical Therapy Program. This process is intended to facilitate a smooth transition into the faculty role. There are two parts to the orientation and adjustment process:

<b>Part I</b>	Administrative Policies and Procedures for the Physical Therapy Program	Completed during first week of hire by the Director of Physical Therapy
<b>Part II</b>	University Faculty Orientation Program	Completed during the first full academic year beginning in August. Year long process whereby faculty are assigned a mentor from inside or outside the department.

It should be noted Part II is based on each individual hire and the higher education experience and relative need they present. For younger faculty or those returning to a role after a hiatus from work, the following outcome expectations are identified as essential:

1. Establish skills to write outcome-oriented objectives that can define your student learning outcomes for course work, labs, professional behaviors, and research.
2. Establish initial skills to write effective course related tests, quizzes, lab practicals, and assess the tests for validity and reliability to assure fair and equitable practices in assigning grades and value of select assessments within course grading paradigms.
3. Establish mechanisms through which you are able to provide effective feedback to students, faculty, and staff.
4. Establish basic principles and practices that reflect inclusive teaching and learning as well as environments conducive to developmentally appropriate learning trajectories.
5. Establish strategies for building and implementing grading rubrics that are both doable and provide effective measures of student progress and eventual readiness for state boards.
6. Establish clear patterns of using your desired student outcomes to drive course creation, using course design and pedagogy as means to assure student mastery of content.
7. Learn ways to use peer and self-assessment to optimize your classroom instruction time.

Other goals may be established based on assessed needs.

Administrative Policies and Procedures for the Physical Therapy Program - Checklist

This list is to be completed by new faculty members within their first year.

ITEM	COMPLETION
<b>Meet with the Director of the Physical Therapy Program</b>	
Review University and Program Faculty Handbook	
Review job descriptions	
Review Program curriculum & teaching assignments	
Review Student Handbook	
Introductions – Provost and Vice-President for Academic Affairs	

## Faculty Member Resource Guide - Checklist

ITEM	COMPLETION
<b>Course Preparation and Planning</b>	
Class rosters	
Class schedules and room assignments	
Syllabus Preparation	
Textbook(s)	
Receive information about University Formal Faculty	
Receive map and tour of campus	
Submit key request	
Schedule telephone system instruction	
Schedule computer orientation	
Review policies and procedures for expense reimbursement	
Review office supply purchase procedures	
Review secretarial support overview and responsibilities	
<b>Meet with Human Resources Office</b>	
Receive explanation and registration for benefits	
Receive Institutional Overview	
<b>Meet with Security &amp; Physical Plant</b>	
Receive parking permit	
Receive building, office keys	

Course syllabi and file's locations on Network	
<b>Grading Procedures</b>	
University	
Program	
<b>Course Evaluation</b>	
Policies and procedures (mid-term, final, University, Guest Lecturers)	
<b>Committees and Meetings</b>	
University	
Program	
<b>Academic Calendar</b>	
Student application	
Student admission	
Student orientation	
First day of classes	
Clinical Affiliations	
Graduation	
<b>Annual Performance Appraisals</b>	
Time table	
Goal Setting	
Criteria	
<b>Educational Adjuncts</b>	
Computer resources	
Audio-visual equipment	
Policies and procedures	
Academic Calendar	

## Faculty Position Descriptions and Functions

### Physical Therapy Program Director

The program director is responsible for the administration and operations of the physical therapy program as well as effective delivery of the physical therapy curriculum. In addition to those duties and responsibilities described in the [University Faculty Constitution and Handbook, Part E – Teaching and Related Matters](#), the program director must meet all necessary qualifications as described by the CAPTE.

#### 1. ACCREDITATION

Works with the appropriate university offices and representatives to maintain compliance with accreditation standards. Has the primary responsibility and oversight for the coordination and completion of all documentation related to the physical therapy program. Coordinates on-site visits and correspondence related to program accreditation for outside organizations including but not limited to:

- a. Ohio Board of Regents.
- b. North Central Higher Learning Commission of Colleges and Schools.
- c. Commission on Accreditation in Physical Therapy Education.
  - (1) Maintenance of accurate information to the public regarding accreditation status
  - (2) Timely, accurate submission of required accreditation fees and reporting data
  - (3) Timely notification of expected or unexpected substantive changes related to the program
  - (4) If necessary, demonstrates the ability to come into compliance with accreditation standards within two years

#### 2. PROGRAM DEVELOPMENT

Works with appropriate university committees and offices to accurately portray the graduate curriculum based on the internal and ongoing assessment and review of the department faculty. In addition, ensure that admission requirements and program outcomes are reported to stakeholders:

- a. Implement, review and revise the Physical Therapy Program assessment plan consistent within the University's policies.
- b. Provide administration with outcomes data resulting from program assessment.
- c. Oversee and coordinate a periodic review and revision of the program mission, philosophy, goals, and curriculum.
- d. Facilitate and coordinate programmatic input from the advisory board, consultants, and program faculty.
- e. Review and revise all program policies and procedures on a regular basis.
- f. Oversee the development of annual and five-year program goals.

#### 3. PROGRAM MANAGEMENT

Work with appropriate university committees, offices, and officials to establish and enforce program related policies that ensure the safety of faculty, staff, and students. In addition, provide guidance to students and faculty concerning policies and procedures including but not limited to:

- a. Oversight of the student admission process.

- b. Receive & process student complaints and special requests.
  - c. Manage complaints from outside the program.
  - d. Administer and monitor student learning contracts.
  - e. Enforce program policies related to student issues and matriculation.
4. SUPERVISION AND DEVELOPMENT OF PROGRAM FACULTY AND STAFF  
 Work in partnership with members of the core faculty to develop professional and personal goals that serve the faculty, program, and university to ultimately benefit students. Oversee the ongoing needs of faculty development and performance.
- a. Facilitate a comprehensive orientation for all faculty and staff.
  - b. Supervise and serve as a resource to all faculty and staff involved with the Physical Therapy Program.
  - c. Complete faculty and staff annual performance reviews.
  - d. Monitor program course evaluations.
5. MANAGEMENT OF RESOURCES  
 Manage Departmental resources to ensure program needs are sufficiently supported to carry out the curriculum. Work with the Business Office and Administration to establish an annual operating budget.
- a. Oversee the use of physical therapy equipment, laboratories and facilities.
  - b. Direct the purchase of library media and instructional supplies.
  - c. Recruit faculty and staff to meet the needs of the Physical Therapy Program.
  - d. Support the development of clinical education facilities.
  - e. Coordinate scheduling of courses and room assignments.
6. TEACHING/ADVISING  
 Work with the University Dean to develop a teaching load consistent with university expectations. Meet other expectations for graduate faculty consistent within the university.
- a. Advise current and prospective students.
  - b. Maintain and monitor all student files and academic records.
  - c. Oversee student recruitment, selection, evaluation, retention, and professional development.
7. PUBLIC RELATIONS  
 In many respects the program director is the face of the physical therapy program; maintaining positive relationships with the university community is important. Community relationships locally, regionally, and nationally provide recognition of both the program and more importantly the University. Maintaining and growing the presence of the University in a positive and professional manner is expected.
- a. Oversee the development and revision of recruitment materials.
  - b. Actively participate in the American Physical Therapy Association.
  - c. Participate in the Ohio Physical Therapy Program Directors Consortium.
  - d. Maintain and foster a positive relationship with community organizations.
  - e. Act as a liaison and provide support for health care facilities in the community.

Director of Clinical Education (DCE)

The DCE is responsible for the clinical education component of the curriculum. The DCE is a member of the core physical therapy faculty, and as such will participate in teaching, advising, scholarship, and service activities consistent with graduate faculty. The duties and responsibilities outlined here are provided in addition to those described in the University [Faculty Constitution and Handbook](#). In addition, the DCE must meet all necessary qualifications as described by the CAPTE.

1. TEACHING:
  - a. Development of all course materials related to assignments.
  - b. Assessment of student performance and all aspects of the course.
  - c. Revision of course structure, teaching methods, and materials, as needed.
2. DEVELOP AND MANAGE CLINICAL EDUCATION FACILITIES (CEFs) FOR STUDENT PLACEMENT THROUGH:
  - a. Recruitment and assessment of appropriate CEFs.
  - b. Formalization of the affiliation with a written agreement.
  - c. Facilitation of communication between the CEF, the academic educational facility (AEF), and the student.
3. COORDINATE THE CLINICAL EDUCATION EXPERIENCE:
  - a. Development and revision of clinical education policies/procedures as necessary.
  - b. Development and revision of all necessary materials.
  - c. Communication of information related to the clinical education experience between stakeholders.
4. STUDENT ASSIGNMENTS FOR CEF:
  - a. Provide a general orientation to clinical education.
  - b. Consult with students to determine appropriate placements.
  - c. Arrange student placements including possible backup situations.
  - d. Assessment of the clinical education experience through midterm and final evaluations.
  - e. Develop, implement, and maintain corrective plans and or withdrawals from CEF as needed.
  - f. Maintain student records.
5. FACILITATE CLINICAL FACULTY DEVELOPMENT THROUGH:
  - a. Formal and informal communication.
  - b. Providing instruction to individual sites, as needed.
  - c. Participation in the Ohio Physical Therapy Clinical Education Consortium.
  - d. Plan, coordinate, and execute an annual workshop for the clinical faculty.
6. COMMUNICATE:
  - a. Ongoing and timely discussions with the Program Director.
  - b. Timely notification to Center Clinical Education Coordinators and or Clinical Instructors.
  - c. Ongoing consultation with students.
  - d. Reports to faculty regarding the readiness, progress, and effectiveness of the clinical education component of the curriculum.

## Core Faculty

Core faculty are defined as those individuals responsible for all aspects of the physical therapy curriculum who report to the Physical Therapy Program Director. Each member of the core faculty must meet the University expectations for teaching, advising/mentoring, remediation, scholarship, professional development, and service consistent with graduate faculty. The duties and responsibilities outlined here are provided in addition to those described in the University [Faculty Constitution and Handbook](#). Core faculty must also meet all necessary qualifications as described by the CAPTE.

1. QUALIFICATIONS:
  - a. If teaching Physical Therapy Practice, Clinical Science, Professional, or Patient/Client Management courses, must hold a valid Ohio Physical Therapy License.
  - b. Have the educational qualifications to provide graduate instruction.
  - c. Possess effective written and oral communication skills.
2. SCHOLARSHIP:
  - a. Demonstrate an ongoing agenda (see Prevailing Standards in Physical Therapy Department).
  - b. Over a one scholarly product every two years, or if in first years of work as an educator, one product in the first three years (e.g. publications, presentations, posters). <https://www.capteonline.org/globalassets/capte-docs/capte-position-papers.pdf>
  - c. Mentoring of students to meet the program's student scholarship expectation.
3. SERVICE:
  - a. Active ongoing service to the University and Professional Community.
  - b. Serve as a role model/mentor for students.
  - c. Assist in the determination of student readiness for clinical education.
  - d. Development, assessment, and implementation of the curriculum.
  - e. Participation in development, adoption, and execution of program policies and procedures.
4. SUPERVISION:
  - a. Development of Lab Assistants.
  - b. Evaluation of Lab Assistants.

### Adjunct/Associated Faculty

Adjunct faculty are defined as those individuals responsible for delivering specific areas of the physical therapy curriculum as assigned by the Physical Therapy Program Director. University of Mount Union faculty from outside the Department of Physical Therapy who teach a course in the Physical Therapy Program are considered adjunct faculty for the Physical Therapy department. As such, they must meet the University expectations for teaching, scholarship, professional development, and service consistent with graduate faculty. Professionals contracted with the Department of Physical Therapy to deliver specific areas of the curriculum, must meet the expectations below in addition to the expectations of the University for teaching a course at the graduate level. The duties and responsibilities outlined here are provided in addition to those described in the University [Faculty Constitution and Handbook](#). Additionally, adjunct faculty must meet all necessary qualifications as described by the CAPTE.

#### 1. QUALIFICATIONS:

- a. If teaching in a primary capacity Physical Therapy Practice, Clinical Science, Professional, or Patient/Client Management courses, must hold a valid Ohio Physical Therapy License.
- b. Have the educational qualifications to provide graduate instruction.
- c. Possess effective written, oral, and interpersonal communication skills.

#### 2. SCHOLARSHIP:

- a. Adjuncts are not necessarily expected to report their scholarly activity unless they are directly involved in UMU DPT faculty driven initiatives

#### 3. SERVICE:

- a. Active ongoing service to the University and or Professional Community.
- b. Serve as a positive professional role model for students.
- c. Assist in the determination of student readiness for clinical education.
- d. Assist as necessary in development, assessment, and implementation of the curriculum.
- e. Assist in development, adoption, and execution of program policies and procedures.

### Laboratory Assistant

Individuals utilized to assist the Core Faculty or Adjunct Faculty with elements of the laboratory experience.

1. Qualifications
  - a. Hold valid licensure and/or certification for their specific profession.
  - b. Have the necessary educational qualifications to assist in the laboratory setting.
  - c. Possess effective written and oral communication skills.
2. Teaching
  - a. Prepare and present individual laboratory sessions/modules as assigned by the course instructor.
  - b. Develop course materials, such as handouts, for assigned laboratory sessions.
  - c. Assist with organization of materials for laboratory sessions.
  - d. Conduct open labs.
  - e. Assist with laboratory practical examinations.
  - f. Participate in course assessment and evaluation.

### Site Coordinator of Clinical Education (SCCE)

Individual(s) at the clinical site who administer, manage, and coordinate clinical instructor assignments and learning activities for students during their clinical education experiences. In addition, this person determines the readiness of clinicians to serve as clinical instructors, supervises experiences, communicates with the academic program regarding student performance, and provides essential information about the clinical education program to physical therapy programs. He or she may or may not be a physical therapist.

### Clinical Instructor (CI)

An individual at the clinical education site who directly instructs and supervises students during their clinical learning experiences. This individual is responsible for carrying out clinical learning experiences and assessing students' performance in cognitive, psychomotor, and affective domains as related to entry-level clinical practice and academic and clinical performance expectations. A Clinical Instructor (CI) must be a licensed physical therapist with at least one year of clinical experience who has demonstrated clinical competence.

## INTERNAL COMMITTEES

All core faculty are expected to participate in departmental governance by actively participating in committee work.

### Admissions Committee

The Admissions Committee is responsible for the review of applicants to determine the appropriate number and mix of potential candidates for on campus interviews. The committee is comprised of core faculty but may include designated adjunct professors with the Director of Physical Therapy serving as an ad hoc member.

### Assessment Committee

The Assessment Committee is responsible for collecting and interpreting program specific outcomes data. The committee reports the findings to the Program Director who is responsible for communicating those results to the Dean and Vice-President of Academic Affairs, the University Assessment Committee, and the Physical Therapy Advisory Board. The committee is composed of core faculty but may include designated adjunct professors.

### Conduct & Performance Review Board

This Board is charged with reviewing student academic, clinical, and professional behavior performance. The Board is convened by the Program Director in accordance with the policies related to student discipline. The fundamental role of the committee is to provide due process for students alleged to be in violation of program policy and to make recommendations to the Program Director for or against disciplinary action. Committee membership consists of two core physical therapy faculty, one to two university faculty and one individual with to support the student as a process advisor.

### Curriculum Committee

The Curriculum Committee is charged with reviewing the physical therapy curriculum on an as needed basis to ensure that objectives and the curricular plan remain current and cohesive. The Committee may make recommendations to the full faculty for modification based upon data obtained from the Assessment Committee, actions associated with Strategic Planning, as well as other external stakeholders or accrediting organizations. The committee is responsible for completing and submitting the appropriate documentation to the University's Academic Policies Committee when requesting curricular or program changes. The committee is composed of core physical therapy faculty and may include one adjunct physical therapy faculty member.

### Physical Therapy Advisory Board

The Physical Therapy Advisory Board is not a decision-making Board. The Advisory Board membership provides consultation allowing the Department of Physical Therapy the opportunity to strengthen student learning, improve research opportunities, and plan community outreach. Members actively participate in continual assessment. The Board shall be composed of 7-10 members. Board composition will consist of: the Director of the Physical Therapy Program, Director of Clinical Education and at least one selected physical therapy faculty member. The Vice President for Academic Affairs of the University is an ex-officio member of the Board. The Director of the Physical Therapy Program, Director of Clinical Education, the Dean of the College of Natural and Health Sciences, and the Vice President for Academic Affairs of the University have permanent membership on the Board. All other members shall be appointed by the Board Chairperson, in consultation with the Board. Members are from area health care agencies, other community representatives, and at least one current physical therapy student

### EVALUATION

The use of faculty evaluation is discussed in the [University of Mount Union Faculty Constitution and Handbook under Personnel Counseling, Evaluation, and Procedures for Redress](#). As part of the commitment to program and program faculty quality and continuous improvement, the Department of Physical Therapy utilizes student evaluations, peer review, administrative ratings, and self-evaluation tools to assist with the evaluation and development of core and adjunct faculty. Data obtained in the process is used individually with each member of the core and adjunct faculty by the Director of Physical Therapy. Collectively, the data is used to make determinations for faculty development needs.

#### Annual Evaluation of Core Faculty

In accordance with University policy, all full-time faculty members are evaluated annually. The University policy allows for full-time faculty employed longer than six years to be evaluated every three years; core physical therapy faculty at the rank of full professor will be the only core faculty afforded this accommodation. The areas used in the annual faculty evaluation process include:

- Effectiveness in teaching
- Classroom/academic advising skills
- Maintenance of professional competence
- Professional development and scholarly activities
- Contribution to the total University community
- Contribution to civic and community life

All completed evaluations are sent to the Director of Physical Therapy. Comments, discussions, goals setting, and reviews will be conducted in accordance with University policies for faculty on a twelve-month contract.

#### Student Evaluations of Faculty

All faculty will be evaluated by students each academic year in every course taught except those courses with only one or two students.

#### Faculty Peer Review

Another data source used to obtain a comprehensive assessment of teaching effectiveness is peer review. In the physical therapy program, full-time faculty members may request one course lecture and or laboratory be evaluated by a peer each academic year. The first step in this process is a review of the course syllabus and class session plan. This “paper” review is followed by a classroom observation session, completion of the Peer Classroom Observation Form, and the provision of verbal feedback to the instructor. The written products generated in this process should be utilized to improve instructional effectiveness. Faculty have the option of providing these documents to the Director of Physical Therapy as part of the annual faculty review process. Materials submitted will be maintained in the faculty member’s personnel file.

***Physical Therapy ~ Peer Classroom Observation Form***

Faculty Member: \_\_\_\_\_ Peer Observer: \_\_\_\_\_

Date: \_\_\_\_\_ Course Number & Name: \_\_\_\_\_

<b><i>Non-Classroom Observations (OPTIONAL)</i></b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>Comments</b>
<b>1. General:</b> The professor's syllabus conforms to the existing course outline of record.				
<b>2. Syllabus:</b> The professor's syllabus includes a description of course content, contact information, office hours if applicable, the means by which students will be evaluated, grading standards, and other relevant information.				
<b>3. Learning Management System:</b> Access and set-up consistent with program expectations.				
<b><i>Classroom Observations</i></b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>Comments</b>
<b>4. Objectives:</b> The professor made a clear statement of the objectives of the session at the beginning of class or at another appropriate time.				
<b>5. Preparation:</b> The professor was well- prepared for class with necessary materials.				
<b>6. Organization:</b> The professor presented the material in an organized manner.				
<b>7. Clarity:</b> The professor presented instructional material clearly.				
<b>8. Expertise:</b> The professor displayed expertise in the subject.				
<b>9. Class Level:</b> The professor presented material at a level appropriate to the course.				
<b>10. Learning Styles:</b> When appropriate, the professor combined methods of instruction (visual, auditory, etc.) to accommodate various student learning styles.				

	Yes	No	NA	Comments
<b>11. Respect:</b> The professor treated all students respectfully.				
<b>12. Controversial Material:</b> When presenting controversial material, the professor did so in a balanced manner, acknowledging contrary views.				
<b>13. Comprehension:</b> The professor periodically checked student understanding and modified teaching strategies as necessary.				
<b>14. Responsiveness:</b> The professor was attentive to student questions and comments and provided clear explanations and examples.				
<b>15. Classroom Management:</b> The professor demonstrated effective classroom management skills.				

General Comments:

Signatures:

Reviewed with Faculty Member on: \_\_\_\_\_

\_\_\_\_\_  
Requesting Faculty

\_\_\_\_\_  
Peer Observer

#### Faculty Review by Program Director

The Physical Therapy Program Director will conduct an annual classroom observation of each program faculty (Adjunct/Core) member as part of the annual performance review process for faculty. The Program Director may, in consultation with the individual program faculty member, elect to perform an additional (optional) classroom sit-in. The purpose of the optional sit-in is to observe faculty member–student interactions. The Program Director will complete a paper summary of the observation which will be reviewed with the faculty member; the results can be used for personal or professional faculty development activities, general advice, or as a faculty peer review.

#### Learning Management System (LMS)

All program faculty must add the Program Director to their course website within the LMS (D2L). The purpose of the addition is to allow the Program Director to monitor and collect information necessary for Program Assessment and faculty evaluation.

#### Administrative Review – Director of the Physical Therapy Program

The Director of Physical Therapy is evaluated as other faculty members are, in terms of course evaluations and peer reviews of their teaching responsibilities. Annually, members of the Core Faculty are invited by the Office of the Vice President to evaluate the Physical Therapy Program Director related to their responsibilities as the unit administrator. The Vice President of the University, Dean of the Faculty, and Associate Dean of the Faculty review the results of the above evaluations annually with the Physical Therapy Program Director.

#### Adjunct Faculty Evaluation

Adjunct Faculty serve the program by providing teaching and instruction, committee participation, and completion of specialized projects. Contributions to the program, students, faculty, and staff are often difficult to measure and assess. Adjuncts with program teaching assignments will participate in the student evaluation process. The Director of Physical Therapy may seek feedback regarding performance from knowledgeable parties. The Director of Physical Therapy will discuss student course reviews and other feedback as needed at the completion of the adjunct faculty member's academic year. The evaluation for adjunct faculty is an informal collaborative process. Areas assessed in the Annual Faculty Evaluation Process include:

- Effectiveness in teaching
- Maintenance of professional competence
- Professional development
- Contribution to the profession

## PREVAILING STANDARDS IN THE DEPARTMENT OF PHYSICAL THERAPY

### Academic Qualifications:

The Department of Physical Therapy recognizes that a diverse faculty adds to the quality educational experience for the students. Efforts are made during the applicant review and hiring process to identify a diverse, qualified mix of candidates. The Department further acknowledges that at least 50% of hired faculty must hold a terminal degree (e.g. Ph.D., Ed.D., D.Sc., or DPH). In addition, a mix of professional experience, teaching experience, and a record of scholarly work is considered.

### Scholarship:

The Commission on Accreditation in Physical Therapy Education (CAPTE) expects faculty to minimally meet a standard for producing one scholarly product every other year. For new faculty, the CAPTE allows for a three to five-year period to develop and establish a research agenda.

### CAPTE Accreditation Criteria:

Each core faculty member has a well-defined, ongoing scholarly agenda that reflects contributions to: (1) the development or creation of new knowledge, *or* (2) the critical analysis and review of knowledge within disciplines or the creative synthesis of insights contained in different disciplines or fields of study, *or* (3) the application of findings generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community, *or* (4) the development of critically reflective knowledge about teaching and learning, *or* (5) the identification and resolution of pressing social, civic, and ethical problems through the scholarship of engagement.

### Professional Development:

Each member of the core faculty must complete professional development activities to maintain their state license to practice physical therapy. In the state of Ohio, a physical therapist must obtain 24 CEU hours in a 24-month period. All CEU hours applied toward licensure must have Ohio Approval Numbers for the renewal period in which they are being applied. It is important to note that not all CEU or CCU hours completed need Ohio Approval Numbers; only those being directly applied toward licensure renewal. In addition, professional development may be required to gain, enhance, or redefine competencies in the delivery of content, curriculum design, and assessment. It is encouraged that core faculty attend at least one professional conference per year in an effort to remain current in contemporary practice.

The following are specific *minimal* requirements for the core faculty in the Department of Physical Therapy at the University of Mount Union according to academic rank.

#### ASSISTANT PROFESSOR AND ASSOCIATE PROFESSOR

- One scholarly product every year (if new faculty, agenda established after 5 years)
- Ongoing professional development activities in teaching and learning theory and practice.
- Complete CEU/CCU activities every year as described above.
- Ongoing service to the profession, University, and or Department of Physical Therapy in emerging leadership roles
- Annual goal setting and assessment activities

#### FULL PROFESSOR

- Established scholarly agenda.
- Ongoing professional development activities in teaching and learning theory and practice.
- Complete CEU/CCU activities every year as described above.
- Ongoing Service to the profession, University, and or Department of Physical Therapy in leadership roles
- Annual goal setting and assessment activities

#### TENURE IN THE DEPARTMENT OF PHYSICAL THERAPY

For tenure, any of the following degrees would be acceptable, Ph.D., Ed.D., D.Sc., D.P.H., DPT with advanced credential/certification or terminal doctoral degree in related field. Faculty seeking tenure are encouraged to review the [University Faculty Constitution and Handbook](#) for specific details regarding the criteria and process for such personnel actions.

#### PROMOTION IN RANK

Physical Therapy faculty seeking promotion in rank are reviewed and evaluated in accordance with the standards outlined in the University [Faculty Constitution and Handbook](#). The areas used for such personnel actions are:

- Effectiveness in teaching
- Professional development and scholarly activity
- Contributions to the University community
- Contributions to civic and community life

Faculty are encouraged to review the University [Faculty Constitution and Handbook](#) for specific details regarding the criteria and process for such personnel actions.

## FACULTY DEVELOPMENT

The Department of Physical Therapy annually budgets \$800 for each member of the core physical therapy faculty to assist with APTA membership dues and or attend professional development workshops, seminars, or continued competence events. These events are selected at the individual faculty member's discretion. Monies not used during one academic year are not carried over to the next academic year. Faculty must identify to the Director of Physical Therapy their intended use of these monies by April 15<sup>th</sup> of each academic year, though exceptions can be made when planning ahead is not possible and monies are available.

Monies must be committed by May 15<sup>th</sup>. Unused and uncommitted monies will be reallocated by the Director of Physical Therapy.

Faculty in the Department of Physical Therapy are also eligible to receive monies for faculty development in accordance with the University policies on professional development and scholarly activity which can be found in the [University Faculty Constitution and Handbook](#).

## FACULTY WORKLOAD EXPECTATIONS

### TEACHING:

The University of Mount Union considers this to be a primary function of the faculty; therefore 50% of time must be spent teaching.

- The DPT Core Faculty are graduate faculty on a 12-month contract; they will teach between 26-28 semester credit hours.
- Teaching 27 credit hours is approximately equal to 9 hours of face to face time with students/week.
- Courses are taught based on a 15-week semester; three semesters occur over the 12-month period.
- Therefore, DPT faculty would need to meet 390-405 workload hours for the year (9 hours/week X 15 weeks X 3 semesters); this is considered 50% of their total workload for the 12-month period based out of 100%.
- Some Faculty may teach more or less given their expertise; an acceptable range would be +/- 10 hours (395 – 415)
- A constant factor of 0.3333 is used to convert semester credit to contact hours. [Credit Hours (workload) x 0.3333] x Semester Weeks x Semesters in a Year = Contact Hours (workload)

### MENTORING/ADVISING:

This is time devoted to ensuring that students are competent in the professional areas of clinical practice. This time may be used to remediate students, assess professional development activities or engage with students on projects and opportunities outside of the curriculum.

SCHOLARSHIP, UNIVERSITY AND PROFESSIONAL SERVICE, FACULTY DEVELOPMENT, AND CLINICAL PRACTICE

The remaining 50% of full-time faculty loads must be accounted for according to the following five categories from CAPTE *Workload Distribution Data for Core Faculty* based on the 40-hour week.

1. Teaching in other programs
2. Clinical Practice
3. Committee Work
4. Administrative
5. Scholarship

Other areas of use may include variations of the following each week:

- (5-hours) Scholarship/week
- (Up to 8 hours) Clinical Practice/week
- (Up to 8 hours) Department Committees, Department Faculty meetings, Office hours (5 hours/week minimum), Assisting with Clinical visits
- (1-3 hours) University Committee Member
- (1-3 hours) University Committee Chairperson (additional)

## Program Resources

### POLICY TITLE: Equipment

All program equipment will undergo routine calibration and annual biomedical inspection, per manufacturer recommendation. These records are retained by the program director and Office Coordinator. Should equipment be identified as defective after the annual inspection it will either be repaired or replaced. Should any program equipment be identified as defective or in need of repair, it must be removed from use and labeled as “inoperable” and placed in the equipment storage room (B-008 Gallaher Hall). Once placed, the program director must be notified of the removal of the equipment from use in order that an appropriate course of action can be undertaken to repair or replace the item.

#### Purchase

In an effort to provide students with the best learning environment, any faculty member may identify instructional equipment that either needs to be considered for purchase and or is in need of repair or replacement. Every effort is made to identify and purchase equipment that assists the program faculty to carry out the program mission while providing meaningful learning opportunities for students. Any such identified needs should be presented to the Program Director so that planned purchases can be identified, prioritized, and budgeted accordingly.

#### Use

All program equipment is intended for instructional use for faculty and or students. Responsibility for access to the equipment and safe operation of the equipment rests with program faculty. Students should not be left to use equipment for which they have not received instruction. Faculty may permit students to use equipment after hours in order to prepare for an examination; the responsibility for the safe use, care, and security of the equipment resides with the faculty member making such equipment available to students.

## POLICY TITLE: Facilities

It is the responsibility of faculty and staff to ensure that facilities set aside to carry out the instructional mission for students are in good repair and free of safety concerns. Students are also asked to be vigilant in pointing out situations where potential issues exist. All concerns should be reported to the program Director as soon as they are known so the appropriate and safe course of action can be identified, planned, and carried out. All facilities used for student instruction, study, and training are also reviewed as part of the programmatic assessment process that is used to complete annual reports to the PT advisory board and CAPTE.

### Allocation

All physical therapy office, classroom, laboratory, and research spaces are provided by the University for the purpose of conducting and furthering the goals and initiatives of the physical therapy faculty, staff, and students. Offices are made available to faculty on a first come basis unless replacing a member of the faculty due to a change in position/employment status. The classroom and laboratory spaces are managed by the Program Director and assigned for instruction based on need. Faculty research space is assigned by the Program Director based upon expressed faculty need and available space.

### Use

Faculty, staff, and students are responsible for preserving the physical therapy facilities. To that end, any identified building repairs or day to day related maintenance requests should be communicated to the Building Supervisor, who will delegate administrative faculty or staff to generate a work order for the physical plant or housekeeping staff.

## Instructional Policies

### Policy Title: Physical Therapy Conduct & Performance Review Board

**Policy:** Faculty or members of the professional community identifying Mount Union students whose classroom or clinical performance, or professional behavioral issues are less than desired must notify the Program Director. When students demonstrate a deficiency in academic or clinical performance and/or professional behavior, and/or misconduct including issues of academic dishonesty, the Program Director will convene the Physical Therapy Conduct & Performance Review Board (PT-CPRB) to review the matter.

#### **Procedure:**

1. The Physical Therapy Program Director will convene the PT-CPRB to consider the student matter at hand.
2. PT-CPRB membership consists of a total of five individuals. Two to three core physical therapy faculty, two university faculty, and/or one individual with identified expertise. The Program Director does not participate in PT-CPRB deliberations.
3. Board members are selected from a listing of professional programs who have agreed to serve in a volunteer capacity. Invitations to serve on the PT-CPRB are generated as needed by the Physical Therapy Program Director who determines the specifics of the issues to be discussed, reviewed, and/or deliberated.
4. Mount Union will assign the student a Process Advisor, who will provide information to the student regarding the process of the student's appearance and may attend the board meeting with the student if the student requests.
5. Other persons or parties are not permitted to accompany the student when they address the Board.
6. The PT-CPRB, after examining the information received and interviewing the student, will make a recommendation to the Physical Therapy Program Director. As the PT-CPRB finds appropriate recommendations could include but are not limited to program dismissal, probation, remedial action plans, or retaking classes.
7. The Program Director makes the final determination of the outcome and notifies the student in writing of said outcome. Copies of letters of probation and/or program dismissal are kept on file with the program director and in the Office of Academic Affairs.
8. The student has the right to appeal the decision to the Dean in the College of Natural Health Sciences as described in the [Graduate Catalogue](#).

POLICY TITLE: General Appeal Process

**Policy:**

1. Students have a right to appeal any sanctions taken-imposed by the program against them. Information presented is restricted to the specific sanction for which the student is appealing. Extraneous information not specific to the identified adverse action will not be considered.

**Procedure:**

Student submits a written appeal to the Dean of College of Natural and Health Science in accordance with the [Graduate Catalog](#).

The Dean will evaluate the appeal and provide a written response. The appeal decision is final.

## POLICY TITLE: Student Retention

**Policy:** The physical therapy program is dedicated to retaining those students who have been accepted into the program and who continue to demonstrate an ability to succeed in the program. Options for students who have been identified as “at-risk” through a formal assessment or a student performance-initiated process (Starfish, Advisor or Instructor Assessment, Test and Exam Scores) include, but are not limited to:

Learning Contract: a collaborative document detailing the specific tasks, behaviors, or dispositions necessary for a student to progress or become successful.

Leave of Absence: a stop-out option initiated by the student and agreed to by the physical therapy core faculty for a predetermined timeframe.

Remediation: a collaborative process initiated by the course instructor to provide an opportunity for the student to demonstrate competence; may be documented by a learning contract if related to an entire course or content area.

We also encourage proactive use of resources such as Peer Tutoring, Referral to Student Support Services, Center for Student Success, and work with course instructors and lab assistants. When student retention is challenged, it may be necessary to convene a board to discuss the student issues and needs.

## Policy Title: Student Notices

**Policy:** The physical therapy program is dedicated to retaining those students who have been accepted into the program and are successfully completing the requirements of the program. On occasion it is necessary to issue a formal notice to a student that their performance is less than adequate. These actions are listed in ascending order of severity; however, they are not a progressive nor comprehensive list of possible communications.

Warning: a formal written letter from the Program Director to the student identifying a behavior, disposition, or performance that is unacceptable; the identified area must change, or additional notices will be served with possible consequences.

Probation: a formal written letter from the Program Director, based on recommendations from a PT-CPRB to the student identifying a timeframe for modifying their academic performance or behavior; may occur prior to a more severe notice.

Dismissal: unenrollment of a student from the physical therapy educational program determined by PT-CPRB in collaboration with the Program Director.

### Person(s) Responsible:

Student  
Physical Therapy Faculty Advisor  
Physical Therapy Faculty  
Physical Therapy Program Director

### Procedure:

1. Student displays a behavior that is considered unacceptable for maintaining professionalism, a safe environment for learning, continued progression in the physical therapy program, or other instances that have been identified in the Physical Therapy Student Handbook.
2. Any member of the physical therapy faculty can initiate a request for a letter of warning. The Program Director will meet with the student to discuss the letter of warning. This letter will be issued under the Program Director's signature and become part of the student's academic advising file. A second letter of warning will require appearance before the PT-CPRB.
3. Notices of probation and/or dismissal are determined in accordance with the Physical Therapy Conduct & Performance Review Board policy. Probation and/or dismissal may affect student loan status.
4. Students may appeal a decision to be placed on probation or dismissed from the program with the Program Director first, and if in disagreement with that decision, with the Dean of CNHS, in accordance with the Physical Therapy Conduct & Performance Review Board policy. Copies of probation or dismissal letters are filed with the Office of the Registrar.
5. Any student dismissed from the program has the right to reapply for admission.

## Policy Title: Student EXAM Remediation

**Policy:** At any time, students who receive a grade below 80% on an exam in the physical therapy curriculum will be asked by the instructor to remediate to demonstrate adequate mastery of the course objectives.

**Procedure:**

1. Physical Therapy Faculty monitor student performance within their assigned courses.
2. Faculty will require students scoring below 80% on an exam to remediate the exam material.
3. Faculty determine the type of remediation needed for the student to demonstrate an appropriate level of mastery with the material.
4. Successful, timely remediation is a requirement to complete the course.
5. Successful remediation does not negate earned grade; original test grades will be used for calculating course grades.
6. Incomplete or unsatisfactory remediations, as determined by the instructor, may result in failure of the exam or assignment remediated.

First Year Examples of Student Remediation:

- Retake an exam by providing rationale for responses previously missed.
- Instructor asks student to defend responses orally.
- Retake a practical examination.

Second Year Examples of Student Remediation:

- Take a secondary examination for competence.
- Retake an exam, providing rationale for all responses in each question.
- Pass an oral examination.
- Retake a practical examination.

Third year Examples of Remediation:

- Resubmission of course materials or research requirements
- Satisfactory resubmission of final research project
- Permission not granted to take the NPTE as an early test take.

## Policy Title: Student Learning Contract

**Policy:** The Student Learning Contract is a collaborative document utilized to assist a student in developing professional behaviors, meeting required objectives, or remediating clinical performance. The document outlines those expectations the faculty member(s) will meet and those expectations the student will meet to accomplish a fully executed agreement. The timeframe and consequences for failure to complete the agreement are also identified within the document.

### **Procedure:**

1. Initiated by any member of the core physical therapy faculty with a currently enrolled student.
2. Identification, through a collaborative process, of specific behaviors, skills, or dispositions that are lacking.
3. Identification of expectations and/or measurable outcomes that must be demonstrated as part of the agreement.
4. Identification of the specific time frame for completion.
5. Explicit consequences are provided for failure to meet the agreed upon expectations/outcomes.
6. In addition to the aforementioned items, each contract must contain the following:
  - a) Student name
  - b) Date of initial meeting
  - c) Date of execution
  - d) Signature of involved parties
  - e) Deadline for meeting the objectives.
7. The student's Physical Therapy Faculty Advisor or DCE is responsible for monitoring the student's progress toward completion.
8. The Learning Contract will be shared with the Program Director and stored in the Student's Academic File.

## Policy Title: Leave of Absence

**Policy:** This is a stop-out option available to students who are in good academic standing. A leave of absence (LOA) is granted for a one-year period such that the student making the request can re-enter the curricular sequence with the next cohort in the same semester they exited. A student may consider this option for multiple reasons (health, family, military leave, financial strain, etc.). Requests are initiated by the student and considered by the core physical therapy faculty.

### **Procedure:**

1. Student composes a letter of intent to take a LOA and presents it to the Program Director.
2. The Program Director presents the letter and any supporting materials to the full physical therapy faculty. -
3. Student must notify the Program Director in writing 60 days prior to the semester they expect or intend to re-enter.
4. In the event the student does not notify the Program Director of intent or chooses to not re-enter with the next cohort, the student will be dismissed from the program.
5. LOA may affect student loan status.
  1. on.

**University of Mount Union  
Department of Physical Therapy  
Learning Contract (Sample Format)**

**Date of Agreement:** \_\_\_\_\_

**Purpose:**

*This form may be used to assist the physical therapy graduate student progress and or meet the stated program, course, clinical, or professional expectations. Failure to meet the stated objectives listed below may result in further discipline in accordance with the Physical Therapy Student Handbook or as outlined below.* **Student:** \_\_\_\_\_

**Academic Advisor or Instructor:** \_\_\_\_\_

**Identified Problem(s):**

**Objective(s) for Improvement:**

**Criteria for Successful Remediation:**

**Time Frame:**

*The signatures below indicate our mutual agreement to the terms of this learning contract for the specified duration. Further, it is understood that successful completion of the terms of this learning contract do not imply that the student will be exempted from meeting other stated program, course, clinical, or professional expectations. This learning contract is limited to the deficiencies identified herein.*

**Signatures:**

\_\_\_\_\_  
*Student*

\_\_\_\_\_  
*Faculty*

## Policy Title: Grading

**Policy:** The physical therapy program utilizes a standardized grading scale to identify student achievement. The physical therapy faculty will utilize the following scale for recording final course grades for all didactic courses.

A	93-100	(4.00)	B-	80-82	(2.67)
A-	90-92	(3.67)	C+	77-79	(2.33)
B+	87-89	(3.33)	C	70-76	(2.00)
B	83-86	(3.00)	F	≤ 69	(0.00)

Doctoral Seminar and Clinical Education Courses (PT 632, PT 633, PT 734, PT 781, PT 782, PT 783) will use the following grade scale:

S	Satisfactory Completion	U	Unsatisfactory Completion
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Other temporary grades used in the program:

I	Incomplete	IP	In-Progress
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### Procedure:

1. Faculty will use the above scale for reporting final course grades for students in didactic and clinical courses.
2. Students must maintain a cumulative grade point average of 3.0 as defined above to remain in good academic standing within the physical therapy program.
3. Students earning a score less than 80% on an exam will receive remediation. The type and extent of remediation is determined by the instructor of record.
4. Grades of S/U are used for Clinical Education and Doctoral Seminar courses.
5. Grades of "IP" are typically used in Doctoral Seminar courses, until student research is completed. The "IP" will be followed by an S/U as the final grade for the course.
6. Grades of 'I' must be requested by the student to the instructor of record. Grades of "I" are utilized only for circumstances beyond the student's control.

## Policy Title: Student Safety/Patient-Simulators

Policy: The program is committed to maintaining a safe environment for teaching and learning. Throughout the program students will need to serve as patient-simulators and as physical therapists during lab skill development and assessment. The purpose for this is for students to learn, practice, and develop the necessary skills for clinical practice. For these reasons the following procedures have been put into place.

### Person(s) Responsible:

Students

Physical Therapy Faculty

Adjunct, Guest speakers, Lab Assistants Physical Therapy Program Director

### Procedure:

When serving as a physical therapist or as a patient-simulator, students with a new or recent physical limitation or condition (e.g. pregnancy, under a physician's care, acute or chronic injury) can put themselves and/or classmates at additional risk. All such risks for sustaining an injury must be reported to the instructor of record for the course or lab.

Faculty and/or instructors who have learned of such a condition or limitation must exercise caution when/if allowing students to participate in activities that may place the student or others at risk.

Students knowingly failing to self-report or failing to follow the modified instructions and directions of the faculty instructor will be reviewed by the PT-CPRB for violations of professional behaviors. Such behavior may lead to dismissal from the program.

## Policy Title: Laboratory Practical Exam Performance

**Policy:** Attaining an acceptable level of performance on practical examinations is necessary for students to progress within a course, to the next semester, or from the didactic to the clinical components of the curriculum. Acceptable performance on practical examination in clinical science courses is an earned mark of 80% or above and no essential safety errors.

### **Person(s) Responsible:**

Student

Physical Therapy Faculty

Physical Therapy Program Director

### **Procedure:**

#### Unacceptable score without an essential safety error

1. Student earns a score of less than 80% on a practical examination without essential safety error.
2. Student will be required to effectively remediate and re-take the unsuccessful components within the practical examination at the discretion of the primary course faculty member to achieve the equivalent of 80% or above.
3. In order to successfully complete the course with a passing grade, the student will be required to remediate and re-take the exam according to the faculty's designated timeframe.
4. Students are allowed one opportunity to remediate and re-take the practical exam.
5. Students who are not able to successfully pass a remedial practical with an equivalency at 80% or above, will be required to appear before the PT CPRB.

#### Unacceptable score with a safety error

1. Student earns a score of less than 80% on a practical examination including a safety error.
2. Except in a no-fault practical (as defined per course syllabus), an essential safety error leads to a failing grade for the exam; a student who has committed an essential safety error will be reviewed by the Physical Therapy Conduct Performance Review Board for potential dismissal from the program.
3. Physical Therapy Program Director initiates the review for potential dismissal process in accordance with the Physical Therapy Conduct & Performance Review Board policy.

#### Acceptable score with a safety error

1. Student earns a score greater than 80% on a practical examination with an essential safety error.
2. Failing grade for the practical will be issued; student will be reviewed by the PT-CPRB for potential dismissal from the program.
3. Physical Therapy Program Director initiates the review for potential dismissal process in accordance with the Physical Therapy Conduct & Performance Review Board policy.

## Policy Title: Student Readiness for Clinical Education

**Policy:** The program faculty are committed to providing a curriculum that ensures students are prepared for clinical education experiences. This includes essential didactic success as well as clinical reasoning. Prior to clinic, students must have a 3.0 or above in all clinical course work or an acceptable action plan in place. Students must also complete all practical examinations without significant essential safety errors. This may impact readiness for clinical at the discretion of the DCE and Program Director.

**Person(s) Responsible:**

Students

Physical Therapy Faculty

Physical Therapy Program Director

**Procedure:**

1. Faculty have identified essential safety skills that must be completed without error during every practical examination. Faculty members may elect to incorporate these essential safety skills in their course's lab practical. UMU DPT list of essential safety skills should be reviewed by all students in each course with clinically based skills lab.
2. If a student fails a practical or lab exam due to an essential safety error, the student will be required to appear before the Physical Therapy Conduct and Performance Review Board (PT-CPRB). The PT-CPRB may elect to allow the student to remediate the practical examination or to consider other actions depending on the situation and patterns of student issues.

## Policy Title: Course Grade Challenge

**Policy:** Students receiving a course grade they believe is inaccurate have the right to seek resolution, and if resolution is not possible, to appeal a recorded grade.

**Person(s) Responsible:**

Student

Physical Therapy Faculty

Physical Therapy Program Director

**Procedure:**

1. Student must notify the course instructor of record that they believe an error in calculation or transcription may have occurred in reporting the final course grade.
  - Notice may be electronic using the University of Mount Union email system, within two weeks of received grade.
  - Notice may be written and sent via US mail or private carrier to the attention of the course instructor of record, postmarked within two weeks of received grade.
2. The student and the faculty member will attempt to resolve the issue.
3. In the event a reasonable solution is unable to be reached, the student may appeal the course grade to the Physical Therapy Program Director. The appeal should be submitted in written form within one week of the previous outcome.
4. The Physical Therapy Program Director will convene the PT-CPRB to review the appeal. Students have the right to file the appeal within 30 days of the start of the following semester in which the grade in question was received.

Policy Title: General Appeal Process

**Policy:** Students have a right to appeal any sanctions taken imposed by the program against them. Information presented is restricted to the specific sanction for which the student is appealing. Extraneous information not specific to the identified adverse action will not be considered.

**Person(s) Responsible:**

Student

Dean of College of Natural and Health Sciences

**Procedure:**

1. Student submits a written appeal to the Dean of College of Natural and Health Science in accordance with the [Graduate Catalog](#).
2. The Dean will evaluate the appeal and provide a written response. The appeal decision is final.

## Safety Regulations

### Policy Title: Campus safety and Emergency Services

**Policy:** Every effort is made to provide a safe teaching and learning environment for students, faculty, and staff. There may be occasions when, despite the best efforts of all involved in the program, emergencies arise. Please follow the policy below during such an unfortunate event.

**Procedure:**

1. Individuals involved in an emergency should remain calm.
2. Assess the extent of the situation (e.g. smoke, fire, trauma, injuries).
3. Dial 911
4. After calling 911, dial Campus Security at (330) 428-1344 or dial S-A-F-E from campus phones to report the situation. Campus Security will direct emergency services and assist as necessary.

In addition, Blue Light Phones are located strategically across campus for emergencies. Students need only to push a button on these phones to alert the Alliance Police Department and Campus Safety and Security of an emergency. It is important to speak clearly and state the nature of the problem and location. Please note these phones are only to be used in cases of an actual emergency as they connect directly to the Alliance Police Department.

## Policy Title: Standard (UNIVERSAL) Precautions

**Policy:** The term *Standard Precautions* is used to discuss the acceptable methods for handling, managing, and disposing of items contaminated by bodily fluid or infectious substances. The accepted nomenclature in the healthcare environment is *Universal Precautions*.

### **Person(s) Responsible:**

Students

Physical Therapy Faculty

Physical Therapy Program Director

Physical Therapy Administrative Personnel

### **Procedure:**

1. Students will be provided instruction within the curriculum to identify and manage the situations and circumstances in which Universal Precautions are required.
2. Students will also be made aware of the personal protection equipment available for use in situations and circumstances where Universal Precautions are required.
3. Students will adhere to Universal Precautions as are necessary to protect themselves and others in the physical therapy program.
4. All faculty and students must comply with basic infection control guidelines in the laboratory setting:
  1. Wash hands thoroughly with soap and water before and after each contact; use of a hand sanitizing agent is acceptable.
  2. A disinfectant and Universal Precautions should be used for contact with blood or body fluids.
  3. Contaminated materials are to be placed and kept in an appropriately identified and covered receptacle.
  4. Equipment and materials should be cleaned and disinfected at the end of each use.

## Policy Title: Hazardous Materials

**Policy:** The Physical Therapy Program retains chemical products for: purposes of disinfecting equipment and surfaces; products used as a medium to provide therapeutic modalities; and products used to cleanse and/or disinfect wounds as part of providing basic first aid. Each of the chemical solutions and products has a material safety data sheet (MSDS). The program will retain and make available the MSDS for inspection upon request.

**Person(s) Responsible:**

Students

Physical Therapy Faculty

Physical Therapy Administrative Personnel

**Procedure:** 1. MSDS will be obtained for all chemical items used to clean, disinfect, or serve as a medium for therapeutic modalities.

2. The original copies of the MSDS will kept in the Department Office in a binder accessible by the Administrative Personnel and/or program faculty.
3. Copies of the MSDS will be kept in the Overflow Laboratory (Gallaher #323) and Teaching Laboratories (Gallaher #320, #322).
4. In the event of an accidental exposure or contact with surfaces or areas for which the solution is not intended by the manufacturer, the MSDS will be consulted for the recommended removal method and/or treatment.
5. Follow-up of any accidental exposure will entail a written incident report to the Program Director and notification of emergency services if necessary. Completed incident reports will be kept in the Program Director's office.

In the case of leaks or spills:

9. Evacuate to a safe distance if necessary.
10. Consult MSDS manual located in the Department Office, Equipment Storage Room, or Teaching Laboratories.
11. Evacuate to a safe distance if necessary.
12. Call 330-428-1344 (campus security). Give description and location of material.
13. Remain at a safe distance until Security arrives, preventing access to the area.
14. Security will contact the manager in charge of the area to determine if an emergency exists.
15. Seek medical attention if necessary.
16. Do not return to area until given clearance by Security.

## Facilities and Equipment

### Policy Title: Use of Classroom and Laboratory Spaces

**Policy:** Access to classroom and laboratory space in the Physical Therapy Department after hours is available for additional study. Students have a resource & study lounge located on the third floor of Gallaher Hall; additional space can be obtained by using the classroom and laboratory spaces located on the third floor only.

#### **Procedure:**

1. A wireless card reader is located on the Classrooms/Laboratories (# 320, #322 and #324) of Gallaher Hall, the Student Resource and Study Lounge (#321), and the classroom (#010) of Gallaher Hall to allow 24-hour access, except during restricted hours.
2. These card readers are activated with the University Student ID card (Purple Plus Card).
3. Access is only granted to currently enrolled physical therapy students, these rooms have entry and exit logs which are maintained by the University Information Technology Office. Unauthorized access is prohibited.
4. Physical Therapy Faculty may hold supervised open laboratory hours at times not otherwise scheduled for regular classroom or laboratory sessions. These times are provided for students to practice skills and use of the equipment on which they have received training.
5. Identified equipment will be made available for student use during unsupervised hours.
6. Students using these spaces after hours must follow all posted safety information.
7. Students must report any unsafe or suspicious activities to campus security at (330) 428-1344. In an emergency, students should contact first responders (Call 911) and campus security as described in the Emergency Services section of this handbook.
8. Students must report any missing or damaged equipment to the Physical Therapy Director on the next business day following identification of the damaged or missing equipment.
9. Student safety is everyone's responsibility; access to individuals that are not current Physical Therapy Students is prohibited.

## Policy Title: Use and Maintenance of Equipment

**Policy:** The safety of students, faculty, and staff is important. Every piece of equipment owned by the program will undergo a regular schedule of maintenance and calibration as identified by the manufacturer.

**Person(s) Responsible:**

Students

Physical Therapy Faculty

Physical Therapy Program Director

**Procedure:**

1. Students must report any malfunctioning equipment to the course instructor or Program Director immediately.
2. Malfunctioning equipment will be pulled from use and tagged for repair.
3. The Program Director or designee will coordinate with an external Biomedical Equipment Vendor to have all electrical equipment safety checked and/or repaired annually.
4. The report of the Biomedical Equipment Vendor will be kept in the Department Office and is available for inspection by any member of the University community upon request provided the review occurs in the department offices.
5. Equipment will be replaced as the need to do so is identified either by malfunction or end of utility.
6. Any equipment approved for use outside of the classroom/laboratory space must be signed-out on the Equipment Sign-Out Log located in the Overflow Laboratory (#323).

## Complaint Process

### Policy Title: Filing a Formal Complaint-Student

**Policy:** The Physical Therapy Faculty and Staff recognize and accept a student's right to file a complaint/grievance against a member of the Department of Physical Therapy. All complaints/grievances must be submitted in written form and contain substantiating evidence. No attempt will be made to infringe upon this individual right. All complaints/grievances are taken seriously and as such will necessitate appropriate investigation prior to resolution.

**Procedure:**1. All complaints will be treated confidentially to the extent allowable until investigated. The investigation of a complaint/grievance negates the possibility of maintaining confidentiality; however, the complaint is only known to the parties involved and not openly discussed in any public forum.

2. Any complaint or grievance received by the Physical Therapy Faculty and/or Staff will be redirected to the Program Director.
3. The Program Director will determine the nature of the complaint/grievance and seek the appropriate course of resolution.
4. The Department Chairperson/Program Director will may work with the Dean of College of Health and Natural Sciences and Department of Human Resources at the University of Mount Union to resolve personnel issues.
5. See below for course/laboratory complaints.

### Course/Laboratory Complaints

1. Students must attempt to resolve complaints/grievances related to PT program member within a course or laboratory setting with the PT program member directly.
2. If resolution is not possible to the satisfaction of both parties, students may seek the intervention of the Physical Therapy Program Director.
3. In the event that a satisfactory resolution is still not possible, the Program Director may refer the matter to the Dean of the College of Health and Natural Sciences for final resolution.

## Policy Title: Receipt of a Complaint- Community Member

**Policy:** The Physical Therapy Program will be responsive to substantiated concerns raised about students, faculty, and program policies/practices by outside constituencies outside of the university such as clinical education facilities and the public. Every attempt will be made to resolve such issues through appropriate discussion, education, and action.

**Person(s) Responsible:**

Outside constituents

Physical Therapy Faculty

Physical Therapy Program Director

**Procedure:**

1. Anyone receiving a concern or complaint should refer that issue to the Physical Therapy Program Director. In instances in which the Program Director is the source of the concern or complaint, issues should be referred to the Dean of College of Health and Natural Sciences.
2. The Program Director or Dean will conduct a reasonable investigation to gain a full understanding of the issue at hand.
3. Issues not directly involving the Physical Therapy Program will be referred to the appropriate area Department Chairperson, Director, or Dean. Vice President.
4. Attempts will be made to resolve the concern through discussion, mediation, education, and/or other appropriate action.
5. Those issues which cannot be resolved through the above processes shall be referred to the Dean of the College of Natural and Health Sciences.
6. The Physical Therapy Program Director will maintain documentation of such concerns or complaints and their resolution.
7. Persons who wish to make a complaint may do so through the information provided on the program's website.

## Policy Title: Registering a Complaint with CAPTE

**Policy:** The Physical Therapy Program makes every effort to meet the expectations of the specialty accreditor, Commission on Accreditation in Physical Therapy Education (CAPTE); however, even given our best efforts, complaints may arise. We acknowledge the rights of students and others to file a complaint with CAPTE.

### **Person(s) Responsible:**

Students

Physical Therapy Consumers

Physical Therapy Clinical Facilities

Physical Therapy Faculty

Physical Therapy Program Director

### **Procedure:**

1. Any individual wishing to file a complaint with CAPTE regarding what appears to be the Physical Therapy Program's inability to meet an evaluative criterion may do so by following the directions presented on [CAPTE's Complaints Webpage](#).
1. If a member of the physical therapy faculty is approached by a student, consumer, or clinical facility staff member regarding the desire to file a complaint with CAPTE; assistance will be provided to direct that party to the above website.
3. Upon receipt of a complaint from CAPTE, the Physical Therapy Program Director will make every attempt to investigate the complaint, reach compliance, and report findings back to CAPTE.

## Clinical Education

### INTRODUCTION TO CLINICAL EDUCATION

Clinical education is an integral part of the physical therapy curriculum. Clinical education experiences allow students to develop and refine clinical reasoning skills, as they learn to apply knowledge gained in the classroom to real life management of patient cases. It is exciting to watch the foundations and principles established in coursework come to life as patients improve and progress with physical therapy treatment interventions.

Students are representatives of the University of Mount Union and of the Physical Therapy Program at all times while on a clinical education experience. The handbook will be updated periodically to ensure the information included reflects best practice. Therefore, it is the student's responsibility to access the handbook online prior to beginning each clinical rotation to ensure compliance with Clinical Education Policies and Procedures.

### AVOIDANCE OF CONFLICT OF INTEREST

In order to ensure fair evaluation of student clinical performance, students are not typically allowed to seek placement at a clinical site in which they have previously been employed, whether or not that employment was related to the field of physical therapy. Students will not be assigned to clinical sites where an immediate family member is employed, unless the system is large enough that employment will have no discernible impact, determined on a case by case basis.

### Civil Rights/Equity Policy And Resolution Process

Please refer to the [University of Mount Union Student Handbook policy "Civil Rights and Equity Policy and Resolution Process"](#) (Under the student handbook link), for the full policy that includes definitions, types of harassment, and the University expectations as well as guidelines to determine if behaviors have violated University values.

### Reporting Discrimination

Please refer to the [University of Mount Union Student Handbook policy "Reporting Discrimination"](#) (Under the student handbook link), for the steps to follow to report discrimination, harassment, and/or retaliation.

### Non-Discrimination Policy

The University of Mount Union prohibits discrimination on the basis of race, gender, gender identity or expression, sex, sexual orientation, religion, age, color, creed, national or ethnic origin, veteran status, marital or parental status, pregnancy, disability, or genetic information, in student admissions, financial aid, educational or athletic programs, or employment as now, or may hereafter be, required by University policy and federal or state law. Inquiries regarding compliance may be directed to the Human Resources Office, Beeghly Hall, (330) 829-6560.

## CLINICAL EDUCATION ROLES AND RESPONSIBILITIES

DIRECTOR OF CLINICAL EDUCATION/ACADEMIC COORDINATOR (DCE/ACCE): An individual who is responsible for managing and coordinating the clinical education program at the academic institution, including facilitating development of the clinical education site and clinical educators. This person is also responsible for coordinating student placements, communicating with clinical educators about the academic program and student performance, maintaining current information on clinical education sites, and assessing overall outcomes of the clinical education program.

CENTER COORDINATOR OF CLINICAL EDUCATION (CCCE): Individual(s) at the clinical site who administer, manage, and coordinate clinical instructor assignments and learning activities for students during their clinical education experiences. In addition, this person determines the readiness of clinicians to serve as clinical instructors, supervises experiences, communicates with the academic program regarding student performance, and provides essential information about the clinical education program to physical therapy programs. He or she may or may not be a physical therapist.

CLINICAL INSTRUCTOR (CI): An individual at the clinical education site who directly instructs and supervises students during their clinical learning experiences. This individual is responsible for carrying out clinical learning experiences and assessing students' performance in cognitive, psychomotor, and affective domains as related to entry-level clinical practice and academic and clinical performance expectations. A Clinical Instructor (CI) must be a licensed physical therapist with at least one year of clinical experience who has demonstrated clinical competence.

STUDENT: A learning worker who participates in clinical education to practice what he or she has learned in the classroom.

### References:

1. Guidelines and Self-Assessment for Clinical Education – 2004 Revision, American Physical Therapy Association.
2. Guidelines for Clinical Instructors, American Physical Therapy Association
3. Physical Therapy Credentialed Clinical Instructor Program Manual, American Physical Therapy Association
4. Reference Manual for CCCEs, American Physical Therapy Association

## Clinical Education Policies and Procedures

### POLICY TITLE: Clinical Education Philosophy

Clinical education experiences are designed to be a progression from an introduction to basic clinical skills in the initial clinical rotation to entry-level clinician standards by the end of the final rotation. As such, the initial clinical education experience in PT-781: Clinical Education I, places students where they will gain clinical experience with basic physical therapy diagnoses across the lifespan and have the opportunity to practice the skills required for the physical therapy examination. Within PT-782: Clinical Education II, students will be exposed to intermediate level physical therapy diagnoses across the lifespan and will be expected to become competent in performing all aspects of the physical therapy evaluation and in designing and implementing a plan of care. The final clinical education experience, PT-783: Clinical Education III, will allow the students to gain experience in practice management/supervisory roles and to work with entry level physical therapy diagnoses, complex cases, and multiple co-morbidities. Students will be expected to complete clinical education experiences in a variety of clinical settings. Clinical sites should be committed to student education, and should allocate the appropriate time, staff, and space within the facility to foster a productive learning environment.

## Policy Title: Clinical Site Selection

**Policy:** The DPT program at the University of Mount Union is dedicated to forming partnerships with clinical facilities that are committed to student education. We expect our clinical sites to allocate the appropriate time, staff, and space within the facility to foster a productive learning environment for our students during their clinical affiliations. The Director of Clinical Education (DCE) strives to provide students with an ample selection of clinical sites that provide quality physical therapy services grounded in evidence-based principles that represent a variety of professional practice settings and patient populations across the lifespan of human development. Additionally, the DCE will ensure clinical opportunities will be reflective of diseases and conditions commonly seen in a variety of physical therapy settings. Experiences will also include involvement in inter-professional practice opportunities and direction/supervision of PTAs and other PT personnel.

Site selection criteria also includes the site's ability to provide clinical experience in treating the diagnoses commonly seen in physical therapy practice, and the ability to train students at beginner, intermediate, and/or entry level stages of physical therapy preparation.

Clinical sites must be able to provide students with a full-time clinical education experience for the duration of the requested clinical affiliation. Sites must be able to assign students to work with a qualified clinical instructor who: 1) has completed an accredited physical therapy program or one deemed substantially equivalent (doctorate preferred), 2) maintains a current and unrestricted physical therapy license in the state in which they practice, 3) has at least one year in physical therapy practice with demonstrated current competence and ability to supervise students in their clinical encounters and experiences, and 4) has the desire to participate in the education of physical therapy students.

Establishment of new clinical education sites focuses primarily on the local region, to develop strong relationships with clinical educators in the area and to ensure that our students will be able to access the sites. Sites outside the local area have been identified based on their ability to provide quality clinical education experiences that will expand the breadth and depth of opportunities available to our students.

### **Person(s) Responsible:**

Physical Therapy Program Director  
 Director of Clinical Education (DCE)  
 Physical Therapy Faculty  
 Site Coordinator of Clinical Education (SCCE)  
 Clinical Instructor (CI)  
 Physical Therapy Administrative Personnel  
 Student

### **Procedure:**

1. The Director of Clinical Education (DCE) will make initial contact with all clinical sites, to ensure they are compatible with the University's mission and vision, are committed to providing excellent physical therapy services, and demonstrate dedication to student learning. The DCE will work with the Site Coordinator of Clinical Education (SCCE) to establish a clinical affiliation agreement. Established sites will comprehensively provide student access to experiences in a variety of practice settings, across the lifespan, and with exposure to basic,

intermediate, and medically complex/entry level physical therapy diagnoses.

2. If students are interested in a clinical site not currently affiliated with the University of Mount Union DPT Program, they may submit the facility contact information to the DCE by the end of the third semester of the program for possible placement on Clinical Education II or III. Establishing an affiliation agreement with a site can take months, and in some cases, up to a year to complete. Submission of a site of interest is not a guarantee that the University will ultimately pursue an agreement, or that the student will be placed at the site for a future clinical experience.
3. Students fill out clinical facility and clinical instructor evaluations after each clinical education experience. The DCE periodically reviews clinical site evaluations and performs site visits to ensure an ongoing ability to meet Program needs. The Program will maintain up-to-date clinical site information forms.
4. All clinical sites affiliated with the University of Mount Union DPT Program are expected to carry out the Program's established student learning objectives for the assigned student's clinical education experience, and to evaluate student clinical performance as outlined in the course syllabus. The DCE will provide any necessary training or tools to assist the clinical staff in this process.
5. If there are concerns about the clinical facility's ability to provide the student with quality clinical education experiences or to meet the student learning objectives, the DCE will work with the SCCE to resolve these concerns. The DCE may decide to place a facility on hold while conflicts are being resolved (and so will not send requests for student placement) and may ultimately decide to discontinue the clinical education experience if deemed necessary.

## Policy Title: Site Required Documents for Clinical Education Experience

**Policy:** Clinical sites have mandatory requirements for participation in clinical education experiences. These requirements are made known to the program and are made available to the student prior to the beginning of the clinical education experience. The Director of Clinical Education (DCE) works with students throughout the academic year to ensure that they have all the requirements in place that are routinely required by most clinical sites, as well as university requirements. It is ultimately the responsibility of the student to ensure that all site requirements are known and met prior to the beginning of the clinical education experience.

### **Person(s) Responsible:**

Student

Director of Clinical Education (DCE)

Site Coordinator of Clinical Education (SCCE)

Physical Therapy Administrative Personnel

### **Procedure:**

1. The DCE works with students in the first year of the program to educate and assist in meeting the standard clinical site requirements.
2. The DCE updates clinical site information and requirements within the clinical education files as the program is made aware of them. These requirements are made available to the students online in the clinical education software system under the clinical site.
3. In the semester prior to the clinical education experience, students are instructed by the DCE to contact their clinical site to inquire about mandatory requirements. If the site has additional requirements other than those the student has already completed, it is the student's responsibility to fulfill those requirements thirty days prior to the start of the clinical education experience. The student is also to notify the DCE of these requirements for future reference.
4. If a student does not have all documents that are required by the clinical site submitted to and approved by the program's DCE thirty days prior to the beginning of a clinical education experience, they may not be permitted to proceed to the clinical.
5. Student must acknowledge, through clinical education software, the accuracy of the information provided as well as the willingness to release information to clinical sites.
6. Any student who does not meet the mandatory requirements for clinical education experiences (as described in item 3 and 4 above) may receive a Written Warning or be required to appear before the Physical Therapy Conduct & Performance Review Board (PT-CPRB) for failure to demonstrate adequate professional behavior consistent with the program's expectations.

## POLICY TITLE: Attendance/Call-Off Procedure

**Policy:** Students are expected to demonstrate professional behavior at all times and in every clinical setting. Punctuality and daily attendance are considered part of professionalism. Students are expected to participate in 40 hours of clinical education experiences per week and to follow the work schedule of the assigned Clinical Instructor (CI). Absences are only acceptable in the event of illness, injury, or family emergency and must be reported and approved according to the procedure. Excessive tardiness or unexcused absences will result in removal from the clinical, a failing grade for the clinical education experience, and possible appearance before the Physical Therapy Performance and Conduct Review Board.

### Procedure:

1. Students are expected to follow the schedule of the assigned Clinical Instructor(s) and facility. Work schedules may vary significantly from site to site, and among therapists within a site. Students should not expect to work a standard M-F 8-4:30 schedule during clinical rotations. Work schedules may include weekends, evenings, and or holidays.
2. Students are expected to be punctual. Students ought to arrive 15 minutes prior to their scheduled shifts in order to prepare for patient care.
3. In the event that a student will be late or needs to call off for the day, the student must contact the CCCE or the CI as soon as possible.
4. Excessive tardiness, leaving work early without CI permission, or unexcused absences will not be tolerated. The DCE will be contacted by the CI or CCCE to have the student removed from the clinical rotation.
5. The DCE must be notified for absences that exceed one day. Students are allowed one absence due to illness during a clinical rotation. Students are expected to make up time for any additional absences. Students may be asked to have a physician's note available for any absences due to illness in excess of two days.
6. All requests for personal days off (e.g. religious observance, family event, professional conferences, etc.) must be approved by the DCE in advance and with the cooperation of the CCCE.

### Attending Professional Development Functions While on Clinical Education Experiences

7. The program encourages participation in professional development functions. Should a student wish to attend a professional conference (Student Conclave, CSM, or national or state conference), a request must be submitted and approved by the DCE prior to the beginning of the clinical rotation. Any missed clinic hours must be made-up.

POLICY TITLE: Grading of Clinical Education Experience

**Policy:** All clinical education experiences will be graded as Satisfactory/Unsatisfactory. The Director of Clinical Education (DCE) assigns the final grade for each clinical education experience. Students must meet all clinical education requirements, policies, and guidelines in addition to meeting all clinical performance criteria in order to receive a grade of Satisfactory. The intention for grading of Clinical Education courses is to provide the student with formative vs. summative feedback. Instrumental to student success is early and frequent communication between the Clinical Instructor (CI) and student, and early identification of problems to the DCE. Student clinical performance will be evaluated by the CI and the student's self-assessment using the Clinical Internship Evaluation Tool. The student is expected to show progression of all performance criteria across the span of the clinical education experience. Students will also be evaluated based on their demonstration of ethical and professional behaviors, as well as the quality of work on additional assignments outlined in the course syllabi specific to each Clinical Education course.

**Procedure:**

1. The student and the Clinical Instructor each fill out the Clinical Internship Evaluation Tool at both midterm and final, at completion of *PT-781 Clinical Education I*, *PT-782 Clinical Education II* and *PT-783 Clinical Education III*. They will then meet formally to review their scores and comments together. The student and CI must each sign off on the other's form to indicate that they have discussed the evaluations.
2. Completed CIETs are then available online for the DCE to review. The DCE determines whether the CIET indicates the student has met the standards for successful completion of the clinical rotation. Expectations for each clinical rotation are outlined in the course syllabus. The DCE initiates communication with the CI and student regarding any criteria that show unsatisfactory performance or significant discrepancy between CI and student ratings.
3. Students are expected to successfully complete all course assignments on time, including the student evaluation of clinical instruction and clinical experience, any additional required forms, and clinical projects (e.g. case study, in-service, research review, etc.).
4. The DCE or other designated faculty member will perform either a site visit or telephone call near the midpoint of the student's clinical education experience. The purpose of this contact is to ensure that the clinical education experience is meeting both the CI and student's expectations, to discuss learning opportunities, and to identify and address any problems that may have arisen. Early identification of any concerns from either the CI or the student is integral to the student's ultimate success.

**Unsatisfactory**

A grade of unsatisfactory on any clinical rotation may be grounds for dismissal from the Program and will require that the student appear before the Physical Therapy Conduct & Performance Review Board (PT-CPRB) as outlined in the **[See Policy Titles: Academic Standing and Physical Therapy Conduct & Performance Review Board policies]**.

**Incomplete**

A grade of incomplete may be issued for a clinical rotation only in exceptional circumstances limited to illness, injury, or family emergency situations. Requests must be submitted to the DCE and PT Program Director for approval.

**Remediation**

If student performance is less than satisfactory at any time during the clinical experience, the DCE should be notified immediately. The DCE may determine that the student needs to remediate the clinical experience. To remediate the clinical experience a learning contract may be established **[See Policy Titles: Student Retention, Student Learning Contract, and/or Student Remediation policies]**. Remediating a clinical experience may require removing the student from the current clinical facility and placing them at an alternate facility.

To meet the expectations and required hours the student may need to attend and complete additional hours during semester breaks, evenings, or weekends. In certain instances, the need to repeat the entire clinical experience at its next offering is possible. Any of the above arrangements may result in a grade of 'In-progress' (IP) until the student is able to meet the standards for satisfactory performance. The goals/outcomes and timeline for successful remediation is provided in the learning contract.

POLICY TITLE: Dismissal from a Clinical Education Experience

**Policy:** Dismissal from a clinical education experience for any reason will result in an appearance before the Physical Therapy Conduct & Performance Review Board (PT- CPRB), according to the process outlined in the ***[See Policy Title: Physical Therapy Conduct & Performance Review Board]***.

**Person(s) Responsible:**

Student

Director of Clinical Education (DCE)

Center Coordinator of Clinical Education (CCCE)

Clinical Instructor (CI)

Physical Therapy Program Director

**Procedure:**

1. If a student is dismissed from a clinical education experience for any reason, the DCE must be notified immediately by the student, CCCE, and/or CI.
2. The DCE will notify the Physical Therapy Program Director of the dismissal.
3. Once notified, the Physical Therapy Program Director will convene the Physical Therapy Conduct & Performance Review Board (PT-CPRB) to review the matter



