

# **PHYSICAL THERAPIST ASSISTANT PROGRAM**

## **STUDENT HANDBOOK**



**FALL 2019**



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# Oklahoma City Community College Physical Therapist Assistant Program

## PREFACE

Information, guidelines, and policies relating to all students are included in the **Oklahoma City Community College Catalog** and the **Oklahoma City Community College Student Handbook**. The **Physical Therapist Assistant Program Student Handbook** contains additional information, guidelines, policies, and procedures for all students in the physical therapist assistant program. This Handbook is a revision of prior physical therapist assistant handbooks and supersedes any previous PTA Student Handbooks. It is applicable for all OCCC physical therapist assistant students. Although commonly asked questions from physical therapist assistant students are addressed, PTA faculty and staff remain ready and willing to provide additional information and clarification about the program.

### **Equal Opportunity within the PTA Program with respect to OCCC Policy No. 1011:**

Oklahoma City Community College ("OCCC"), does not discriminate on the basis of race, color, ethnic or national origin, sex, sexual orientation, gender identity, gender expression, religion, age, ancestry, disability, genetic information, military status or veteran status, in admissions, educational programs or activities and employment, including employment of disabled veterans and veterans of the Vietnam Era, as required by applicable laws and regulations. Responsibility for coordination of compliance efforts and receipt of inquiries concerning Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and the Americans With Disabilities Act Amendments Act of 2008, has been delegated to the Director of Equal Opportunity, who also serves as the ADA/Rehabilitation Act Sec. 504 and Title IX Coordinator. The Director of Equal Opportunity may be reached at 405.682.7540. OCCC is located at 7777 South May Avenue, Oklahoma City, OK 73159, 405.682.1611.

**OKLAHOMA CITY COMMUNITY COLLEGE  
PHYSICAL THERAPIST ASSISTANT PROGRAM  
HISTORY**

Oklahoma City Community College traces its beginning to March 20, 1969. At that time a committee from the South Oklahoma City Chamber of Commerce was organized to circulate petitions asking the Oklahoma State Regents of Higher Education to take action to establish a junior college in the area. As a direct result of the interest and initiative of these citizens, a junior college district was formed and a board of trustees appointed. Extensive planning and ground breaking for the college took place in 1971. Construction began in January, 1972.

South Oklahoma City Junior College (now Oklahoma City Community College) opened for classes on September 25, 1972, with an enrollment of 1,049 students. On October 8, 1972, the college was formally dedicated. OCCC is accredited by the Higher Learning Commission, located at 230 South La Salle Street, Suite 7-500, Chicago, Illinois 60604-1413, Telephone (800) 621-7440, <http://www.ncahlc.org>.

The college has grown to serve 18,500 students annually. It offers a full range of associate degree programs that prepare students to transfer to baccalaureate institutions. Other degree and certificate programs are designed to prepare students for immediate employment in a variety of fields. The Physical Therapist Assistant Program is one such program. Additionally, OCCC offers a wide range of community and continuing education courses, workshops, conferences, and seminars.

The Physical Therapist Assistant program was originally accredited by the Commission for Accreditation of Physical Therapy Education (CAPTE 1111 N. Fairfax Street, Alexandria, VA 22314; Phone: 703.706.3245; Fax: 703.706.3387) in 1982. The first class of physical therapist assistant students graduated in 1984. The program was reaccredited in September 1997, April 2008 and July 2018-for a 10 year period, expiring in 2028.

Through accreditation, physical therapy and physical therapist assistant programs can insure that their program provides a consistent and complete curriculum that is comparable to other programs across the country.

OCCC has approximately 70-90 qualified applicants each year and of those applicants, 20 students (30%) are admitted each fall. Over the past two years (2017-2018), 95.12% of those students graduate with the Associate in Applied Science degree. In that same timeframe, 95% (36/38) of the PTA graduates have passed the National Board Exam and are eligible to practice as Licensed Physical Therapist Assistants. Of those who choose to work as PTAs, 100% have jobs. In addition to didactic coursework, offsite clinical fieldwork is required for this degree. The first clinical experience occurs during the summer following the first full year of the program and requires 160 hours, which is equivalent to four weeks of full-time work in a clinical setting. The next two clinical experiences take place during the spring semester of the second year in the program for a total of seven weeks each or 560 clock hours. Due to the clinical nature of this program, student liability insurance, background checks, and a random drug screen are required. The results of these tests must meet the clinical sites' standards for the student to continue in the program and to obtain licensure in the state of Oklahoma. Questions about this requirement can be directed to the [www.okmedicalboard.org](http://www.okmedicalboard.org).

Revised July 2019

## MESSAGE TO THE STUDENTS

WELCOME to the Oklahoma City Community College Physical Therapist Assistant Program. The faculty's goal is to provide you with the skill, knowledge and code of conduct needed to function as a Physical Therapist Assistant upon entering the profession of physical therapy.

The PTA Program faculty are here to facilitate your learning experience. One of our primary goals is to instill awareness in each student of the responsibility for continual self-assessment and lifelong learning to become a compassionate, competent health care provider.

## MISSION, PHILOSOPHY AND PROGRAM GOALS

The Division of Health Professions serves the people of Oklahoma by providing competent entry-level health care professionals through quality education. Graduates are prepared to demonstrate compassion in providing total patient care, to be responsive to the health and wellness needs of a diverse global community, and to recognize the importance of professional development and lifelong learning.

The mission of the Oklahoma City Community College Physical Therapist Assistant Program is to graduate successfully licensed physical therapist assistants who provide evidence-based ethical, legal and culturally competent care. Graduates of the program will provide interventions within the physical therapist's plan of care to maximize the patients'/clients' functional outcomes. Our graduates are competent to meet the needs of the evolving and diverse healthcare environment in a variety of settings and are prepared to attain personal achievement and satisfaction through lifelong learning.

To achieve this mission, the program is based upon a balanced variety of quality educational experiences, focusing on active learning and a commitment to service. By successfully preparing students for employment as physical therapist assistants, additional benefits are gained for each student in the form of personal achievement and satisfaction, and for society in the form of positive contributions to people who face challenges.

The Physical Therapist Assistant Program's philosophy and purpose are consistent with the educational philosophy of the College and expands to include these values:

### Physical Therapist Assistant Program Values

Accountability	OKC Community Development
Clear Communication	Professional Development
Diversity	PTA Community Development
Ethical Practice	Quality Patient Care
Flexibility	Stewardship
Innovation	Student and Graduate Success
Integrity	

### Program Goals (Ends):

1. Students will demonstrate compassionate, reflective, ethical problem solving and decision making.
2. Students will engender the importance of learning as a lifelong process.
3. Graduates will obtain a comprehensive, contemporary learning experience to meet the needs of the Oklahoma physical therapy community and increasing global society.
4. Graduates will demonstrate each of the CAPTE terminal competencies, pass the licensure examination, and proficiently enter the workforce.
5. Provide resources/support for faculty to maintain contemporary clinical practice
6. Encourage involvement in professional organizations and the physical therapy community

Revised 2017, reviewed 2019



## **ROLE OF THE PHYSICAL THERAPIST ASSISTANT**

The physical therapist assistant (PTA), is a member of the health care team who is required, by state law, to practice under the direction and supervision of a physical therapist licensed in Oklahoma.

A PTA is a graduate of a physical therapist assistant program accredited by the Commission on Accreditation of Physical Therapy Education and earns an Associate of Applied Science Degree in Physical Therapist Assistant (AAS). Upon graduation, the individual must successfully pass the national licensure examination in order to become licensed to practice as a PTA by the Oklahoma State Board of Medical Licensure and Supervision.

A physical therapist assistant **assists** the physical therapist in providing quality therapy services to people of all ages and cultures.

## **ESSENTIAL FUNCTIONS OF THE PHYSICAL THERAPIST ASSISTANT**

I understand the physical and cognitive requirements of this program to be strenuous. I must be able to meet the following *Essential functions*:

1. Read, write and spell at the collegiate level
2. Demonstrate common sense, problem solving abilities, and sound judgment
3. Communicate effectively verbally and in writing
4. Stand for 8 hours
5. Sit for 8 hours
6. Perform skills requiring manual dexterity, fingering and feeling
7. Maintain good standing balance on all surfaces
8. Administer manual exercises
9. Perform skills requiring constant walking
10. Make simple mechanical adjustments and repairs of therapy equipment
11. Safely transfer patients from all surfaces
12. Measure vital signs
13. Lift up to 50# frequently
14. Lift up to 150# occasionally
15. Squat, stoop, kneel and/or crawl
16. Transport patients with wheelchairs and carts by pushing and pulling
17. Achieve "Health Care Provider" level CPR
18. Educate patients and other consumers of physical therapy
19. Responds/performs appropriately in the event of unexpected and/or stressful situations

## **PHYSICAL THERAPIST ASSISTANT PROGRAM FACULTY AND STAFF**

### **Program Director/Professor**

Jennifer Ball, PT, MHR, ATC  
682-1611 x 7305 [jball@occc.edu](mailto:jball@occc.edu)

### **Academic Coordinator of Clinical Education/Professor**

Peggy Newman, PT, MHR  
682-1611 x 7749 [peggy.d.newman@occc.edu](mailto:peggy.d.newman@occc.edu)

### **Program Faculty**

Jenna Anderson, DPT/Malinda Crowell, DPT, GCS  
Charles Bostick, PTA, BS  
Josephine Gimple, DPT  
Taylor Kulow, PTA, BS  
Renee Thomas, DPT  
Debbie Williams, PTA, BS

### **Dean of Health Professions**

Vincent Bridges, Ed.D  
682-1611 x 7207

### **Division Assistant**

Debby Martinez  
682-1611 x 7432

### **Clinical Affiliation**

#### **Coordinator**

Shelly Tevis  
682-1611 x 7197

### **HP Simulation/Lab Director**

Cindy Milam x 7663

## **CURRICULUM DESIGN**

Curriculum design includes the selection of content, scope, and sequence of the academic and clinical program. Program competencies are identified based on current practice standards endorsed by the American Physical Therapy Association and “industry standards” held by local therapists on the Program’s Advisory Committee. The Program’s curriculum content is reviewed by the PTA Program Faculty with recommendations from PTA Advisory Committee members, and compared with APTA Minimum Skills Required of a PTA, FSBPT Content and *A Normative Model of Physical Therapist Assistant Education, 2007*, Specific course content is identified for each course based on a systems approach. Course delivery follows a developmental reinforcement approach, with an adult learner focus. A student learns information early in the program which is then reinforced in succeeding courses.

Physical Therapist Assistant courses include theory, on-campus lab, and clinical activities. Students are responsible for transportation to all clinical facility sites. Students are assessed by written, oral, and practical examinations and must complete a comprehensive skills check prior to progressing to the clinical experience.

Clinical experiences also follow a developmental approach and are an integral part of the program. They progress from observations in physical therapy clinics to hands-on fieldwork experiences, which require the application and practice of previously acquired knowledge and skills. The first full-time clinical education experience, Initial Practicum (PTA 1312), is scheduled for four consecutive weeks beginning in May after successfully completing the first year of the PTA Program. This course has a pre-requisite of successful completion of the comprehensive practical examination which is used to determine the student’s readiness to work with patients under supervision in the clinical setting. This two credit hour course entails working with patients in various physical therapy settings, at least forty hours per week, under the direct supervision of a clinical instructor who is a physical therapist or physical therapist assistant. The other full-time clinical education courses Practicum I (PTA 2034) and Practicum II (PTA 2134) are two seven-week experiences which occur during the second Spring Semester of the Program. They also have a pre-requisite of successful completion of a comprehensive practical examination. Both of the final practicums are four credit hour courses.

Students must be aware of the exceptional time commitment regarding clinical education. Financial and personal arrangements must be made in order to be in the clinic full-time. Students are responsible for costs incurred including travel and uniforms. Please also be aware of federally mandated Financial Aid requirements regarding the minimal number of credit hours per semester.

## **SEQUENCE OF COURSES**

The physical therapist assistant courses are offered sequentially; each course must be completed with a grade of C or better before progressing to the next course. In addition, all PTA students must maintain a 2.5 program GPA to remain in good standing. All major, general education, and support courses must be completed before proceeding to the terminal clinical practicums. Students must also meet the College computer proficiency requirement. Students should be able to complete the PTA coursework within five semesters with the exception of BIO 1314, which is required as a prerequisite prior to beginning the PTA Program. Research indicates PTA students are more successful with this basic knowledge prior to entering the program.

Course substitution forms must be filed with the Office Graduation, Employment, and Transfer Services for all courses which are to be applied toward the Associate in Applied Science in Physical Therapist Assistant and are different from those in the Curriculum Plan included in this Handbook. The appropriate form may be obtained from the Health Professions Division Office. Students should submit this form to the PTA Program Director with an official copy of the transcript with the documented grade and the course description or syllabus for the course substitution. The PTA Program Director must approve prior to forwarding this document to the Dean of Health Professions for approval.

## SUGGESTED COURSE SEQUENCE-72 CH

COURSES			CREDIT HOURS
<b>FRESHMAN YEAR</b>			
<b>Summer</b>			
BIO	1314	Human Anatomy and Physiology I	<u>4</u>
			4
<b>1<sup>ST</sup> Semester</b>			
SCL	1001	Success in College and Life	1
PTA	1013	Introduction to Physical Therapy	3
PTA	1023	Dynamic Human Motion	3
PTA	1213	PT Procedures I	3
BIO	1414	Human Anatomy and Physiology II	4
ENGL	1113	English Composition I	<u>3</u>
			17
<b>2<sup>ND</sup> Semester</b>			
PTA	1112	Pathology for Physical Rehabilitation	2
PTA	1224	Therapeutic Exercise I	4
PTA	2014	PT Procedures II	4
PTA	1151	Clinical Prep I	1
BIO	2102	Clinical Anatomy	2
COM	1123	Interpersonal Communication	<b>OR</b>
COM	2213	Introduction to Public Speaking	<b>OR</b>
SOC	2143	Race and Ethnicity in the US	<u>3</u>
			16
<b>Summer</b>			
PTA	1312	Initial Practicum	2
<b>SOPHOMORE YEAR</b>			
<b>1<sup>ST</sup> Semester</b>			
PTA	1202	Development, Conditions & Treatment Across the Lifespan	2
PTA	2024	Therapeutic Exercise II	4
PTA	2113	PTA Systems/Problems	3
PTA	2021	Clinical Prep II	1
PSY	1113	General Psychology	3
ENGL	1233	Report Writing	<b>OR</b>
ENGL	1213	English Composition II	<u>3</u>
			16
<b>2<sup>ND</sup> Semester</b>			
PTA	2034	Practicum I (first 8 weeks)	4
PTA	2134	Practicum II (second 8 weeks)	4
PSY	1403	Developmental Psychology	3
PS	1113	American Federal Government	3
HIST	1483	United States History to 1877	<b>OR</b>
	1493	United States History 1877 to Present	<u>3</u>
			17

\*\*For the courses that indicate OR, the student may choose which course to take to complete the credit hour requirement in that area of study from the courses listed.

## ADMISSIONS AND GENERAL INFORMATION

- Applications for admissions to the Physical Therapist Assistant Program may be obtained online at [www.occ.edu/health/pta.html](http://www.occ.edu/health/pta.html). Application periods are once per year with deadlines occurring in early spring.
- Applicants must first qualify for admission to Oklahoma City Community College according to the criteria for admission, including a \$30.00 first time enrollment fee for OCCC and a \$20.00 selective application fee for the PTA Program as stated in the current College Catalog.
- It is very important that individuals interested in applying to the PTA Program begin by meeting with an advisor to ensure admissions criteria has been met.
- There are basic application requirements (reading, writing, math tests, and GPA) which must be met to qualify for application consideration. Once these basic application requirements are met, the applicant is placed on a candidate list in order of the total number of preference points earned. Although preference points are optional, they are the means for selection of each class admitted to the PTA Program. In the event of duplicate preference points, GPA is used to rank the candidates in each preference point category.
- Only completed applications will be accepted. They must include all documents, fee receipt, transcripts, test scores, and work experience forms. Preference points will be assigned according to existing criteria. **No additions or revisions may be made to an application once submitted.**
- An official transcript from **each** of the colleges/universities attended must be submitted with the application.
- When meeting with an advisor to plan semester courses and determine application preference points, it is helpful to bring copies of transcripts from outside colleges/universities attended..
- Applications will be considered for the specified application period only.
- Applicants not selected may reapply for admission during the next application cycle. There is no limit to the number of times the applicant may apply.
- A cohort of student students is selected for the PTA Program each fall.
- For students to successfully complete any of the programs in Health Professions, they must be able to meet all the cognitive and behavioral objectives listed in the course syllabi and demonstrate competency on all required skills. PTA essential functions can be found in the PTA Student Handbook. Students with disabling conditions, who require accommodation to meet objectives or demonstrate required skills, must contact OCCC Student Support Services at (405) 682-7520.
- Clinical Agencies have requirements in place that all students must meet. Students who do not meet agency requirements will not be able to attend that clinical. That means that those students cannot successfully pass the course(s) that require clinical performance and cannot be successful in the PTA program.

## GENERAL CLINICAL INFORMATION

Students are responsible for purchasing student liability insurance, uniforms, equipment, books, and supplies for all PTA courses. Students are also responsible for the costs of background checks and drug testing as well as other immunizations and health records. Estimated expenditures are included in this Handbook on page 14.

### INVESTIGATIVE BACKGROUND CHECKS AND DRUG TESTING REQUIREMENT

#### OCCC Policies are located in Appendix G of this document

- Due to clinical agency requirements, the Division of Health Professions requires an extensive, nationwide background report which includes, but is not limited to, Oklahoma State Bureau of Investigation (OSBI) searches for sex offender, violent offender, and criminal history. The background report must occur within 3 months prior to the first day of class. There is a fee for this report and will be paid online. **Any break in continuous enrollment will require an additional background report.**
- Clinical agency representative(s) review the reports that have a criminal history. The clinical facility alone can accept or deny clinical access to a student. If the student is denied clinical access, he/she cannot complete the program. Any break in continuous enrollment will require an additional nationwide background report.
- Each student must have a pre-placement drug test prior to the first clinical assignment. The fee will be paid online with the background check. **Any break in continuous enrollment will require an additional random test.** The student will be notified if a test appears as a non-negative. At that time the student will be asked to produce proof of all prescription medication to the test representative. If it is determined that the drug screen is positive for any reason, the student will be removed from the Program but may reapply in the future. If a student has two positive drug tests, he/she will not be allowed to return to the PTA Program.
- Students are advised to keep copies of the proof of immunizations, CPR certification, HIPAA, sexual harassment and bloodborne pathogen training certificates in the event the clinical sites require a copy.
- In accordance with Oklahoma Department of Library State Records Retention, Rules and Regulations, OCCC does not provide copies of student compliance documents to students, once submitted for OCCC records. This would include immunizations. Documents submitted for specific purpose or program requirements, cannot be duplicated for any additional purposes. Please ensure you retain your master or original documents and provide the division of Health Professions copies only. **OCCC cannot make copies of items that did not originate from OCCC.**
- New for fall 2018, students will be required to submit proof of immunizations for TDaP.
- **Graduates** are required to submit an original copy of a criminal history record search no more than three months prior to submission of the application for Oklahoma Licensure as a physical therapist assistant by exam. An individual with a felony conviction may not be eligible for licensure. Each request for licensure is reviewed on an individual basis. Any questions should be directed to the Oklahoma Board of Medical Licensure and Supervision.

## PROGRESSION IN THE PROGRAM

The Program adheres to a philosophy that students enrolled in the PTA curriculum will demonstrate mastery of both didactic and clinical course material. This is to ensure that each patient who receives physical therapy interventions from OCCC students will receive safe and appropriate treatment as well as current information. Furthermore, classroom, lab and clinical settings allow the student to demonstrate competency in the knowledge and skills required to sit for the national examination. Specific class requirements (including testing, presentations, and practical exams) are determined by each individual faculty member and will be specifically outlined at the beginning of the course in the Course Syllabus.

### Student Evaluation Procedures

1. Due to the unique nature of physical therapy, various methods are used to evaluate students and are listed in each course syllabus. Some methods of evaluation include:
  - a. Written examinations
  - b. Clinical performance instruments
  - c. Written assignments
  - d. Oral presentations
  - e. Practical examinations/Skills checks
  - f. Projects- collaborative group work
  - g. Evaluation of professional behaviors
2. Unit and comprehensive tests may be given in each PTA course. Testing procedures are listed in each course syllabus.
3. Grading criteria are also listed in each course syllabus. In order to progress in the PTA Program, each student is required to achieve a minimum of 74% of the course total points in order to pass the course.
4. Additionally, PTA students must maintain a *Program* GPA of 2.5 each semester. If a student does not achieve a GPA of 2.5, he/she will be placed on academic probation and has one semester to bring the *Program* GPA (cumulative) up to 2.5.

The grading scale is as follows:

90 - 100%	=	A
80 - 89%	=	B
74 - 79%	=	C
65- 73%	=	D
Below 64%	=	F

\*\*all PTA coursework (This includes support courses BIO 1314, BIO 1414, BIO 2102) must be completed with a minimum of a C to be allowed to continue in the program.

\*\*The PTA Program reserves the right to dismiss any student from the academic program who exhibits non-professional behavior and/or violates the APTA Standards of Ethical Conduct of a PTA.

\*\*More specific information, relevant to how each particular instructor assigns grades, is provided in each course syllabus.

### Appeal Procedure

1. Students who desire to appeal a grievance are advised to follow the College standards and procedures for appeal as outlined in the Oklahoma City Community College Student Handbook.

## PROGRAM EXIT

A student may exit the program either voluntarily or involuntarily as follows:

### 1. Voluntary Withdrawal

A student may voluntarily withdraw from the Program at any time but must follow procedures as defined in the current College Catalog to receive a grade of "W" for the courses in which he/she is currently enrolled. **It is the student's responsibility to officially withdraw from the course.** Failure to withdraw from a course will result in a failing grade for each course. A student may also voluntarily withdraw from the Program after successfully completing a course. The student must submit an official notice to the program director to withdraw from the program. This written notice will serve as TERMINATION from the program.

### 2. Involuntary Withdrawal

A student is not eligible to progress who

- a) does not achieve the objectives of the academic or clinical course, (as evidenced by academic or clinical performance evaluation with a failing grade) including the comprehensive skills checks and the comprehensive final exam,
- b) has remained on academic (less than 2.5 PTA Program GPA) or professional probation for two consecutive semesters.
- c) is in violation of the College Student Conduct Code (see current College Student Handbook),
- d) is in violation of the Standards for Student Conduct Code during Clinical Placements, or
- e) has a positive drug test.

An exit interview is required to be considered for readmission to the Program. In the event that a student exits the program, the professor for each course in which the student is enrolled will discuss the circumstances with the student and initiate an exit interview form (**See Appendix**) for submission to the program director. The completed exit interview form becomes part of the student's file.

## READMISSION POLICIES

Revised July 2013, reviewed 2019

Students who have withdrawn for academic or personal reasons may be considered for readmission. Only students who have withdrawn for personal reasons may resume previous standings in the PTA Program. If a curriculum change occurs, that student will complete an individual plan to complete the coursework. The students must complete the exit interview and a petition for readmission form (**see Appendix I**). Students may re-enter the program **one (1)** time for either academic or personal reasons. To qualify for the personal reasons withdrawal, the student must be in good academic standing, which is defined as a minimum grade of "C" or higher in each major course (PTA prefix or BIO prefix) and an overall Program GPA of 2.5 or greater. Please note the student must finish the program within three (3) calendar years of the starting semester. After the one year has passed, that opportunity is no longer available and the student must reapply to the PTA Program and take the entire course sequence again. Students must request readmission in writing to the program director prior to the semester of re-entry. Readmission is not guaranteed and may be denied if the courses are at maximum enrollment.

If a student has withdrawn for academic reasons (failure of a course) **he/she must successfully complete a remediation plan** that is determined by the faculty, program director, and student. The minimum requirement will include successful completion of the unit and comprehensive

practical examinations throughout the remediation period for the previous and concurrent courses that semester (even after successful completion previously due to co-requisite status). The plan may also include taking additional courses to improve cognitive understanding and/or observation of different clinical experiences. The student will have the opportunity to meet with the learning specialist for additional learning opportunities. The student must then retake the course in which he/she received the failing grade. Those skills checks/unit tests will be maintained in the student's remediation file for the readmissions process.

**Readmission Procedure:**

1. A Petition for Readmission must be completed during the exit interview. The deadline for the completion of the exit interview will be no later than two weeks after the student withdraws or receives a failing grade (for a course). If the student does not meet this deadline, he/she may not be considered for readmission. Exceptions are subject to the approval of the program director.
  
2. The program faculty will review the Petition for Readmission and make recommendations to the program director, based on the following:
  - A. Reason for withdrawal from the program.
  - B. Successful completion of the exit interview recommendations for improvement provided by the faculty.
  - C. Space availability. If there are more applicants for readmission than space available in the course, the faculty will rank the applicants according to the following criteria:
    1. Students who have withdrawn for personal reasons and are in good academic standing will be ranked first, according to retention GPA.
    2. Students who have withdrawn for academic reasons, and completed a remediation plan (with satisfactory progress on all concurrent semester skills checks and unit tests), will be ranked next, according to retention GPA at the beginning of the course they failed.
    3. Students who have been dropped from the program due to infractions of school policy will be considered on an individual basis.
  - D. The student will be notified by email of readmission status.
  - E. Students who receive notification of readmission opportunity must notify the PTA Program director by email to indicate plans for reenrollment. The completed form must be received in the Health Professions Division Office within five (5) days from the student's receipt of the email.
  - F. The program director will assist readmitted students with enrollment.



## COMPLETION OF PROGRAM

After completing the OCCC Physical Therapist Assistant Program, the graduate will earn the Associate in Applied Science Degree and will be eligible to apply for licensure as a Physical Therapist Assistant. The application for licensure is found online (by desired state) and OCCC will submit the Form One (verification of education for Oklahoma) and include official transcript when the degrees are posted. Graduates must sign a release for OCCC to release this document.

Oklahoma State Board of Medical Licensure and Supervision  
(405) 962-1400  
P.O. Box 18256  
Oklahoma City, Oklahoma 73154-0256  
[www.okmedicalboard.org](http://www.okmedicalboard.org)

\*\*To practice as a Physical Therapist Assistant, the individual must successfully pass the national exam. The Oklahoma State Board of Medical Licensure and Supervision can refuse to issue or renew or may suspend or revoke a license to any person, after notice and hearing in accordance with rules and regulations promulgated pursuant to the Physical Therapy Practice Act of the Oklahoma Statutes who has:

- practiced physical therapy for workers' compensation claims other than under the direction of a licensed physical therapist;
- treated or attempted to treat ailments or other health conditions of human beings other than by physical therapy as authorized by the Physical Therapy Practice Act;
- Failed to refer patients to other health care providers if symptoms are known to be present for which physical therapy treatment is inadvisable or if symptoms indicate conditions for which treatment is outside the standards of practice as specified in the rules and regulations promulgated by the Board pursuant to the provision of the Physical Therapy Practice Act;
- used drugs, narcotics, medications, or intoxicating liquors to an extent which affects the professional competency of the applicant or licensee;
- been convicted of a felony or of a crime involving moral turpitude;
- obtained or attempted to obtain a license as a physical therapist assistant by fraud or deception;
- been grossly negligent in the practice of physical therapy or in acting as a physical therapist assistant;
- been adjudged mentally incompetent by a court of competent jurisdiction and has not subsequently been lawfully declared sane;
- been guilty of conduct unbecoming a person licensed as a physical therapist assistant or guilty of conduct detrimental to the best interests of the public or the profession;
- been guilty of any act in conflict with the ethics of the profession of physical therapy;  
OR
- had a license suspended or revoked in another state.

Printed from the State of Oklahoma Physical Therapy Practice Act Title 59 O.S., Section 887.1-887.18 (amended 11/1/2015), and the Oklahoma Administrative Code Chapter 20 (amended 9-12.2016)

**PTA PROGRAM ESTIMATED COSTS FOR 2019-2020**

<b>Tuition/Fees</b>	<b>Total Tuition</b>
Instate resident	
\$135.29 per credit hour (72 credit hours for program)	\$ 9,740.88
\$135.29 per credit hour (PTA classes only 42 CH)	\$ 5,682.18
<u>Out of state \$326.99 per credit hour (72 credit hours)</u>	<u>\$23,543.28</u>
<b>Other Costs:</b>	
PTA Application fee	\$ 20.00
OCCC enrollment/application fee (first time OCCC students)	\$ 30.00
Student Liability Insurance (nonrefundable)	\$ 60.00
(\$30.00 -2 times during the program, insurance good for one year)**subject to change	
Immunizations&/or blood tests (estimate if needed)	\$ 250.00
Drug Screen	\$ 40.00
CPR Certification	\$ 25.00
My Clinical Exchange (one time payment if needed)	\$ 39.50
Background Checks	\$ 42.50
APTA/Oklahoma Physical Therapy Association Dues (\$100.00 annually)	\$ 200.00
Student Physical Therapist Assistant Organization Dues (\$10.00 annually)	\$ 20.00
<b>Books and Supplies</b>	
PTA Lab fees (PTA 1013, 2014, 2034)	\$180.00
(PTA-lab supplies provided to student and testing fee)	
Uniforms: lab coat, scrubs, shoes (estimated if needed)	\$ 160.00
PTA textbooks (estimated)	\$1,357.94
<b>Graduation Expenses</b>	
Cap and Gown	\$ 25.00
Application for Licensure (\$135)	\$ 135.00
Board Exam (\$492) and Prometrics (\$70.00)	\$ 562.00
Graduation Pictures (optional-estimated)	<u>\$ 50.00</u>
<b>Total cost excluding tuition</b>	<b>\$3,196.94</b>

(revised July 2019)

**STUDENT ORGANIZATION/CLUB**

The Student Physical Therapist Assistant Organization is a club on campus that participates in campus activities and supports the student physical therapist assistants. The club participates in fundraisers, educational programs, and community service projects. Each class elects a representative to attend the Campus Leadership Council. The Campus Leadership Council meets twice a month and offers a variety of opportunities to get involved in campus life.

This club provides an avenue to expand leadership, professionalism, and community service. All PTA students are strongly encouraged to participate. Students who demonstrate unprofessional behavior (professional probation) may not be allowed to hold office in the student organization.

## PTA PROGRAM POLICIES

### Physical Therapist Assistant Students are expected to adhere to the:

1. College Catalog "Student Responsibilities for Learning".
2. OCCC PTA Program Philosophy and Mission as well as all policies and procedures as presented in the current PTA Student Handbook.
3. Submission of the following:
  - a. Current (within 3 months) national background check with a criminal history search, violent offender, and a sex offender search (following procedures outlined by Division policies). Note: a history of a felony conviction or having ever been judicially declared incompetent may exclude an individual from applying for licensure in the state of Oklahoma. Contact the Board of Medical Licensure and Supervision for more detailed information.
  - b. Negative randomized drug test.
  - c. Receipt for payment of Student Liability Insurance each year in program.
  - d. Immunization and health records (PPD or other TB records; varicella immunization or titer; MMR or rubeola/rubella/mumps titers, TDaP, and hepatitis B verification or declination, flu vaccine).
  - e. A current Healthcare Provider level CPR card from the American Heart Association.
  - f. Satisfactory completion of all clinical agency requirements as they are specified at the time of enrollment (example: confidentiality statement, Medcom-Trainex annual training including bloodborne pathogens and sexual harassment).
4. Expectation that a student is responsible for providing his/her own transportation to campus and clinical sites.

**\*If a student does not meet the deadline of 3 weeks into the semester for purchasing the insurance and drug test, completing the background checks, and providing verification of immunizations, he/she may not be allowed to attend classes and will be placed on professional probation. This will make it very difficult for the student to stay current with the material and remain in good standing in the program.**

## PROBATION

### Academic Probation

The PTA coursework is organized into a curriculum that is sequential and integrated with each semester building upon previously acquired knowledge and skills. It is therefore imperative that prior material be reviewed and practiced. While successful completion of each PTA course requires earning the grade of C or better, the overall Program GPA requirement remains a minimum of 2.5. In the event a student is unable to maintain and *Program* GPA of 2.5, (s)he will be placed on academic probation. A second, consecutive semester in which (s)he is unable to earn a minimum of 2.5 *Program* GPA will result in dismissal from the PTA Program.

### Professional Probation:

As student members of the physical therapy profession, students in the PTA program are held to a high level of integrity, courtesy, respect and maturity as adult learners as more explicitly identified in the following documents: Generic Abilities and the APTA Values Based Behaviors for the PTA (found in appendix).

A student who demonstrates untoward behavior will be notified of the infraction in writing by the faculty member, ACCE, or Program Director. If this or any other infraction occurs, the student may be placed on Professional Probation. Once placed on Professional Probation, the student must create an individual professional behavioral contract, which must be approved by the faculty member who initiated the process and the program director. In the event of another instance of untoward behavior, the student may be dismissed from the program. Students placed on professional probation may not be allowed to hold office in the student organization.

\*\*The Program reserves the right to dismiss any student from the academic program who exhibits behavior that is inconsistent with the "APTA Values-Based Behaviors for the PTA" and/or the "Standards of Ethical Conduct for the PTA"

Examples of inappropriate behavior include but are NOT limited to:

1. Students who do not comply with Federal &/or State Laws, OCCC Policies/Procedures, Program Policies and/or didactic and clinical faculty instructions.
2. Any form of dishonesty such as: cheating, plagiarism, misrepresentation, providing false information, forgery, alteration or misuse of college/division/program/or clinical documents/records.
3. Not adhering to deadlines to turn in clinical documents (immunizations, CPR, online modules, insurance, background checks...)
4. Reporting to academic/clinical courses routinely late &/or unprepared.
5. Interfering with the professional performance and/or learning of others.

### **Attendance and Tardiness**

1. Attendance policies are addressed in each course syllabus and must be followed. It is imperative and expected that a student:
  - a. Notify faculty of absences prior to any required class, clinical, or lab experience.
  - b. Obtain materials missed due to absences.
  - c. Follow make-up course requirements as directed. This includes make-up requirements for clinical experiences. In the event of a clinical absence or tardiness, the student must notify the clinical instructor according to the previously-agreed-upon method prior to the occurrence when at all possible and as soon as realistically possible in the event of an emergency. Failure to do so is grounds for dismissal from the program.
  - d. Students are expected to be punctual to all required activities. The appropriate faculty should be notified in the event of tardiness.
2. Recurrent no call/no show to clinical practicums or on campus lab/lecture is grounds for dismissal from the PTA Program.
3. Only one clinical day may be missed per PTA course, including preparatory time. Extenuating circumstances will be considered on an individual basis.
4. Attendance in campus labs is mandatory. Make-up opportunities will be arranged for extenuating circumstances only.

### **LABORATORY PROCEDURES / OPEN LAB**

Physical therapy is a "hands-on" profession. In order to effectively help people learn to move more efficiently and/or painlessly, physical therapists and physical therapist assistants, frequently **TOUCH** people. In order to learn when, where, and how to therapeutically touch, one must practice.

Laboratory sessions in this Program require discreetly exposing the body part being discussed. Students practice therapy procedures/techniques on classmates and faculty after completing

background reading assignments and classroom lecture and/or demonstration. Students must wear appropriate lab clothes as directed by professor. Nails must be short and clean.

Laboratory sessions are designed to meet a particular course objective. It is imperative that each student maximally utilize laboratory practice sessions. This means practicing the particular skill on various student partners as instructed by the faculty for the duration of the scheduled laboratory session. While interacting in the lab, the students are permitted to work with equipment that they have been checked out on previously or current equipment. Due to the complexity of the equipment, students should not attempt to apply modalities or use equipment that they have not been trained to use. This is for lab safety and the protection of the equipment.

**Open Lab Rules:** To schedule additional practice time in the PTA Laboratory, the student must provide the request in writing to the individual faculty member teaching that coursework or the Program Director at least **three (3)** working days in advance of the desired date. Please note that while ample time is available for practice outside of class time, the laboratory space is occasionally used by other students. Advance scheduling is required especially to make arrangements for practice outside of class periods. Students must sign/in out during all open lab sessions on the computer. Indicate remediation if needed to practice to prior a recheck, otherwise indicate practice.

Students are allowed to practice all skills with direct supervision of faculty member/lab assistant. Students may practice skills without direct supervision, but electrical equipment cannot be operational (turned on) without a prior successful skills check on that piece of equipment. Students are **not** allowed to use/practice with equipment that has not been used in lab before. (regardless of prior work experience)

All electrical equipment is calibrated annually by an outside company to ensure safety for students and faculty. If a faculty member or student believes any equipment to be broken or unsafe, it needs to be labeled "Do Not Use" with information about the concern and the Program Director and/or HPC Lab Assistant must be notified by email.

**Hazardous Materials:** PTA lab has some chemicals to clean tables and for use with modalities (lotions/gels). The SDS are available online for all chemicals used at OCCC. If a spill or accidental exposure occurs, please follow the safety procedure noted in the appendix.

### **Skills Checks**

Skills checks/Check-outs are scheduled by individual faculty to allow the student an opportunity to demonstrate proficiency in a particular skill or procedure being covered within a course.

### **Comprehensive Skills Checks**

These practical examinations must be completed successfully as a prerequisite for Initial Practicum and Practicum I/II. If unsuccessful, the student will be allowed one additional opportunity. The second attempt will require two faculty members present and will be videotaped in order to allow the student self-assessment and reflection over his/her performance. **\*All skills check participants (student and nonstudent) who function as "patients" must sign consent forms and understand that these skills checks will be videotaped for assessment purposes.**

These Comprehensive Skills Checks occur within the Clinical Prep I and II courses. If the first and second attempts are unsuccessful, the student will receive a failing grade for the respective Clinical Prep course, and complete an individual Learning Contract, which must include evidence of reflection on areas requiring remediation, strategies to improve these insufficient areas of knowledge and skill, and repeat all individual skills checks for all previous coursework. There will

be one final opportunity to repeat the Comprehensive Skills check during the next course offering. If this third and final attempt is unsuccessful or if the student is not compliant with the Learning Contract, the student will be dismissed from the PTA Program.

### **Test Taking Policy**

Each student is required to take a scheduled examination/test at the time it is scheduled. In the event of an unusual, documentable emergency, the student must notify the instructor PRIOR to the absence. It is up to the instructor as to how/when the examination will be rescheduled if prior notification and arrangements are made. In the event the student fails to make prior arrangements, a zero will be documented for that test score with no opportunity for additional make-up points.

### **Comprehensive Final Exam**

There is an estimated fee of \$35.00 that will be collected with tuition/fees prior to taking the exam in the final semester of the PTA Program. All students are scheduled to take the computer based comprehensive final exam on a pre-determined day. The passing score is determined using aggregate national data provided by the testing company and will be verified by OCCC faculty. In the event a student does not achieve a successful score on the first attempt, the student can select a date to retake the exam within 30 days by notifying the PTA Program Director in writing. The exam will take place on OCCC campus and will be proctored by the PTA Program faculty or designee. If the student is not able to achieve a successful score on the second attempt, he/she will meet with the PTA Program Director to determine a study plan and reschedule to take a third exam (final attempt) within 2 months. This will ensure the student can take the licensure exam in October. The final comprehensive exam will be the PEAT from the FSBPT and must be purchased by the student at a cost of approximately \$85.00. The computer-based exam will occur on OCCC campus and will be proctored by PTA Faculty or a designee. If a student chooses to take the Licensure exam early and is successful, student is not required to take the comprehensive exam, however the fee cannot be refunded.

### **Services to Students Requiring Accommodations**

Oklahoma City Community College Complies with Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. Students with disabilities who seek academic adjustments / accommodations must make their request by contacting the Office of Student Support Services located on the first floor of the main building near SEM entry 3 or by calling 405-682-7520. All academic adjustments / accommodations must be approved by Student Support Services.

If you have been approved by Student Support Services to receive academic adjustments / accommodations, you must talk with your instructor in private at a mutually agreeable time such as during the instructor's posted office hours. This will allow the instructor to be better informed on how to assist you with access during the semester. To respect your privacy, the instructor will not approach you, but the academic adjustments / accommodations must be discussed to ensure ideal implementation for you. All information will remain confidential.

### **Student Confidentiality Requirements**

1. Physical therapist assistant students participating in clinical affiliations have access to confidential information about patients, families, and the clinical facilities. The federal government has given strict guidelines, including the Health Insurance Portability and Accountability Act (HIPAA), regarding patient confidentiality. It is an absolute requirement that student s maintain confidentiality of all verbal, written or electronic information.
2. Confidential information is only to be used to provide patient care and treatment during the student's clinical experience. During all clinical activities, students must follow

each facility's established procedures related to maintaining confidentiality. Violation of these rules may result in dismissal from the PTA Program.

3. If a student witnesses any violation of confidentiality in clinical facilities, the same should be reported as required by facility guidelines.
4. The Family Educational Rights and Privacy Act (FERPA) of 1974 is designed to protect the privacy of a student's educational records. These confidential records may include admission, enrollment, financial aid, bursar/billing account information, and will not be released without prior written consent from the student. PTA Program confidential records are kept in a file in the PTA Program Director's office.

### **SOCIAL MEDIA GUIDELINES**

All students are expected to use social media in a responsible manner. The goal is to protect other students, patients, and their families from inadvertent confidentiality breaches and/or avoid portraying the student (and therefore the College/PTA Program, and profession) in a sordid way.

Please be aware that Facebook, Twitter, Linked-In, Instagram, Snapchat, YouTube, blogs, podcasts, chats, IMs and any other social or internet-based media avenue are global-reaching outlets. Healthcare professionals are bound by law and professional codes of conduct to protect the confidentiality of patients, families, facilities, and colleagues. Even when a student is not on campus, he/she is representing OCCC and the PTA Program; and therefore is responsible to adhere to the OCCC Codes of Conduct and the Profession's Standards of Ethical Conduct.

Students shall not post anything that they would not want a future employer, their mother, a future spouse, the faculty, or patients to view. Students shall pay special attention to the personal profile. Students must be mindful of protecting confidentiality even on the class Facebook page.

- Never post anything about a patient or family, whether de-identified or not, including photos, text, or videos.
- Always obtain written consent before posting copyrighted materials.
- Maintain professional boundaries with patients and families. Ex: Do not "friend or follow" current patients or their caregivers.
- Ensure that using electronic communications does not interfere with clinical or academic policies.
- Use cell phones and internet access according to the institutional policies.
- Do not post defamatory, obscene, threatening, or harassing statements.
- Use a disclaimer that distinguishes your views from those of the OCCC PTA Program.

Remember that all electronic communications and postings are **Permanent, Public, and Immediately Searchable**. Please be aware that previously employers have asked for user names for social sites prior to hiring graduates. Clinical sites may look up students prior to accepting placement. Students from other institutions have been terminated from their programs based on their online posts (professionalism and confidentiality issues). Please consult the Program Director if you have any concerns about this issue.

### **Appropriate Use of College Technology**

All of the computers and printers in OCCC Labs are considered state property. As such they are to be used in accordance with College Policy 3058, "The use of OCCC owned, leased, or contracted Information Technology Resources is granted as a privilege and not a right." Use should be limited to course related learning activities.

## **Health Related Policies**

Students with health concerns or limitations which may affect academic or clinical performance must consult with his/her physician. Whether or not the faculty should be notified should be made jointly by the student and physician. A statement from the student's physician indicating the student's ability to continue with classes or clinical experiences may be requested by faculty. This is important after childbirth, surgery, or extended illness. Please see the PTA Essential Functions within the informed consent to participate document on pages **41-42**.

1. Students with chronic health problems are expected to follow necessary precautions related to the safety of self and others.
2. OCCC and clinical sites are not responsible for any injury or communicable diseases that may occur or be contracted while the student is enrolled in the PTA Program.
3. If a student is unable to progress in the program due to injury or pregnancy, that student will be allowed to withdraw but must complete the program within the three year time period. See Program Exit and Readmission Policies. The student should provide documentation to ensure that he/she can return to the program safely.

If an injury does occur, please follow the procedure indicated in this handbook in **Appendix A**.

## **Change of Information**

Students who have a name, telephone, address, or email address change must give written notice Records and Graduation Services, the PTA Program Director, and the Health Professions Division Office immediately. It is crucial that OCCC be able to locate students due to emergencies or inclement weather.

## **Textbooks**

Each course syllabus lists required and supplemental textbooks for that specific course. These references are evaluated annually by the faculty and are changed as necessary to ensure current standards and information. The library has one copy of the current textbooks available in the reference section for review/study; however they may not be removed from the library. The textbook list is updated annually in July for the academic year to remain current with new editions of the texts. Be sure to purchase the correct edition of each required text. OCCC bookstore should have accurate information.

## **Student Activities**

Students are strongly encouraged to join the Oklahoma Physical Therapy Association and the American Physical Therapy Association. Membership fees are estimated at \$100.00 annually (subject to change). These organizations are valuable to student physical therapist assistants by providing current trends, issues and legislation relevant to physical therapy. Both organizations are beneficial to the personal development of the individual student and provide opportunities to develop leadership skills. Other benefits include physical therapy journals, online resources available only to members, scholarship monies, and discounts for physical therapy seminars and workshops. **Students will be required to use the website to complete various assignments.**

## **Tobacco-Free Policy**

Oklahoma City Community College is committed to providing its students and employees a safe and healthy environment. Because of this commitment, on August 1, 2011, smoking and the use of any tobacco products are prohibited on OCCC Property.

## **Inclement Weather**

Weather in Oklahoma can become challenging during the winter months. As a member of the OCCC PTA Program, it is expected that each student behave as a professional. In the event that a student is unable to drive to a clinical site, he/she is expected to notify both the clinical instructor



and the ACCE. It is the student's responsibility to be aware of the inclement weather policy for that particular clinical site. It should be reviewed during orientation to the facility along with communication procedures in the event of an emergency.

If the college closes due to inclement weather, this information will be communicated to each student via twitter, Facebook, and local news media. Closings are also posted on the college website. Since the clinical sites are all over the state, the closing of the college may not affect safety in the student's area. The opposite is also true, inclement weather may occur in the student's area but may not affect the college. The student is responsible to contact the clinical instructor and the ACCE to communicate an inability to travel. The student is expected to make up time that is missed due to weather.

### **DRESS CODE**

When on campus or in the clinical setting, each student represents Oklahoma City Community College, the Physical Therapist Assistant Program, and the Physical Therapy Profession. The student is expected to exhibit professionalism, and therefore should project the best image possible. During lectures with guest speakers, when representing the Program on field trips, and when performing skills checks, the student must dress professionally in business casual attire. All regular lectures the dress is casual. Due to the nature of the laboratory setting, student PTAs must wear tennis shoes, shorts, and shirts, with the females wearing a halter top or swimsuit top that can allow access to the entire back when necessary. Students who do not have lab clothes available will not be allowed to participate in lab. Male and female changing rooms are located in the PTA lab. Lockers are provided, however the students must supply locks if desired.

For clinical dress:

1. OCCC name tag that clearly delineates student status
2. Hair of a natural color and styled so that it will not interfere with patient care (long hair must be tied back)
3. Jewelry limited to wedding rings and watches (no dangling earrings or piercings)
4. No facial piercings, including nose studs. If a nose stud is present, it must be covered with a band aid.
5. Fingernails must be short and clean
6. Visible tattoos and piercings may need to be covered/removed during clinicals
7. Clothing must be clean and pressed. Please contact the clinical site for specific dress regulations (scrubs may be required).
8. Shoes must be flats with closed toe and heel styles, only wear tennis shoes if allowed by that facility. No high heeled shoes, sandals, or shoes without socks are permitted.
9. Females may need to wear pants (no Capri style). Please contact the facility for specifics.

### **COMPLAINTS**

If a student believes that an action has been taken against him or her by a member of the College staff that misrepresents a College policy or a College procedure and/or violates the student's rights to education, the student can request that the action be reviewed through the Student Grievance Procedures.

Any student who has a complaint of this nature should consult the College Student Handbook to obtain the procedures to follow for filing a grievance. The first step of the process involves speaking with the faculty or staff person involved in an attempt to directly resolve the situation. If the matter is not resolved at that level, the second step includes making an appointment to speak to the faculty or staff person's supervisor. If further assistance is needed, please make an

appointment to speak to the Director of Student Relations at (405) 682-7821. Efforts to resolve the concern should be done quickly because of deadlines specified in the procedure.

Students who have a concern regarding access to facilities, programs, and services at Oklahoma City Community College because of a disability may call (405) 682-7520 (V/TTY) or go to Student Support Services Office.

A specific complaint that does not fall in the above categories about the Oklahoma City Community College PTA Program should be sent directly to the [Dean of Health Professions](#). The contact information is listed below.

#### Dean of Health Professions

Phone: 405/682-1611, Ext. 7138

Email:

If a student has a complaint related to the accreditation of OCCC PTA Program, he/she may contact the Commission on Accreditation of Physical Therapy Education.

Commission on Accreditation in Physical Therapy Education (CAPTE),

1111 North Fairfax Street

Alexandria, Virginia 22314

telephone: 703-706-3245;

email: [accreditation@apta.org](mailto:accreditation@apta.org);

website: <http://www.capteonline.org>

#### Establishing Good Relationships with Faculty

1. Please address the faculty members by "Professor, last name" or Dr, last name (if he/she has a doctorate degree)
2. Schedule appointments with both academic and clinical faculty. Leave voice or e-mail messages and give faculty an opportunity to call you back. Please do not expect questions to be answered via text message. Don't expect immediate attention at times that are convenient for you to drop by. Observe academic faculty office hours and realize that you may also have access to faculty by appointment at other times.
3. Both academic and clinical faculty members are busy people with multiple other responsibilities. Give the faculty member the opportunity to hear your concern, interest or problem with the time and attention that it deserves. Don't put off talking about a problem; small concerns often mushroom and escalate in a short period of time.
4. Communicate directly with faculty, not through another faculty member, staff member or student. Faculty members may not get the message. They also may not disclose key information to other students or faculty in respect for your privacy and confidentiality.

#### Responsibilities of the Student:

1. Come to class: You cannot learn about physical therapy from a book alone. This is a hands-on profession. Classes require your participation. The ultimate obligation to the patients requires that students learn as much as they can. Capitalize on the expertise that the professors and clinical instructors have to offer.
2. Dress appropriately: Professional attire is required when involved with patients, clinical sites and/or guest speakers. Self-presentation is critical to the reception by patients, faculty and colleagues.
3. Prepare for and participate in class: Read the material assigned. The instructors will assume that students have completed the material and may not cover it in class.

Remember that questions help classmates as well, but also remember that students should direct questions towards areas of confusion, rather than a general lack of knowledge.

4. Keep up: Budget time for studying so that students do not fall behind. Prioritize commitments and realize how much time/energy each requires. Organize class and assignment schedule on a calendar that is handy for reference.
5. Be active: Participate in meetings, special events, committees. Be willing to volunteer and work with members of the program on fundraisers, community service opportunities, professional association opportunities, etc.
6. Give feedback: Give opinions, compliments and criticisms, in a responsible way. Students may make individual appointments with faculty to make views known.
7. Communicate: Leave phone messages with faculty if missing a class. In the event of personal or family difficulties, communicate this BEFORE it causes missing class or assignments. Also develop good communication with classmates, friends and family.
8. Appropriate Email Communications: Always consider emails as professional communication. Use complete sentences. Do not use texting shortcuts. Address emails to the recipient (Professor \_\_\_”) and sign at the bottom with student’s name/credentials.
9. Be prompt: Arrive at class, meetings, and clinical sites on time. This is not only common courtesy, but also required of a physical therapist assistant.
10. Stay healthy and take care of yourself: Watch diet, sleep, exercise. Practice stress management techniques. Identify and use a support system.
11. Be courteous: Even under times of stress, treat others as one wishes to be treated.
12. Be responsible for yourself: PTA students are adult learners and expected to manage life events/activities. Handle problems/concerns in a responsible manner.

**Failure to comply with the Student Responsibilities may result in the student being placed on Professional Probation.**

## **AMERICAN PHYSICAL THERAPY ASSOCIATION**

The APTA is the national organization that is committed to serving physical therapists and physical therapist assistants by providing valuable information concerning physical therapy practice, trends, and issues. The APTA helps advance the profession by providing and setting standards, promoting research, and encouraging diversity. The profession is actively represented in federal and state legislatures by the APTA, thus playing a vital role in the establishment of laws which affect physical therapy.

By joining the APTA, the member receives great benefits including: Rehabilitation Reference Center at PT Now; Financial Solutions Center (helps refinance student loans), Career Starter Dues (50% discount for first year after graduation), APTA in Action (advocacy, clinical practice, clinical education, public awareness), Evidence-Based Practice Tools (Guide to PT Practice 3.0, Physical Therapy Journal, Physical Therapy Outcomes Registry, PT Now Database), News and Information (PT in Motion, Perspectives, Friday Focus, the Pulse Blog for students), Payment Resources and Discount and Value Programs.

Student members have access to scholarships, awards and grants and also benefit from essential resources from the APTA's online store. The Pulse is a blog for students. Other resources include the employment page for students and networking opportunities.

Membership in the professional association is expected. Applications are available from the Program Director, through APTA via phone #1-800-999-2782 ext 3395 Monday –Friday 8:30am-6:00pm ET, or on-line at [memberservices@apta.org](mailto:memberservices@apta.org).

## **OKLAHOMA PHYSICAL THERAPY ASSOCIATION**

When joining the APTA, one becomes a member of the Oklahoma Chapter of the American Physical Therapy Association (OPTA). As an OPTA member, one is eligible to use the OPTA's job bank and attend the yearly meetings at a reduced tuition rate. The state is divided into an Eastern and Western District. Each district sponsors, at least, four local meetings per year. The chapter sponsors an annual meeting each spring. Please see the website [www.okpt.org](http://www.okpt.org) for membership information.

## **DEFINITION OF THE PHYSICAL THERAPIST ASSISTANT**

The physical therapist assistant is a licensed technically educated health care provider who is a graduate of PTA Program accredited by an agency recognized by the Commission on Accreditation for Physical Therapy Education (CAPTE) or approved successor organization, and who performs selected physical therapy procedures and related tasks under the direction and supervision of a physical therapist.

\*Oklahoma Administrative Code Title 435. Chapter 20: Physical Therapists and Assistants. (9/12/16)

## **DIRECTION AND SUPERVISION OF THE PHYSICAL THERAPIST ASSISTANT**

Physical therapists have a responsibility to deliver services in ways that protect the public safety and maximize the availability of their services. They do this through direct delivery of services in conjunction with responsible utilization of physical therapist assistants who assist with specific components of intervention. The physical therapist assistant is the only individual

permitted to assist a physical therapist in selected interventions under the direction and supervision of a physical therapist.

Direction and supervision are essential in the provision of quality physical therapy services. The degree of direction and supervision necessary for assuring quality physical therapy services is dependent upon many factors, including the education, experiences, and responsibilities of the parties involved, as well as the organizational structure in which the physical therapy services are provided.

Regardless of the setting in which the service is given, the following responsibilities must be borne solely by the physical therapist:

1. Interpretation of referrals when available.
2. Initial examination, evaluation, diagnosis, and prognosis.
3. Development or modification of a plan of care which is based on the initial examination or reexamination and which includes the physical therapy goals and outcomes.
4. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render physical therapy interventions and when it may be appropriate to utilize the physical therapist assistant. A physical therapist shall determine the most appropriate utilization of the physical therapist assistant that provides for the delivery of service that is safe, effective and efficient.
5. Reexamination of the patients/clients in light of their goals, and revision of the plan of care when indicated.
6. Establishment of the discharge plan and documentation of discharge summary/status.
7. Oversight of all documentation for services rendered to each patient/client.

The physical therapist remains responsible for the physical therapy service provided when the physical therapist's plan of care involves the physical therapist assistant to assist with selected interventions. Regardless of the setting in which the service is provided, the determination to utilize physical therapist assistants for selected interventions requires the education, expertise, and professional judgment of a physical therapist as described by the *Standards of Practice, Guide to Professional Conduct* and *Code of Ethics*.

**DIRECTION AND SUPERVISION OF THE PHYSICAL THERAPIST ASSISTANT HOD P06-05-18-26**  
[Amended HOD 06-00-16-27; HOD 06-99-07-11; HOD 06-96-30-42; HOD 06-95-11-06; HOD 06-93-08-09; HOD 06-85-20-41; Initial HOD 06-84-16-72/HOD 06-78-22-61/HOD 06-77-19-37] [Position]

## STANDARDS OF ETHICAL CONDUCT

### Standards of Ethical Conduct for the Physical Therapist Assistant

HOD S06-09-20-18 [Amended HOD S06-00-13-24; HOD 06-91-06-07; Initial HOD 06-82-04-08] [Standard]



#### Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients/clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive.

#### Standards

**Standard #1:** Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.

- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapy services.

**Standard #2:** Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

- 2A. Physical therapist assistants shall act in the best interests of patients/clients over the interests of the physical therapist assistant.
- 2B. Physical therapist assistants shall provide physical therapy interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapist assistants shall provide patients/clients with information regarding the interventions they provide.
- 2D. Physical therapist assistants shall protect confidential patient/client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

**Standard #3:** Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.

- 3A. Physical therapist assistants shall make objective decisions in the patient's/client's best interest in all practice settings.
- 3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapy interventions.
- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient/client values.
- 3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.
- 3E. Physical therapist assistants shall provide physical therapy services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient/client status requires modifications to the established plan of care.

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

- 4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees).
- 4C. Physical therapist assistants shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

- 4D. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the supervising physical therapist and the appropriate authority, subject to law.
- 4E. Physical therapist assistants shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
- 4F. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.

**Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.**

- 5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient/client safety.
- 5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.**

- 6A. Physical therapist assistants shall achieve and maintain clinical competence.
- 6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.
- 6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

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

- 7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.
- 7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.
- 7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.
- 7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients/clients.

**Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.**

- 8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.
- 8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapy services.
- 8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

# Code of Ethics for the Physical Therapist

HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17;  
HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27;  
Initial HOD 06-73-13-24] [Standard]



## Preamble

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

## Principles

**Principle #1:** Physical therapists shall respect the inherent dignity and rights of all individuals.  
(Core Values: *Compassion, Integrity*)

- 1A. Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

**Principle #2:** Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.  
(Core Values: *Altruism, Compassion, Professional Duty*)

- 2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.
- 2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
- 2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

- 2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.
- 2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

**Principle #3:** Physical therapists shall be accountable for making sound professional judgments.  
(Core Values: *Excellence, Integrity*)

- 3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
- 3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
- 3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.
- 3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.
- 3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.



**Principle #4:** Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public.

*(Core Value: Integrity)*

- 4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients/clients, students, supervisees, research participants, or employees).
- 4C. Physical therapists shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.
- 4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.
- 4E. Physical therapists shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.
- 4F. Physical therapists shall not harass anyone verbally, physically, emotionally, or sexually.

**Principle #5:** Physical therapists shall fulfill their legal and professional obligations.

*(Core Values: Professional Duty, Accountability)*

- 5A. Physical therapists shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.
- 5C. Physical therapists involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapists shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapists who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.
- 5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

**Principle #6:** Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.

*(Core Value: Excellence)*

- 6A. Physical therapists shall achieve and maintain professional competence.

6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, health care delivery, and technology.

6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.

6D. Physical therapists shall cultivate practice environments that support professional development, lifelong learning, and excellence.

**Principle #7:** Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society.

*(Core Values: Integrity, Accountability)*

- 7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.
- 7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.
- 7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.
- 7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.
- 7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.
- 7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

**Principle #8:** Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally.

*(Core Value: Social Responsibility)*

- 8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.
- 8C. Physical therapists shall be responsible stewards of health care resources and shall avoid overutilization or underutilization of physical therapy services.
- 8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.



## **CONSENT FORMS**



**OKLAHOMA CITY COMMUNITY COLLEGE**  
**DIVISION of HEALTH PROFESSIONS/PTA PROGRAM**  
**STUDENT ETHICAL PRACTICE AGREEMENT**

The PTA Program within the Division of Health Professions of Oklahoma City Community College is committed to educating competent and responsible health care practitioners. To reach this end, students are required to take part in practical learning experiences in facilities in the community, provide services to clients in all stages of health and illness, and interact with other professionals, students and the general public. In furthering this commitment, the PTA Program and the Division of Health Professions has established this student ethical practice agreement as a guide to appropriate conduct.

I agree to:

1. Observe all health and safety procedures when working with patients/clients and equipment whether in class, clinic, hospital or homes. I shall not endanger the safety, general health and welfare of patients, clients, other students, faculty or staff.
2. Observe all policies and procedures established by facilities to which I am assigned.
3. Respect the patients/clients' rights and confidentiality of patient information regardless of source. I shall not repeat information outside of the classroom, clinic, hospital or facility. I shall make written reports only for class and assigned facility's purpose, and in such reports only the patient's or staff member's initials shall be used.
4. Work in cooperation with and respect for other team members. I shall not interfere with or obstruct the rendering of services provided by others.
5. Protect the property and property rights of the patient/client, colleagues, faculty, staff and facility.
6. Represent my competence accurately and function within its perimeters. I shall not attempt procedures in which I have not demonstrated competency under supervision.
7. Treat the patient/client with consideration and respect.
8. Respect the values and cultural differences of all people and exhibit no discrimination of race, color, ethnic or national origin, sex, sexual orientation, gender identity, gender expression, religion, age, ancestry, disability, genetic information, military status or veteran status.
9. Never make use of any relationships with patients/clients, clinical instructors or faculty and staff for personal gain or accept gifts of substantial value.
10. Demonstrate respect for authority and commitment to learning by modifying behavior in response to feedback.
11. Handle personal and/or professional problems so they do not interfere with the performance of clinical duties.
12. Never attend a class or fieldwork assignment under the influence of any substance, legal or illegal that impairs my ability to function and exhibit good judgment.

Revised July 2018/Reviewed July 2019

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**OKLAHOMA CITY COMMUNITY COLLEGE**  
**DIVISION of HEALTH PROFESSIONS/PTA PROGRAM**  
**UNACCEPTABLE STUDENT CONDUCT DURING PRACTICUM PLACEMENTS**

Assignment of students to practicum facilities is dependent on the willingness of the facility to accept a student at a specified time. Practicum placement is not guaranteed with enrollment. A student is a guest in the facility to which he/she is assigned; consequently, if the student's behavior or performance in any way disrupts patient services at the facility, the preceptor or faculty may immediately terminate the student's placement. The standard agreement between Oklahoma City Community College and the practicum facility states:

"If a conflict arises between an employee of the Facility, on the one hand, and an Instructor or Student, on the other hand, the Clinical Instructor and Facility Coordinator shall intervene in an attempt to resolve the matter. The Facility may require that the School immediately remove a Student or Instructor from a Clinical Rotation when the Facility believes that the individual exhibits inappropriate behavior, is disruptive, does not comply with Facility rules or policies, or poses a threat to the health, safety or welfare of a patient, employee or any other person. In addition, upon receipt of the Roster or at any time after a Clinical Rotation begins, the Facility may refuse to allow any Student or Instructor to participate in the Clinical Rotation if the individual has an unfavorable record with the Facility from previous employment, another clinical rotation or any other reason." Clinical Rotation Agreement Section 5 Conflicts and Removal of Students or Instructors.

One more of the following actions or like actions by a student may be grounds for immediate termination by the Academic Coordinator of Clinical Education and/or Program Director.

- Behavior that creates a threat to the welfare of the patient/client and/or staff
- Behavior that creates a threat to the facility to which the student is assigned.
- Behavior that threatens the continued relationship between the college and the facility.
- Violation of patient confidentiality.
- Failure to adhere to facility policy and/or procedures
- Repeated failure to follow instructions.
- Arguing with the supervisor.
- Use of profane, abusive, or vulgar language.
- Refusal to follow attendance procedures.
- Failure to follow attendance procedures.
- Misrepresentation of personal competency level.
- Failure to alter behavior after constructive feedback from supervisor.

If the student is dismissed or fails the practicum, he/she will be allowed one (1) opportunity to repeat this practicum experience. If the student is dismissed or fails the second (originally scheduled) practicum, he/she will repeat both practicums the following academic year pending facility availability. If the student is dismissed or fails, a re-scheduled makeup practicum, he/she will be terminated from the PTA program.

If the decision of the Program Director is unacceptable to the student, the next step may be in one of two directions. If the action against the student was for academic reasons, the student should schedule a meeting with the Dean of Health Professions to present his/her appeal. If the action was for disciplinary reasons, the student contacts the Vice President for Student Services to initiate the Student Grievance Procedure.

These grievance procedures are outlined in the current edition of the OCCC Student Handbook.

I acknowledge I have read and agreed to abide by these standards.

Revised July 2018/Reviewed July 2019

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date





## INFORMED CONSENT TO PARTICIPATE IN PTA LABORATORY

I, \_\_\_\_\_, understand that I will expose my body at times, with appropriate draping to promote modesty, during the course of study in the Physical Therapist Assistant Program. I will touch classmates and they will touch me as we learn how to perform therapeutic skills and procedures.

I agree to act professional at all times in displaying an attitude of respect while maintaining the modesty and integrity of my classmates and teachers in the classroom and laboratory. I can expect to be treated in this manner by my peers and faculty.

I agree to use the equipment that I have been instructed to use during laboratory time and open lab time. I will put safety for my patients and simulated patients, myself, and the equipment first when interacting in lab.

I agree to be video/audio taped for the purpose of self-assessment and reflection on my performance (as a student PTA and as a patient) during formal presentations, skills checks and comprehensive skills checks.

I agree that these videos will not be displayed on YouTube, Facebook, Instagram or any other social media without my authorized consent.

I agree to adhere to open lab rules, including only practicing with electrical equipment with direct supervision of faculty/lab assistants. (prior to successful skills assessment).

Name: \_\_\_\_\_ Date: \_\_\_\_\_



## **INFORMED CONSENT REGARDING LICENSURE/EMPLOYMENT**

I have been informed by the Program Director that although I may successfully complete the Physical Therapist Assistant Associate Degree at Oklahoma City Community College, licensure and/or employment may be denied if I have ever been convicted of any federal or state law excepting any misdemeanor, traffic law or municipal ordinance. I understand that a detailed criminal background check will occur in order to attend the Physical Therapist Assistant Program and apply for licensure.

I have been informed by the Program Director that a random drug screen will occur in the semesters prior to clinical assignment and that failure to participate in the drug test as well as any "non-negative" sample is grounds for dismissal from the Physical Therapist Assistant Program. Non-negative samples can be the result of taking a prescribed medication for someone other than the student. At the time of the sample, the student will be asked to furnish a list of all medications that he or she is taking as well as consent to contact the pharmacy/doctor who wrote the prescription. If the medication is not currently prescribed, a non-negative test will be the result if the medication is found in the system.

I understand that information regarding my performance/abilities as a student in this program may be shared with clinical faculty with consent provided by the student, and that some clinical internship sites require specific orientations, drug-screens etc.

I understand that individuals seeking licensure/employment as a PTA must successfully pass a national board examination and that graduation from an accredited PTA Program does not guarantee employment.

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_



OKLAHOMA CITY COMMUNITY COLLEGE  
PHYSICAL THERAPIST ASSISTANT PROGRAM

Informed Consent Program Participation

I \_\_\_\_\_ wish to be a participant in the Physical Therapist Assistant Program at Oklahoma City Community College.

I understand that the program will include academic, laboratory and clinical work performed in the classroom, laboratory, hospital or other clinical/academic facilities and will include direct care or exposure to client/patients with a variety of illnesses and diseases. I understand that I may be exposed to disease carrying bacteria and organisms or substances used to kill these organisms.

I understand that as a student in the program, I consent to participate in human subject demonstration and studies in the classroom, laboratory and clinical facilities as part of the educational process. Participation in said activities necessitates the wearing of appropriate and specific clothing. Laboratory clothing for males includes shorts, T-shirts and males will be asked to expose their upper torso; females need shorts, T-shirts and a sports bra or halter that fastens in the back. This may include video/audiotaping of the performance, both as a student PTA and as a patient, to be used for assessment and self-assessment purposes.

I understand that I am responsible for my own transportation to and from academic and clinical experiences/assignments and that out of town travel or residence may be necessary to complete clinical education. I also understand that attendance, being on time and participation is extremely important and expected at all times. Clinical attendance is mandatory and all absences are considered unexcused.

I understand that I must maintain good health and notify the school of any physical or mental limitations/problems that may affect my performance and possibly endanger the safety of those around me. I must submit proof of required immunizations, a **yearly** negative examination for Tuberculosis (TB), evidence of current "Health Care Provider" level CPR certification, a negative drug screen, and a detailed criminal background check. I also understand that if requested by the school, I must provide a medical release from my physician to resume the program. **This is required for pregnancy.**

I understand that I must be able to interact effectively and build relationships with all individuals including, but not limited to, classmates/peers, program faculty, clinical faculty, patients/clients, families and/or caregivers.

I understand the physical and cognitive requirements of this program to be strenuous. I must be able to meet the following *Essential functions*:

1. Read, write and spell at the collegiate level
2. Demonstrate common sense, problem solving abilities, and sound judgment
3. Communicate effectively verbally and in writing
4. Stand for 8 hours
5. Sit for 8 hours
6. Perform skills requiring manual dexterity, fingering and feeling
7. Maintain good standing balance on all surfaces
8. Administer manual exercises
9. Perform skills requiring constant walking
10. Make simple mechanical adjustments and repairs of therapy equipment
11. Safely transfer patients from all surfaces
12. Measure vital signs
13. Lift up to 50# frequently
14. Lift up to 150# occasionally
15. Squat, stoop, kneel and/or crawl
16. Transport patients with wheelchairs and carts by pushing and pulling
17. Achieve "Health Care Provider" level CPR
18. Educate patients and other consumers of physical therapy
19. Responds/performs appropriately in the event of unexpected and/or stressful situations

I understand that I will have online access to the OCCC Physical Therapist Assistant Program Student Handbook at the beginning of each fall semester. I must adhere to all rules and regulations of the school and clinical sites, as well as, behaviors pursuant to the APTA Standards of Ethical Conduct for the Physical Therapist Assistant, the APTA Values Based Behaviors for the Physical Therapist Assistant and the Generic Abilities as described in the OCCC PTA Student Handbook.

In consideration of being permitted to participate in the Physical Therapist Assistant Program, I understand that it is my responsibility to seek academic accommodation services. The faculty may be able to accommodate me if a formal request is made and official certification of the disability is completed through the Office of Services to Students with Disabilities.

I hereby certify that I have read the entire document, I am fully familiar with the contents of this document and I fully understand its terms. Any questions that I have about this program and the contents of this document have been fully explained to my satisfaction. I am over 18 years of age.

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

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(If student is a minor)

**FREQUENTLY CALLED NUMBERS:**

Bookstore	682-1611 x7510
Bursar's Office	682-1611 x7825
Campus Police	682-1611 x7872
Health Professions Division Office	682-7507
Student Financial Support Services	682-1611 x7525
Library	682-1611 x7564
Graduation, Employment and Transfer Services	682-1611 x7519
Student Life	682-1611 x7523
Test Center	682-1611 x7321

**2019-2020 Academic Calendar  
Oklahoma City Community College**

8/19/2019	Classes Begin
9/2/2019	Labor Day Holiday
10/17-19/2019	Fall Break
11/26-29/2019	Thanksgiving Break
12/14/2019	End of Semester
1/6-16/2020	Intercession (Clinical Anatomy)
1/21/2020	Classes Begin
3/16-20/2020	Spring Break
5/8/2020	Graduation
5/16/2020	End of Semester





## **APPENDICES**



## **A. Emergency Procedures**



## Oklahoma City Community College Division of Health Professions Incident and Exposure Notification Policy/Procedure (suspected or known)

® May 2019

The following procedures should be followed if a student has an incident, receives a needle stick or exposure to blood or body fluids during lab, clinical, fieldwork, field internship, or any other educational site.

### INITIAL NOTIFICATION

The student should immediately inform their clinical instructor / staff at the facility where the event occurred. That individual will provide direction of the following:

a. If the event occurs on campus, the faculty/staff will direct student to the Clinical Affiliation Compliance Administrator (CACA) / Division Insurance Coordinator within **48 hours**. The CACA will forward documentation of event to Risk Management/Legal Counsel for record.

b. If the event occurs off campus and there is an OCCC fulltime faculty, clinical instructor, or preceptor on site, the student should notify that individual immediately. The student and instructor/preceptor will each document his/her knowledge of the events. No patient names may be used. Include the date, area of the facility (if applicable), time, and patient identification number if available. This documentation will be forwarded to the CACA / Division Insurance Coordinator **within 48 hours**. The CACA will forward documentation of the event to Risk Management / Legal Counsel for record.

c. If the event occurs off campus and there is no OCCC fulltime faculty, clinical instructor or preceptor on site, the student should notify the person at the facility who is overseeing their clinical experience. The student will document his/her knowledge of the events. No patient names may be used. Include the date, area of the facility (if applicable), time, and patient identification number if available. This documentation will be forwarded to the CACA / Division Insurance Coordinator **within 48 hours**. The CACA will forward documentation of the event to Risk Management / Legal Counsel for record.

### TREATMENT

1. **During the clinical shift in which the incident / exposure occurred:** a. the student should have baseline blood work drawn and/or baseline tests performed at the clinical site if the facility has that capability OR

b. the student should report to their personal physician, a clinic, or a hospital of choice for treatment.

c. If the student does not have a personal physician or preference where they acquire treatment, the student may report to one of the following St. Anthony HealthPlex locations noted below to have a baseline bloodwork drawn and/or baseline tests performed.

HealthPlex East	3400 S. Douglas Blvd	405-272-2821
HealthPlex Mustang	201 South Sara Rd	405-578-3200
HealthPlex North	13401 N. Western	405-252-3422
HealthPlex South	13500 South Tulsa Dr.	405-713-2621
St. Anthony North Urgent Care	6201 N. Santa Fe, Ste 1010	405-772-8687

**Oklahoma City Community College Division of Health Professions Incident and Exposure Notification Policy/Procedure (suspected or known)**

® May 2019

**TREATMENT (cont'd.)**

d. For all follow up treatment (regardless of where the initial treatment transpired), the student may report to one of the St. Anthony Health Plex locations noted under “TREATMENT – 1.c.”

**e. The student must obtain a copy of the report from the clinic, personal physician or the ER Report to include Diagnosis and Treatment Codes at the time of service.**

2. It is the student’s responsibility to follow this procedure and to continue follow up blood work and/or tests per medical direction.

**BILLING**

1. The student will use their personal health insurance initially, followed by the Student Liability Insurance Plan. If a student does not possess personal health insurance, the Student Liability Insurance covers the student for accidents to and from clinical, as well as on site.

2. Billing will be sent directly to the student. Once received, the student shall contact the CACA **within 48 hours** to schedule an appointment. During this appointment, the student will be asked to provide the billing received and to verify appropriate claim forms and any other required documents. The student shall also provide (if not already on file) the ER report containing diagnosis and treatment codes. The student should read the report carefully, checking dates, times, etc., because this legal document could impact future legal matters.

3. It is the student’s responsibility to follow this procedure and to follow up with the CACA to ensure billing is processed / paid in a timely matter.

**Note:** In the event of exposure to an infectious disease that needs follow up from students or clinical faculty the clinical site will contact the individuals involved.

## **Division of Health Professions Evacuation Procedure**

When the Division is notified to evacuate by IP phone, the following will occur:

- Everyone should leave the Health Professions Center and proceed outward until they have at least gone to Faculty Loop Drive.
- Faculty in classrooms/labs will advise students to take all of their possessions with them. Classrooms should be locked.
- The Division Assistant will take her belongings with her and go downstairs to ensure that the following areas are cleared: HP computer lab, EMS Lab, ADL Lab, OTA Lab and PTA Lab. In her absence the HP Program Support Assistant will take on these duties.
- The Division Secretary will take her belongs with her and go downstairs to ensure that the following areas are cleared: Nursing Lab, Nursing Lab Extension, and the Nursing Computer Lab.
- No one will return to the HPC until Campus Police have provided an all clear.

## SAFETY AND SECURITY EMERGENCY PROCEDURES

The health and safety of all our students, faculty, and staff are OCCC's prime concern. The procedures outlined below are designed to deal with emergencies of various types. Students should always follow the lead of their instructors.

### Fire

First notification will come from the fire alarm horns, sirens, and strobes. The class should gather their belongings, exit the building using the nearest exit, and move to a parking lot. *Do not use the elevators.* No alarm should be treated as a false alarm. Horns, sirens, and strobes are only used for fire alarms.

### Fire (Special Considerations)

If someone in your area is not physically capable of descending the stairwell, please ensure that they remain in the "area of safe refuge" located just inside each upper-level enclosed first stairwell. There are emergency phones located near each of these areas.

### Medical

For all medical related issues push the "emergency" button located on each classroom phone. The phone will display your room number, allowing for fast response to your location. All security officers are trained as first responders and will assist in guiding EMSA to your location. Treat all bodily fluids as if they were contaminated.

### Bomb

If you receive a bomb threat, document as much information as possible and push the "emergency" button on the phone. If the decision to evacuate is given, the phone will *sound* an alarm and *display* a text message. The class should gather their belongings, exit the building using the nearest exit, and move to an open grassy area. Please turn off *all* wireless devices. (Cell phones, radios, laptops, and other portable devices.)

### Weather

Tornado warnings that include OCCC will be sent directly to the classroom phone. The phone will *sound* an alarm and *display* a text message. The class should gather their belongings, move away from exterior glass and exits, and move to safer areas. These areas are lower-level interior classrooms, restrooms, and stairwells. You should familiarize yourself with the safer areas near your classroom(s). If the city/county sirens are sounding and OCCC is *not* in the warning area a message will be sent to the classroom phone advising this information.

### Disturbance/Threats

If someone is causing a disturbance in a classroom call security immediately. Push the "emergency" button located on each classroom phone. Distance yourself from that person, do not place yourself in the person's exit path and remove all potential weapons from the area. **Shelter in place:** If there is an armed person or shooter on campus: Close and lock your hallway doors. Turn off the lights, shut the blinds or move away from exposed areas. Use desks, tables and other objects to provide protection. Updated information will be sent to the classroom phone.





## **B. Generic Abilities/Professional Behaviors**



## **Oklahoma City Community College PTA Program Generic Abilities/Professional Behaviors**

The Generic Abilities were developed by the Physical Therapy Program at the University of Wisconsin-Madison and were published by May, et al, in the Journal of Physical Therapy Education Volume 9, Number 1 in the Spring of 1995. These 10 characteristics were reviewed in 2010 and updated to be called Professional Behaviors.

The OCCC PTA Program uses this as a tool to assess professionalism of the physical therapist assistant student. Each student will complete a self assessment at the end of each semester and each faculty member will also complete an assessment of each of their students each semester. At the end of the second and fourth semesters of the Program, the Academic Coordinator of Education and the Program Director (respectively) will discuss the generic abilities/professional behaviors individually with each student. This is conducted in a setting like a performance appraisal on the job. The characteristics/behaviors are presented in this way to prepare the students for their clinical assignments in the third and fifth semesters.

The faculty believe it is important for each student to understand the importance of professionalism and to be confident within each of the ten areas of the Generic Abilities/Professional Behaviors. After the spring clinical internships, each student will complete the APTA Core Values (Appendix C) to re-examine these attributes and demonstrate professional development.

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the profession's core of knowledge and technical skills but are nevertheless required for success in the profession. Ten generic abilities were identified through a study conducted at UW-Madison in 1991-92. The ten abilities and definitions developed are:

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

*\*\*Developed by the Physical Therapy Program, University of Wisconsin-Madison  
May et al. Journal of Physical Therapy Education, 9:1, Spring 1995.*

**APPENDIX: LEVELS OF PROFESSIONAL BEHAVIOURS/GENERIC ABILITIES AND SAMPLE CRITERIA<sup>1</sup>**

Professional Behaviour/ Generic Ability	Beginning Level	Developing Level (builds on preceding levels)	Entry-level (builds on preceding levels)	Post-entry Level (builds on preceding levels)
<b>COMMITMENT TO LEARNING</b>	<ul style="list-style-type: none"> <li>* Identifies problems</li> <li>* Formulates appropriate questions</li> <li>* Identifies and locates appropriate resources</li> <li>* Demonstrates positive attitude (motivation) toward learning</li> <li>* Offers own thoughts and ideas</li> <li>* Identifies need for further information</li> </ul>	<ul style="list-style-type: none"> <li>* Prioritizes informational needs</li> <li>* Analyzes and subdivides large questions into components</li> <li>* Seeks out professional literature</li> <li>* Sets personal and professional goals</li> <li>* Identifies own learning needs based on previous experiences</li> <li>* Plans and presents an in-service, or research or case studies</li> <li>* Welcomes and/or seeks new learning opportunities</li> </ul>	<ul style="list-style-type: none"> <li>* Applies new information and re-evaluates performance</li> <li>* Accepts that there may be more than one answer to a problem</li> <li>* Recognizes the need for solutions to problems</li> <li>* Reads articles critically and understands limits of application to professional practice</li> <li>* Researches and studies areas where knowledge base is lacking</li> <li>* Demonstrates a commitment to life-long learning</li> </ul>	<ul style="list-style-type: none"> <li>* Questions conventional wisdom</li> <li>* Formulates and re-evaluates position based on available evidence</li> <li>* Demonstrates confidence in sharing new knowledge with all staff levels</li> <li>* Modifies programs and treatments based on newly-learned skills and considerations</li> <li>* Consults with others (e.g. in clinical setting, allied health professionals)</li> <li>* Acts as mentor in area of speciality for other staff</li> </ul>
<b>INTERPERSONAL SKILLS</b>	<ul style="list-style-type: none"> <li>* Maintains professional demeanor in all interactions</li> <li>* Demonstrates interest in others/ clients as</li> </ul>	<ul style="list-style-type: none"> <li>* Recognizes impact of non-verbal communication and modifies accordingly</li> <li>* Assumes responsibility for own actions</li> </ul>	<ul style="list-style-type: none"> <li>* Listens but reflects back to original concern</li> <li>* Works effectively with challenging people/clients</li> <li>* Responds effectively to</li> </ul>	<ul style="list-style-type: none"> <li>* Recognizes role as a leader</li> <li>* Builds partnerships with other professionals</li> <li>* Establishes mentor</li> </ul>

<p><b>individuals</b></p> <ul style="list-style-type: none"> <li>* Respects cultural and personal differences of others; is non-judgmental about others/clients= lifestyles</li> <li>* Honours the rights and dignity of all individuals</li> <li>* Communicates with others in a respectful, confident manner</li> <li>* Respects personal space of others/clients</li> <li>* Maintains confidentiality in all interactions</li> <li>* Demonstrates acceptance of limited knowledge and experience</li> </ul>	<ul style="list-style-type: none"> <li>* Motivates others to achieve</li> <li>* Establishes trust</li> <li>* Seeks to gain knowledge and input from others</li> <li>* Respects role of support staff</li> </ul>	<p>unexpected experiences or situations</p> <ul style="list-style-type: none"> <li>* Talks about difficult issues with sensitivity and objectivity</li> <li>* Delegates to others as needed</li> <li>* Approaches others to discuss differences in opinion</li> <li>* Accommodates differences in learning styles</li> </ul>	<p>relationships</p>
<p><b>COMMUNICATION SKILLS</b></p>	<ul style="list-style-type: none"> <li>* Utilizes non-verbal communication to augment verbal message</li> <li>* Restates, reflects and clarifies message</li> <li>* Collects necessary information from the client interview</li> </ul>	<ul style="list-style-type: none"> <li>* Modifies communication (verbal and written) to meet the needs of different audiences</li> <li>* Presents verbal or written message with logical organization and sequencing</li> <li>* Maintains open and constructive communication</li> </ul>	<ul style="list-style-type: none"> <li>* Demonstrates ability to write scientific research papers and grants</li> <li>* Fulfills role as client advocate</li> <li>* Communicates professional needs and concerns</li> <li>* Mediates conflict</li> </ul>

	<ul style="list-style-type: none"> <li>* Uses electronic communication appropriately (e.g., email, announcements)</li> <li>* Uses professional netiquette</li> <li>* Responds to requests from Instructors, Faculty Advisors, Program Director and staff in a timely manner</li> </ul>		<ul style="list-style-type: none"> <li>* Utilizes communication technology effectively</li> <li>* Dictates clearly and concisely (if a clinical expectation)</li> </ul>	
<b>EFFECTIVE USE OF TIME AND RESOURCES</b>	<ul style="list-style-type: none"> <li>* Focuses on tasks at hand without dwelling on past mistakes</li> <li>* Recognizes own resource limitations</li> <li>* Uses existing resources effectively</li> <li>* Uses unscheduled time efficiently</li> <li>* Completes assignments in timely fashion</li> </ul>	<ul style="list-style-type: none"> <li>* Sets up own schedule</li> <li>* Coordinates schedule with others</li> <li>* Demonstrates flexibility</li> <li>* Plans ahead</li> </ul>	<ul style="list-style-type: none"> <li>* Sets priorities and reorganizes as needed</li> <li>* Considers client=s goals in context of client, clinic, and third party resources</li> <li>* Has ability to say "No" when appropriate</li> <li>* Performs multiple tasks simultaneously and effectively, and delegates when appropriate or as needed</li> <li>* Uses scheduled time efficiently</li> </ul>	<ul style="list-style-type: none"> <li>* Uses limited resources creatively</li> <li>* Manages meeting time effectively</li> <li>* Takes initiative in covering for absent staff members</li> <li>* Develops programs and works on projects while maintaining case loads</li> <li>* Follows up on projects in timely manner</li> <li>* Advances professional goals while maintaining expected workload</li> </ul>
<b>USE OF CONSTRUCTIVE FEEDBACK</b>	<ul style="list-style-type: none"> <li>* Demonstrates active listening skills</li> <li>* Actively seeks feedback and assistance, as needed</li> </ul>	<ul style="list-style-type: none"> <li>* Assesses own performance accurately</li> <li>* Utilizes feedback when establishing pre-professional goals</li> </ul>	<ul style="list-style-type: none"> <li>* Seeks feedback from others/clients</li> <li>* Modifies feedback given to clients according to their learning styles</li> </ul>	<ul style="list-style-type: none"> <li>* Engages in non-judgmental, constructive problem-solving discussions</li> <li>* Acts as conduit for</li> </ul>

v. Aug. 9, 2007



	<ul style="list-style-type: none"> <li>* Demonstrates a positive attitude toward feedback</li> <li>* Critiques own performance</li> <li>* Maintains two-way communication</li> </ul>	<ul style="list-style-type: none"> <li>* Provides constructive and timely feedback when establishing pre-professional goals</li> <li>* Develops plan of action in response to feedback</li> </ul>	<ul style="list-style-type: none"> <li>* Reconciles differences with sensitivity</li> <li>* Considers multiple approaches when responding to feedback</li> </ul>	<ul style="list-style-type: none"> <li>* Weighs advantages</li> <li>* Participates in outcome studies</li> <li>* Contributes to formal quality assessment in work environment</li> <li>* Seeks solutions to community health-related problems</li> </ul>	<ul style="list-style-type: none"> <li>* feedback between multiple sources</li> <li>* Utilizes feedback when establishing professional goals</li> <li>* Utilizes self-assessment for professional growth</li> </ul>
<b>PROBLEM-SOLVING</b>	<ul style="list-style-type: none"> <li>* Recognizes problems</li> <li>* States problems clearly</li> <li>* Describes known solutions to problem</li> <li>* Identifies resources needed to develop solutions</li> <li>* Begins to examine multiple solutions to problems</li> </ul>	<ul style="list-style-type: none"> <li>* Prioritizes problems</li> <li>* Identifies contributors to problem</li> <li>* Considers consequences of possible solutions</li> <li>* Consults with others to clarify problem</li> </ul>	<ul style="list-style-type: none"> <li>* Implements solutions</li> <li>* Reassesses solutions</li> <li>* Evaluates outcomes</li> <li>* Updates solutions to problems based on current research</li> <li>* Accepts responsibility for implementation of solutions</li> </ul>	<ul style="list-style-type: none"> <li>* Demonstrates accountability for personal/ professional decisions</li> <li>* Treats clients within scope of expertise</li> <li>* Discusses role of physical therapy in health care</li> <li>* Keeps client as priority</li> <li>* Acts in leadership roles when needed</li> </ul>	<ul style="list-style-type: none"> <li>* Participates actively in professional organizations</li> <li>* Attends continuing education</li> <li>* Actively promotes the profession</li> <li>* Demonstrates leadership role in collaborative teams</li> <li>* Supports research</li> </ul>
<b>PROFESSIONALISM</b>	<ul style="list-style-type: none"> <li>* Abides by CPA Code of Ethics</li> <li>* Demonstrates awareness of licensure regulations</li> <li>* Abides by school/facility policies and procedures</li> <li>* Demonstrates a personal value system</li> <li>* Projects professional image</li> <li>* Attends professional</li> </ul>	<ul style="list-style-type: none"> <li>* Identifies positive professional role models</li> <li>* Discusses societal expectations of the profession</li> <li>* Acts on moral commitment</li> <li>* Involves other health care professionals in decision-making</li> <li>* Seeks informed consent from clients</li> </ul>	<ul style="list-style-type: none"> <li>* Demonstrates accountability for personal/ professional decisions</li> <li>* Treats clients within scope of expertise</li> <li>* Discusses role of physical therapy in health care</li> <li>* Keeps client as priority</li> <li>* Acts in leadership roles when needed</li> </ul>	<ul style="list-style-type: none"> <li>* Participates actively in professional organizations</li> <li>* Attends continuing education</li> <li>* Actively promotes the profession</li> <li>* Demonstrates leadership role in collaborative teams</li> <li>* Supports research</li> </ul>	<ul style="list-style-type: none"> <li>* feedback between multiple sources</li> <li>* Utilizes feedback when establishing professional goals</li> <li>* Utilizes self-assessment for professional growth</li> </ul>

	meetings * Demonstrates honesty, empathy, compassion, courage and continuous regard for all	<ul style="list-style-type: none"> <li>* Accepts responsibility for actions and outcomes</li> <li>* Provides safe and secure environment for clients</li> <li>* Offers and accepts help</li> <li>* Completes projects without prompting</li> </ul>	<ul style="list-style-type: none"> <li>* Directs clients to other health care professionals when needed</li> <li>* Delegates when needed</li> <li>* Encourages client accountability</li> <li>* Acknowledges and declares conflict of interest, and withdraws from when necessary</li> </ul>	<ul style="list-style-type: none"> <li>* Orients and instructs new employee/students</li> <li>* Promotes clinical education</li> <li>* Accepts role as team leader</li> <li>* Facilitates responsibility for program development and modification</li> </ul>
<b>RESPONSIBILITY</b>	<ul style="list-style-type: none"> <li>* Demonstrates dependability</li> <li>* Demonstrates punctuality</li> <li>* Follows through on commitments</li> <li>* Recognizes own limits</li> </ul>	<ul style="list-style-type: none"> <li>* Examines ideas</li> <li>* Understands scientific method</li> <li>* Formulates new ideas</li> <li>* Seeks alternative ideas</li> <li>* Formulates alternative hypotheses</li> <li>* Critiques hypotheses and ideas</li> </ul>	<ul style="list-style-type: none"> <li>* Exhibits openness to contradictory ideas</li> <li>* Assesses issues raised by contradictory ideas</li> <li>* Justifies solutions selected</li> <li>* Determines effectiveness of applied solutions</li> </ul>	<ul style="list-style-type: none"> <li>* Distinguishes relevant from irrelevant data</li> <li>* Identifies complex patterns of associations</li> <li>* Demonstrates beginning intuitive thinking</li> <li>* Distinguishes when to think intuitively vs. analytically</li> <li>* Recognizes own biases and suspends judgmental thinking</li> <li>* Challenges others to think critically</li> </ul>
<b>CRITICAL THINKING</b>	<ul style="list-style-type: none"> <li>* Raises relevant questions</li> <li>* Consider all available information</li> <li>* States the results of scientific literature</li> <li>* Recognizes gaps in knowledge base</li> <li>* Articulates ideas</li> </ul>			

<p><b>STRESS MANAGEMENT</b></p>	<ul style="list-style-type: none"> <li>* Recognizes own stressors or problems</li> <li>* Recognizes distress or problems in others</li> <li>* Seeks assistance as needed</li> <li>* Maintains professional demeanor in all situations</li> </ul>	<ul style="list-style-type: none"> <li>* Maintains balance between professional and personal life</li> <li>* Demonstrates effective affective responses in all situations</li> <li>* Accepts constructive feedback</li> <li>* Establishes outlets to cope with stressors</li> </ul>	<ul style="list-style-type: none"> <li>* Prioritizes multiple commitments</li> <li>* Responds calmly to urgent situations</li> <li>* Tolerates inconsistencies in health-care environment</li> </ul>	<ul style="list-style-type: none"> <li>* Recognizes when problems are unsolvable</li> <li>* Assists others in recognizing stressors</li> <li>* Demonstrates preventative approach to stress management</li> <li>* Establishes support network for self and clients</li> <li>* Offers solutions to the reduction of stress within the work environment refined and expanded</li> </ul>
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<sup>1</sup> Adapted from: The Physical Therapy Program, University of Wisconsin-Madison. May WW, Morgan BM, Lemke JC, Karst GM, Stone IL. Model for ability-based assessment in physical therapy education. *Journal of Physical Therapy Education*, 1995;9:3-6; and, B.Sc.P.T. Student policy 5.2 *School of Physical Therapy: Professional Behaviour Guidelines*

**GENERIC ABILITIES  
STUDENT ASSESSMENT/COUNSELING FORM**

Student Name: \_\_\_\_\_ Semester: \_\_\_\_\_

<b>Generic Ability</b>	<b>Behavioral Level</b>	<b>Comments</b>
1. Commitment to Learning	_____	_____
2. Interpersonal Skills	_____	_____
3. Communication Skills	_____	_____
4. Effective Use of Time and Resources	_____	_____
5. Use of Constructive Feedback	_____	_____
6. Problem-Solving	_____	_____
7. Professionalism	_____	_____
8. Responsibility	_____	_____
9. Critical Thinking	_____	_____
10. Stress Management	_____	_____

Overall Comments:

\_\_\_\_\_  
Student Signature/Date

\_\_\_\_\_  
Faculty Signature/Date

\*Key: B = Beginning Level Performance D = Developing E = Entry



## **C. APTA Core Values**



## **Core Values for the Physical Therapist and Physical Therapist Assistant**

(HOD P06-18-25-33)

The core values guide the behaviors of physical therapists (PTs) and physical therapist assistants (PTAs) to provide the highest quality of physical therapist services. These values imbue the scope of PT and PTA activities. The core values retain the PT as the person ultimately responsible for providing safe, accessible, cost-effective, and evidence-based services; and the PTA as the only individual who assists the PT in practice, working under the direction and supervision of the PT. The core values are defined as follows:

### **Accountability**

Accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant including self-regulation and other behaviors that positively influence patient and client outcomes, the profession and the health needs of society.

### **Altruism**

Altruism is the primary regard for or devotion to the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist's or physical therapist assistant's self-interest.

### **Collaboration**

Collaboration is working together with patients and clients, families, communities, and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner's respective role, to achieve optimal physical therapist services and outcomes for patients and clients.

### **Compassion and Caring**

Compassion is the desire to identify with or sense something of another's experience; a precursor of caring. Caring is the concern, empathy, and consideration for needs and values of others.

### **Duty**

Duty is the commitment to meeting one's obligations to provide effective physical therapist services to patients and clients, to serve the profession, and to positively influence the health of society.

### **Excellence**

Excellence is the provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embraces advancement, and challenges mediocrity.

### **Integrity**

Integrity is the steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions.

### **Social Responsibility**

Social responsibility is the promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.

**RC 32-19 Amend: Core Values for the Physical Therapist (HOD P06-18-25-33)**





## **D. Minimum Required Skills of a Physical Therapist Assistant**



## **MINIMUM REQUIRED SKILLS OF PHYSICAL THERAPIST ASSISTANT GRADUATES AT ENTRY-LEVEL**

**BOD G11-08-09-18** [Guideline]

### **Background**

In August 2007, 30 member consultants convened in Alexandria, VA for a consensus conference. The primary purpose of the conference was to achieve agreement on the minimum required skills for every graduate from a physical therapist assistant program to be able to perform on patients/clients that include, but are not limited to, the skill set required by the National Physical Therapy Examination (NPTE) for physical therapist assistants (PTAs).

Assumptions that framed the boundaries for the discussion during this conference included:

- (1) A minimum set of required skills will be identified that every graduate from a physical therapist assistant program can competently perform in the clinical environment.
- (2) Development of the minimum required skills will include, but not be limited to, the content blueprint for the physical therapist assistant licensure examination; put differently, no skills on the physical therapist assistant licensure blueprint will be excluded from the minimum required skills.
- (3) To achieve consensus on the minimum required skills, 90% or more of the member consultants must be in agreement.
- (4) The minimum required skill of the physical therapist assistant will not exceed that described for the physical therapist.
- (5) Those aspects of patient/client management that are not part of the scope of work of the physical therapist assistant are not addressed in this conference, i.e. examination, evaluation, diagnosis, prognosis, development of plan of care, re-examination, development of discharge plan.

Minimum skills were defined as foundational skills that are indispensable for a new graduate physical therapist assistant to perform on patients/clients in a competent and coordinated manner under the direction and supervision of the physical therapist. Skills considered essential for any physical therapist assistant graduate include those addressing all systems (ie, musculoskeletal, neurological, cardiovascular pulmonary, integumentary) and the continuum of patient/client care throughout the lifespan. Definitions for terms used in this document are based on the *Guide to Physical Therapist Practice*. An asterisk (\*) denotes a skill identified on the Physical Therapist Assistant (NPTE) Test Content Outline.

Given that agreement on this document was achieved by a small group of member consultants, the conference document was then disseminated to a wider audience comprised of stakeholder groups that would be invested in and affected by this document. The consensus-based draft document of Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level was placed on APTA's website and stakeholder groups, including APTA Board of Directors, all physical therapist assistant academic program directors, PTA Academic Coordinators/Directors of Clinical Education, and PTA faculties, physical therapists and PTAs serving on CAPTE panels, component leaders, the PTA Caucus, Advisory Panel of PTAs, and a sampling of clinical educators were invited to vote. A modified Delphi was used on whether or not to include/exclude specific essential skills that every PTA graduate should be competent in performing on patients/clients under the direction and supervision of the physical therapist. A total of 494 responses were received and the results were tabulated and analyzed. Those skills that the 494 respondents voted to include with an aggregate score of 80% or higher were incorporated into the final draft document.

The final "vote" was provided in a report to the APTA Board of Directors in November 2008 for their review, deliberation, and action. The Board of Directors adopted the document Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level as a core document to be made available to stakeholders, including PTA academic programs and their faculties, clinical education sites, students, employers and CAPTE. The final document that follows defines Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level.

PTA Skill Category	Description of Minimum Skills for PTA
<p><b>Plan of Care Review</b></p> <ul style="list-style-type: none"> <li>▪ <b>Review of physical therapy documents</b></li> <li>▪ <b>Review of medical record</b></li> <li>▪ <b>Identification of pertinent information</b></li> <li>▪ <b>Identification of indications, contraindications, precautions, safety considerations, and expected outcomes</b></li> <li>▪ <b>Access to related literature</b></li> <li>▪ <b>Match patient goals to selected interventions</b></li> <li>▪ <b>Identification of role in patient care</b></li> <li>▪ <b>Identification of items to be communicated to the physical therapist</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Read all physical therapy documentation, including initial examination and plan of care. <ol style="list-style-type: none"> <li>A. Note indications, contraindications, precautions and safety considerations for the patient.</li> <li>B. Note goals and expected outcomes.</li> <li>C. Seek clarification from physical therapist, as needed.</li> </ol> </li> <li>2. Review information in the medical record at each visit, including: <ol style="list-style-type: none"> <li>A. Monitor medical record for changes in medical status and/or medical procedures.</li> <li>B. Collect data on patient's current condition, compare results to previously collected data and safety parameters established by the physical therapist, and determine if the safety parameters have been met.</li> <li>C. Seek clarification from appropriate health professions' staff for unfamiliar or ambiguous information.</li> </ol> </li> <li>3. Identify when the directed interventions are either beyond the scope of work or personal scope of work of the PTA.</li> <li>4. Communicate to the physical therapist when there are significant changes in the patient's medical status, physician referral, or when the criticality and complexity of the patient is beyond the knowledge, skills, and abilities of the PTA.</li> <li>5. Explain the rationale for selected interventions to achieve patient goals as identified in the plan of care.</li> </ol>
<p><b>Provision of Procedural Interventions</b></p> <ul style="list-style-type: none"> <li>• <b>Compliance with policies, procedures, ethical standards, etc.</b></li> <li>• <b>Risk management strategies</b></li> <li>• <b>Protection of patient privacy, rights, and dignity</b></li> <li>• <b>Competent provision of interventions, including:</b> <ul style="list-style-type: none"> <li>• <b>Therapeutic exercise</b></li> <li>• <b>Functional training</b></li> <li>• <b>Manual therapy techniques</b></li> <li>• <b>Application and adjustment of devices and equipment*</b></li> <li>• <b>Airway clearance techniques</b></li> <li>• <b>Integumentary repair and protection techniques</b></li> </ul> </li> </ul>	<ol style="list-style-type: none"> <li>1. Provide interventions compliant with federal and state licensing requirements, APTA standards documents (eg, Guide for Conduct for the PTA, Code of Ethics), and facility policies and procedures.</li> <li>2. Assure safety of patient and self throughout patient care. <ol style="list-style-type: none"> <li>A. Identify the need for and take action when safety of patient or self may be at risk or has been compromised.</li> <li>B. Utilize risk management strategies (eg, universal precautions, body mechanics).</li> </ol> </li> <li>3. Assure patient privacy, rights, and dignity. <ol style="list-style-type: none"> <li>A. Follow HIPAA requirements and observe Patient Bill of Rights.</li> <li>B. Position/drape to protect patient modesty.</li> </ol> </li> <li>4. Provide competent provision of physical therapy interventions, including: <p><u>Therapeutic exercise</u></p> <ol style="list-style-type: none"> <li>A. Aerobic Capacity/Endurance Conditioning or Reconditioning <ol style="list-style-type: none"> <li>1. Increase workload over time</li> <li>2. Movement efficiency and energy conservation training</li> </ol> </li> </ol> </li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
<ul style="list-style-type: none"> <li>• <b>Electrotherapeutic modalities*</b></li> <li>• <b>Physical agents and mechanical modalities*</b></li> <li>• <b>Assessment of patient response</b></li> <li>• <b>Clinical problem solving</b></li> <li>• <b>Ability to modify techniques</b></li> </ul>	<ul style="list-style-type: none"> <li>3. Walking/wheelchair propulsion programs</li> <li>B. Balance, coordination, and agility training <ul style="list-style-type: none"> <li>1. Developmental activities training</li> <li>2. Neuromuscular education or reeducation</li> <li>3. Postural awareness training</li> <li>4. Standardized, programmatic, complementary exercise approaches (protocols)</li> <li>5. Task-Specific Performance Training (eg, transfer training, mobility exercises, functional reaching)</li> </ul> </li> <li>C. Body mechanics and postural stabilization <ul style="list-style-type: none"> <li>1. Body mechanics training</li> <li>2. Postural stabilization activities</li> <li>3. Postural awareness training</li> </ul> </li> <li>D. Flexibility exercises <ul style="list-style-type: none"> <li>1. Range of motion</li> <li>2. Stretching (eg, Passive, Active, Mechanical)</li> </ul> </li> <li>E. Gait and locomotion training <ul style="list-style-type: none"> <li>1. Developmental activities training</li> <li>2. Gait training (with and without devices)</li> <li>3. Standardized, programmatic, complementary exercise approaches</li> <li>4. Wheelchair propulsion and safety</li> </ul> </li> <li>F. Neuromotor development training <ul style="list-style-type: none"> <li>1. Developmental activities training</li> <li>2. Movement pattern training</li> <li>3. Neuromuscular education or reeducation</li> </ul> </li> <li>G. Relaxation <ul style="list-style-type: none"> <li>1. Breathing strategies (with respect to delivery of an intervention)</li> <li>2. Relaxation techniques (with respect to delivery of an intervention)</li> </ul> </li> <li>H. Strength, power, and endurance training for head, neck, limb, trunk, and ventilatory muscles <ul style="list-style-type: none"> <li>1. Active assistive, active, and resistive exercises, including concentric, dynamic/isotonic, eccentric, isometric, diaphragmatic breathing, and low-level plyometrics (eg, kicking a ball, throwing a ball)</li> </ul> </li> </ul> <p><u>Functional training in self-care and home management</u></p> <ul style="list-style-type: none"> <li>A. Activities of daily living (ADL) training <ul style="list-style-type: none"> <li>1. Bed mobility and transfer training</li> <li>2. Activity specific performance training</li> </ul> </li> <li>B. Device and equipment use and training <ul style="list-style-type: none"> <li>1. Assistive and adaptive device or equipment training during ADL</li> </ul> </li> <li>C. Injury Prevention or reduction <ul style="list-style-type: none"> <li>1. Injury prevention education during self-care and home management</li> <li>2. Injury prevention or reduction with use of devices and equipment</li> <li>3. Safety awareness training during self-care and home management</li> </ul> </li> </ul>

PTA Skill Category	Description of Minimum Skills for PTA
	<p><u>Manual therapy techniques</u></p> <ul style="list-style-type: none"> <li>A. Therapeutic Massage</li> <li>B. Soft Tissue mobilization</li> <li>C. Passive range of motion</li> </ul> <p><u>Application and adjustment of devices and equipment</u></p> <ul style="list-style-type: none"> <li>A. Adaptive devices <ul style="list-style-type: none"> <li>1. Hospital Beds</li> <li>2. Raised Toilet Seats</li> </ul> </li> <li>B. Assistive devices <ul style="list-style-type: none"> <li>1. Canes</li> <li>2. Crutches</li> <li>3. Long-handled reachers</li> <li>4. Walkers</li> <li>5. Wheelchairs</li> </ul> </li> <li>C. Orthotic and prosthetic devices <ul style="list-style-type: none"> <li>1. Braces</li> </ul> </li> <li>D. Protective devices <ul style="list-style-type: none"> <li>1. Braces</li> </ul> </li> <li>E. Supportive devices, such as: <ul style="list-style-type: none"> <li>1. Compression garments</li> <li>2. Elastic wraps</li> <li>3. Soft neck collars</li> <li>4. Slings</li> <li>5. Supplemental oxygen</li> </ul> </li> </ul> <p><u>Breathing strategies/oxygenation</u></p> <ul style="list-style-type: none"> <li>1. Identify patient in respiratory distress</li> <li>2. Reposition patient to improve respiratory function</li> <li>3. Instruct patient in a variety of breathing techniques (pursed lip breathing, paced breathing, etc.)</li> <li>4. Administration of prescribed oxygen during interventions.</li> </ul> <p><u>Integumentary protection</u></p> <ul style="list-style-type: none"> <li>1. Recognize interruptions in integumentary integrity</li> <li>2. Repositioning</li> <li>3. Patient education</li> <li>4. Edema management</li> </ul> <p><u>Electrotherapeutic modalities, such as:</u></p> <ul style="list-style-type: none"> <li>1. Electrotherapeutic delivery of medications</li> <li>2. Electrical muscle stimulation</li> <li>3. Electrical stimulation for tissue repair</li> <li>4. Functional electrical stimulation</li> <li>5. High-voltage pulsed current</li> <li>6. Neuromuscular electrical stimulation</li> <li>7. Transcutaneous electrical nerve stimulation</li> </ul> <p><u>Physical agents</u></p> <ul style="list-style-type: none"> <li>1. Cryotherapy (eg, cold pack, ice massage, vapocoolant spray, hydrotherapy)</li> </ul>

PTA Skill Category	Description of Minimum Skills for PTA
	<ol style="list-style-type: none"> <li>2. Ultrasound</li> <li>3. Thermotherapy (eg, dry heat, hot packs, paraffin baths, hydrotherapy)</li> </ol> <p><u>Mechanical modalities</u></p> <ol style="list-style-type: none"> <li>1. Compression therapies</li> <li>2. Mechanical motion devices</li> <li>3. Traction devices</li> </ol> <ol style="list-style-type: none"> <li>5. Determine patient's response to the intervention: <ol style="list-style-type: none"> <li>A. Interview patient and accurately interpret verbal and nonverbal responses</li> <li>B. Identify secondary effects or complications caused by the intervention</li> <li>C. Determine outcome of intervention (positive or negative), including data collection and functional measures</li> </ol> </li> <li>6. Use clinical problem solving skills in patient care. <ol style="list-style-type: none"> <li>A. Determine if patient is safe and comfortable with the intervention, and, if not, determine appropriate modifications</li> <li>B. Compare results of intervention to previously collected data and determine if there is progress toward the expectations established by the PT or if the expectations have been met</li> <li>C. Determine if modifications to the interventions are needed to improve patient response</li> </ol> </li> <li>7. Modify interventions to improve patient response. <ol style="list-style-type: none"> <li>A. Determine modifications that can be made to the intervention within the plan of care</li> <li>B. Communicate with physical therapist when modifications are outside scope of work or personal scope of work of PTA</li> <li>C. Select and implement modification</li> <li>D. Determine patient outcomes from the modification</li> </ol> </li> </ol>
<b>Patient Instruction</b> <ul style="list-style-type: none"> <li>• Application of principles of learning</li> <li>• Use of variety of teaching strategies</li> <li>• Methods to enhance compliance</li> <li>• Clarity in instructions</li> <li>• Assessment of patient response</li> </ul>	<ol style="list-style-type: none"> <li>1. Apply principles of learning using a variety of teaching strategies during patient instruction.</li> <li>2. Provide clear instructions (eg, verbal, visual).</li> <li>3. Apply methods to enhance compliance (eg, handouts, reporting forms).</li> <li>4. Determine patient response/understanding of instruction.</li> </ol>
<b>Patient Progression</b> <ul style="list-style-type: none"> <li>• Competent patient progression</li> </ul>	<ol style="list-style-type: none"> <li>1. Implement competent patient progression. <ol style="list-style-type: none"> <li>A. Identify the need to progress via data collection.</li> <li>B. Determine what progression can be made within the</li> </ol> </li> </ol>



PTA Skill Category	Description of Minimum Skills for PTA
<ul style="list-style-type: none"> <li>• <b>Communication of pertinent information</b></li> <li>• <b>Relationship of psychosocial factors to progress</b></li> <li>• <b>Clinical problem solving</b></li> </ul>	<p>plan of care.</p> <ul style="list-style-type: none"> <li>C. Identify possible progressions that will continue to advance patient response.</li> <li>D. Select and implement the progression of the intervention.</li> <li>E. Determine outcomes of the intervention.</li> </ul> <ol style="list-style-type: none"> <li>2. Communicate pertinent information. <ul style="list-style-type: none"> <li>A. Identify changes in patient response due to intervention.</li> <li>B. Describe adjustments to intervention within plan of care.</li> <li>C. Describe response to change in intervention.</li> </ul> </li> <li>3. Recognize when other variables (psychological, social, cultural, etc.) appear to be affecting the patient's progression with the intervention.</li> <li>4. Determine if patient is progressing toward goals in plan of care. If no, determine if modifications made to the intervention are required to improve patient response.</li> </ol>
<p><b>Data Collection</b></p> <ul style="list-style-type: none"> <li>• <b>Competent data collection</b></li> <li>• <b>Interview skills</b></li> <li>• <b>Accurate and timely</b></li> <li>• <b>Clinical problem solving</b></li> <li>• <b>Ability to modify techniques</b></li> <li>• <b>Documentation and communication</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Provide accurate, reproducible, safe, valid, and timely collection and documentation of data to measure the patient's medical status and/or progress within the intervention as indicated in the following categories: <ul style="list-style-type: none"> <li><u>Anthropometric characteristics</u> <ol style="list-style-type: none"> <li>1. Measure body dimensions (eg, height, weight, girth, limb length).</li> </ol> </li> <li><u>Arousal, attention, and cognition</u> <ol style="list-style-type: none"> <li>1. Determine level of orientation to situation, time, place, and person.</li> <li>2. Determine patient's ability to process commands.</li> <li>3. Determine level of arousal (lethargic, alert, agitated).</li> <li>4. Test patient's recall ability (eg, short term and long term memory).</li> </ol> </li> <li><u>Assistive and adaptive devices</u> <ol style="list-style-type: none"> <li>1. Measure for assistive or adaptive devices and equipment.</li> <li>2. Determine components, alignments and fit of device and equipment.</li> <li>3. Determine patient's safety while using the device.</li> <li>4. Monitor patient's response to the use of the device.</li> <li>5. Check patient or caregiver's ability to care for device and equipment (maintenance, adjustment, cleaning).</li> </ol> </li> <li><u>Body mechanics</u> <ol style="list-style-type: none"> <li>1. Determine patient's ability to use proper body</li> </ol> </li> </ul> </li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
	<p style="text-align: center;">mechanics during functional activity.</p> <p><u>Environmental barriers, self-care, and home management</u></p> <ol style="list-style-type: none"> <li>1. Identify potential safety barriers.</li> <li>2. Identify potential environmental barriers.</li> <li>3. Identify potential physical barriers.</li> <li>4. Determine ability to perform bed mobility and transfers safely in the context of self-care home management.</li> </ol> <p><u>Gait, locomotion, and balance</u></p> <ol style="list-style-type: none"> <li>1. Determine patient's safety while engaged in gait, locomotion, balance, and mobility.</li> <li>2. Measure patient's progress with gait, locomotion, balance, and mobility, including use of standard tests.</li> <li>3. Describes gait deviations and their effect on gait and locomotion.</li> </ol> <p><u>Integumentary integrity</u></p> <ol style="list-style-type: none"> <li>1. Identify activities, positioning, and postures that may produce or relieve trauma to the skin.</li> <li>2. Identify devices and equipment that may produce or relieve trauma to the skin.</li> <li>3. Observe and describe skin characteristics (eg, blistering, continuity of skin color, dermatitis, hair growth, mobility, nail growth, sensation, temperature, texture, and turgor).</li> <li>4. Observe and describe changes in skin integrity, such as presence of wound, blister, incision, hematoma, etc.</li> <li>5. Test for skin sensation and describe absent or altered sensation.</li> </ol> <p><u>Muscle function</u></p> <ol style="list-style-type: none"> <li>1. Perform manual muscle testing.</li> <li>2. Observe the presence or absence of muscle mass.</li> <li>3. Describe changes in muscle tone.</li> </ol> <p><u>Neuromotor function</u></p> <ol style="list-style-type: none"> <li>1. Identify the presence or absence of developmental reflexes, associated reactions, or abnormal tone.</li> <li>2. Identify performance of gross and fine motor skills.</li> </ol> <p><u>Orthotic and prosthetic devices and equipment</u></p> <ol style="list-style-type: none"> <li>1. Check components, ensure alignment and fit of orthotic devices, braces, and/or splints.</li> <li>2. Determine effectiveness of components (Is it working or not?), alignment, and fit of orthotic devices, braces, and splints during functional</li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
	<p>activities.</p> <ol style="list-style-type: none"> <li>3. Determine patient/caregiver's ability to don/doff orthotic, device, brace, and/or splint.</li> <li>4. Determine patient/caregiver's ability to care for orthotic device, brace, or splint (eg, maintenance, adjustments, and cleaning).</li> </ol> <p><u>Pain</u></p> <ol style="list-style-type: none"> <li>1. Define location and intensity of pain.</li> </ol> <p><u>Posture</u></p> <ol style="list-style-type: none"> <li>1. Determine postural alignment and position (static and dynamic, symmetry, deviation from midline).</li> </ol> <p><u>Range of motion</u></p> <ol style="list-style-type: none"> <li>1. Perform tests of joint active and passive movement, muscle length, soft tissue extensibility, tone and flexibility (goniometry, tape measure).</li> <li>2. Describe functional range of motion.</li> </ol> <p><u>Sensory response</u></p> <ol style="list-style-type: none"> <li>1. Perform tests of superficial sensation (coarse touch, light touch, cold, heat, pain, pressure, and/or vibration).</li> <li>2. Check peripheral nerve integrity (sensation, strength).</li> </ol> <p><u>Vital Signs</u></p> <ol style="list-style-type: none"> <li>1. Monitor and determine cardiovascular function (eg, peripheral pulses, blood pressure, heart rate)</li> <li>2. Monitor and determine physiological responses to position change (eg, orthostatic hypotension, skin color, blood pressure, and heart rate).</li> <li>3. Monitor and determine respiratory status (eg, pulse oximetry, rate, and rhythm, pattern).</li> </ol> <ol style="list-style-type: none"> <li>2. Provide timely communication to the physical therapist regarding findings of data collection techniques.</li> <li>3. Recognize when intervention should not be provided or should be modified due to change in patient status.</li> </ol>
<p><b>Documentation</b></p> <ul style="list-style-type: none"> <li>• <b>Select relevant information</b></li> <li>• <b>Accuracy</b></li> <li>• <b>Ability to adapt</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Document in writing/electronically patient care using language that is accurate, complete, legible, timely, and consistent with institutional, legal, and billing requirements.</li> <li>2. Use appropriate grammar, syntax, and punctuation in communication.</li> <li>3. Use appropriate terminology and institutionally approved abbreviations.</li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
	<ol style="list-style-type: none"> <li>4. Use an organized and logical framework to document care.</li> <li>5. Identify and communicate with the physical therapist when further documentation is required.</li> </ol>
<p><b>Safety, CPR, and Emergency Procedures</b></p> <ul style="list-style-type: none"> <li>• <b>Safety</b></li> <li>• <b>Initiate emergency response system</b></li> <li>• <b>CPR</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Ensure safety of self and others in the provision of care in all situations.</li> <li>2. Initiate and/or participate in emergency life support procedures (simulated or actual).</li> <li>3. Initiate and/or participate in emergency response system (simulated or actual).</li> <li>4. Maintain competency in CPR.</li> <li>5. Prepare and maintain a safe working environment for performing interventions (e.g. clear walkways, equipment checks, etc.).</li> </ol>
<p><b>Healthcare Literature</b></p>	<ol style="list-style-type: none"> <li>1. Reads and understands the healthcare literature.</li> </ol>
<p><b>Education</b></p> <ol style="list-style-type: none"> <li>a. <b>Colleagues</b></li> <li>b. <b>Aides, volunteers, peers, coworkers</b></li> <li>c. <b>Students</b></li> <li>d. <b>Community</b></li> </ol>	<ol style="list-style-type: none"> <li>1. Instruct other members of the health care team, using established techniques, programs, and instructional materials, commensurate with the learning characteristics of the audience.</li> <li>2. Educate colleagues and other health care professionals about the role, responsibilities, and academic preparation and scope of work of the PTA.</li> </ol>
<p><b>Resource Management</b></p> <ul style="list-style-type: none"> <li>• <b>Human</b></li> <li>• <b>Fiscal</b></li> <li>• <b>Systems</b></li> </ul>	<ol style="list-style-type: none"> <li>1. Follow legal and ethical requirements for direction and supervision of other support personnel.</li> <li>2. Select appropriate non-patient care activities to be directed to support personnel.</li> <li>3. Identify and eliminate obstacles to completing patient related duties.</li> <li>4. Demonstrate efficient time management.</li> <li>5. Provide accurate and timely information for billing and reimbursement purposes.</li> <li>6. Adhere to legal/ethical requirements, including billing.</li> <li>7. Maintain and use physical therapy equipment effectively.</li> </ol>
<p><b>Behavioral Expectations:</b></p> <ol style="list-style-type: none"> <li>a. <b>Accountability</b></li> <li>b. <b>Altruism</b></li> </ol>	<p><u>Accountability</u></p> <ol style="list-style-type: none"> <li>1. Adhere to federal and state legal practice standards and institutional regulations related to patient care and fiscal</li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
<p>c. <b>Compassion and Caring</b>  d. <b>Cultural Competence</b>  e. <b>Duty</b>  f. <b>Integrity</b>  g. <b>Social Responsibility</b></p>	<p>management.</p> <ol style="list-style-type: none"> <li>2. Act in a manner consistent with the <i>Standards of Ethical Conduct for the Physical Therapist Assistant</i> and <i>Guide for Conduct of the Physical Therapist Assistant</i>.</li> <li>3. Change behavior in response to understanding the consequences (positive and negative) of the physical therapist assistant's actions.</li> </ol> <p><u>Altruism</u></p> <ol style="list-style-type: none"> <li>1. Place the patient's/client's needs above the physical therapist assistant's self-interests.</li> </ol> <p><u>Compassion and caring</u></p> <ol style="list-style-type: none"> <li>1. Exhibit compassion, caring, and empathy in providing services to patients; promote active involvement of the patient in his or her care.</li> </ol> <p><u>Cultural competence</u></p> <ol style="list-style-type: none"> <li>1. Identify, respect, and act with consideration for the patient's differences, values, preferences, and expressed needs in all physical therapy activities.</li> </ol> <p><u>Duty</u></p> <ol style="list-style-type: none"> <li>1. Describe and respect the physical therapists' and other team members' expertise, background, knowledge, and values.</li> <li>2. Demonstrate reliability in meeting normal job responsibilities (eg, attendance, punctuality, following direction).</li> <li>3. Preserve the safety, security, privacy, and confidentiality of individuals.</li> <li>4. Recognize and report when signs of abuse/neglect are present.</li> <li>5. Actively promote physical therapy.</li> </ol> <p><u>Integrity</u></p> <ol style="list-style-type: none"> <li>1. Demonstrate integrity in all interactions.</li> <li>2. Maintain professional relationships with all persons.</li> </ol> <p><u>Social Responsibility</u></p> <ol style="list-style-type: none"> <li>1. Analyze work performance and behaviors and seek assistance for improvement as needed.</li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
Communication	<p><u>Interpersonal Communication</u></p> <ol style="list-style-type: none"> <li>1. Develop rapport with patients/clients and others to promote confidence.</li> <li>2. Actively listen and display sensitivity to the needs of others.</li> <li>3. Ask questions in a manner that elicits needed responses.</li> <li>4. Modify communication to meet the needs of the audience, demonstrating respect for the knowledge and experience of others.</li> <li>5. Demonstrate congruence between verbal and non-verbal messages.</li> <li>6. Recognize when communication with the physical therapist is indicated.</li> <li>7. Initiate and complete verbal and written communication with the physical therapist in a timely manner.</li> <li>8. Ensure ongoing communication with the physical therapist for optimal patient care.</li> <li>9. Recognize role and participate appropriately in communicating patient status and progress within the health care team.</li> </ol> <p><u>Conflict Management/Negotiation</u></p> <ol style="list-style-type: none"> <li>1. Recognize potential for conflict.</li> <li>2. Implement strategies to prevent and/or resolve conflict.</li> <li>3. Seek resources to resolve conflict when necessary.</li> </ol>
<b>Promotion of Health, Wellness, and Prevention</b>	<ol style="list-style-type: none"> <li>1. Demonstrate health promoting behaviors.</li> <li>2. Recognize opportunities to educate the public or patients about issues of health, wellness, and prevention (eg, benefits of exercise, prevention of falls, etc.) and communicate opportunity to the physical therapist.</li> <li>3. Educate the public or patients about issues of health, wellness, and prevention (eg, benefits of exercise, prevention of falls, etc.).</li> <li>4. Recognize patient indicators of willingness to change health behaviors and communicate to the physical therapist.</li> </ol>
<b>Career Development</b>	<ol style="list-style-type: none"> <li>1. Engage in self-assessment.</li> <li>2. Identify individual learning needs to enhance role in the profession.</li> </ol>

PTA Skill Category	Description of Minimum Skills for PTA
	<ol style="list-style-type: none"> <li>3. Identify and obtain resources to increase knowledge and skill.</li> <li>4. Engage in learning activities (eg, clinical experience, mentoring, skill development).</li> <li>5. Incorporate new knowledge and skill into clinical performance.</li> </ol>

Relationship to Vision 2020; (Academic/Clinical Education Affairs Department, ext 3203

**Explanation of Reference Numbers:**

BOD P00-00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure

## **E. APTA Guidelines for Direction/Supervision of PTA's**





**DIRECTION AND SUPERVISION OF THE PHYSICAL THERAPIST ASSISTANT HOD P06-05-18-26** [Amended HOD 06-00-16-27; HOD 06-99-07-11; HOD 06-96-30-42; HOD 06-95-11-06; HOD 06-93-08-09; HOD 06-85-20-41; Initial HOD 06-84-16-72/HOD 06-78-22-61/HOD 06-77-19-37] [Position]

Physical therapists have a responsibility to deliver services in ways that protect the public safety and maximize the availability of their services. They do this through direct delivery of services in conjunction with responsible utilization of physical therapist assistants who assist with selected components of intervention. The physical therapist assistant is the only individual permitted to assist a physical therapist in selected interventions under the direction and supervision of a physical therapist. Direction and supervision are essential in the provision of quality physical therapy services. The degree of direction and supervision necessary for assuring quality physical therapy services is dependent upon many factors, including the education, experiences, and responsibilities of the parties involved, as well as the organizational structure in which the physical therapy services are provided. Regardless of the setting in which the physical therapy service is provided, the following responsibilities must be borne solely by the physical therapist:

1. Interpretation of referrals when available.
2. Initial examination, evaluation, diagnosis, and prognosis.
3. Development or modification of a plan of care which is based on the initial examination or reexamination and which includes the physical therapy goals and outcomes.
4. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render physical therapy interventions and when it may be appropriate to utilize the physical therapist assistant. A physical therapist shall determine the most appropriate utilization of the physical therapist assistant that provides for the delivery of service that is safe, effective, and efficient.
5. Reexamination of the patient/client in light of their goals, and revision of the plan of care when indicated.
6. Establishment of the discharge plan and documentation of discharge summary/status.
7. Oversight of all documentation for services rendered to each patient/client.

The physical therapist remains responsible for the physical therapy services provided when the physical therapist's plan of care involves the physical therapist assistant to assist with selected interventions. Regardless of the setting in which the service is provided, the determination to utilize physical therapist assistants for selected interventions requires the education, expertise, and professional judgment of a physical therapist as described by the *Standards of Practice*, *Guide to Professional Conduct*, and *Code of Ethics*.

In determining the appropriate extent of assistance from the physical therapist assistant (PTA), the physical therapist considers:

- The PTA's education, training, experience, and skill level.
- Patient/client criticality, acuity, stability, and complexity.
- The predictability of the consequences.
- The setting in which the care is being delivered.
- Federal and state statutes.
- Liability and risk management concerns.
- The mission of physical therapy services for the setting.
- The needed frequency of reexamination.

#### Physical Therapist Assistant

##### Definition

The physical therapist assistant is a technically educated health care provider who assists the physical therapist in the provision of physical therapy. The physical therapist assistant is a graduate of a physical therapist assistant associate degree program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

##### Utilization

The physical therapist is directly responsible for the actions of the physical therapist assistant related to patient/client management. The physical therapist assistant may perform selected physical therapy interventions under the direction

and at least general supervision of the physical therapist. In general supervision, the physical therapist is not required to be on-site for direction and supervision, but must be available at least by telecommunications. The ability of the physical therapist assistant to perform the selected interventions as directed shall be assessed on an ongoing basis by the supervising physical therapist. The physical therapist assistant makes modifications to selected interventions either to progress the patient/client as directed by the physical therapist or to ensure patient/client safety and comfort.

The physical therapist assistant must work under the direction and at least general supervision of the physical therapist. In all practice settings, the performance of selected interventions by the physical therapist assistant must be consistent with safe and legal physical therapist practice, and shall be predicated on the following factors: complexity and acuity of the patient's/client's needs; proximity and accessibility to the physical therapist; supervision available in the event of emergencies or critical events; and type of setting in which the service is provided.

When supervising the physical therapist assistant in any off-site setting, the following requirements must be observed:

1. A physical therapist must be accessible by telecommunications to the physical therapist assistant at all times while the physical therapist assistant is treating patients/clients.
2. There must be regularly scheduled and documented conferences with the physical therapist assistant regarding patients/clients, the frequency of which is determined by the needs of the patient/client and the needs of the physical therapist assistant.
3. In those situations in which a physical therapist assistant is involved in the care of a patient/client, a supervisory visit by the physical therapist will be made:
  - a. Upon the physical therapist assistant's request for a reexamination, when a change in the plan of care is needed, prior to any planned discharge, and in response to a change in the patient's/client's medical status.
  - b. At least once a month, or at a higher frequency when established by the physical therapist, in accordance with the needs of the patient/client.
  - c. A supervisory visit should include:
    - i. An on-site reexamination of the patient/client.
    - ii. On-site review of the plan of care with appropriate revision or termination.
    - iii. Evaluation of need and recommendation for utilization of outside resources.

Relationship to Vision 2020: Professionalism; (Practice Department, ext 3176)

**Explanation of Reference Numbers:**

BOD P00-00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure



Last Updated:  
07/27/12 Contact:  
nationalgovernanc  
e@apta.org

## **LEVELS OF SUPERVISION HOD P06-00-15-26 [Position]**

The American Physical Therapy Association recognizes the following levels of supervision:

**General Supervision:** The physical therapist is not required to be on site for direction and supervision, but must be available at least by telecommunications.

**Direct Supervision:** The physical therapist is physically present and immediately available for direction and supervision. The physical therapist will have direct contact with the patient/client during each visit that is defined in the *Guide to Physical Therapist Practice* as all encounters with a patient/client in a 24-hour period.

Telecommunications does not meet the requirement of direct supervision.

**Direct Personal Supervision:** The physical therapist or, where allowable by law, the physical therapist assistant is physically present and immediately available to direct and supervise tasks that are related to patient/client management. The direction and supervision is continuous throughout the time these tasks are performed.

Telecommunications does not meet the requirement of direct personal supervision.

Relationship to Vision 2020: Professionalism; (Practice Department, ext 3176)

### **Explanation of Reference Numbers:**

**BOD P00-00-00-00** stands for Board of Directors/**month/year/page/vote** in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.

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08/07/12  
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**PROCEDURAL INTERVENTIONS EXCLUSIVELY PERFORMED BY PHYSICAL THERAPISTS HOD P06-00-30-36**

[Position]

The physical therapist’s scope of practice as defined by the American Physical Therapy Association *Guide to Physical Therapist Practice* includes interventions performed by physical therapists. These interventions include procedures performed exclusively by physical therapists and selected interventions that can be performed by the physical therapist assistant under the direction and supervision of the physical therapist. Interventions that require immediate and continuous examination and evaluation throughout the intervention are performed exclusively by the physical therapist. Such procedural interventions within the scope of physical therapist practice that are performed exclusively by the physical therapist include, but are not limited to, spinal and peripheral joint mobilization/manipulation, which are components of manual therapy, and sharp selective debridement, which is a component of wound management.

Relationship to Vision 2020: Professionalism; (Practice Department, ext 3176)

**Explanation of Reference Numbers:**

BOD P00-00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.

P: Position | S: Standard | G: Guideline | Y: Policy | R: Procedure



## **PTA Direction and Supervision Algorithms**

### **Step-by-step problem-solving diagrams to guide PTs and PTAs.**

- By Janet Crosier, PT, DPT, MEd

How does a physical therapist (PT) know when patient care can be directed to a physical therapist assistant (PTA)? If the PTA is asking the PT for patients who have more challenging conditions, under what circumstances can that PT direct patients to the PTA? What are the PTA-supervision requirements for specific types of clinics?

To answer these and other questions, APTA's Practice/Education Unit and PTA Services Department have developed a pair of algorithmic guides (see pages 49 and 50) that are designed to (1) help the PT determine when to direct interventions to the PTA, (2) assist the PT in deciding which interventions may be appropriate to direct to the PTA, and (3) offer the PT guidance in the appropriate supervision the PTA, once selected interventions have been directed.

The PTA Direction Algorithm and the PTA Supervision Algorithm reflect current APTA policies and positions on the direction and supervision of PTAs and support the collaborative efforts of the PT/PTA team in providing patient/client care. The controlling assumptions below are essential to understanding and applying the direction and supervision diagrams. (Similar controlling assumptions apply to the Problem-Solving Algorithm for PTAs in Patient/Client Intervention, in *A Normative Model of Physical Therapist Assistant Education: Version 2007*.<sup>1</sup>) This algorithm is posted on APTA's Web site at [www.apta.org/pta](http://www.apta.org/pta).

### **Controlling Assumptions**

- The PT integrates the 5 elements of patient/client management-examination, evaluation, diagnosis, prognosis, and intervention-in a manner designed to optimize outcomes. Responsibility for completion of the examination, evaluation, diagnosis, and prognosis is borne solely by the PT. The PT's plan of care may involve the PTA assisting with selected interventions.
- The PTA has the knowledge, skills, and value-based behaviors needed to help the PT provide selected interventions as described in the plan of care. PTAs are clinical problem-solvers who ensure patient/client safety and comfort, as well as completion of interventions selected to achieve desired outcomes. Other than PTs, PTAs are the only valid providers of physical therapy services.
- The PT directs and supervises the PTA consistent with APTA House of Delegates positions, including Direction and Supervision of the Physical Therapist Assistant;<sup>2</sup>

APTA core documents, including Standards of Ethical Conduct for the Physical Therapist Assistant;<sup>3</sup> federal and state legal practice standards; and institutional regulations.

- All selected interventions are directed and supervised by the PT. The PTA does not perform interventions that require immediate and continuous examination and evaluation throughout, as described in APTA House of Delegates position Procedural Interventions Exclusively Performed by Physical Therapists.<sup>4</sup> Procedural interventions within the scope of PT practice that are performed exclusively by the PT include, but are not limited to, spinal and peripheral joint mobilization/manipulation (which are components of manual therapy), and sharp selective debridement (which is a component of wound management). The PT also is responsible for ensuring the PTA has the knowledge and skills required to safely and effectively complete the intervention.
- The PT remains responsible for physical therapy services provided when the PT's plan of care involves the PTA assisting with selected interventions.
- Selected intervention(s) include the procedural intervention, associated data collection, and communication-including written documentation associated with the safe, effective, and efficient completion of the task.
- The algorithm may represent decision processes employed for either a patient/client interaction or an episode of care.
- Communication between the PT and PTA regarding patient/client care is ongoing. The algorithm does not intend to imply a limitation or restriction on communication between the PT and PTA.

## The Algorithms

The PTA Direction Algorithm on page 49 is easy to trace sequentially. The PTA Supervision Algorithm on page 50 may look complicated at first glance, but it's really quite straightforward-governed by the following features:

- Decision points are depicted by red boxes.
- Decision options are depicted by circles.
- Action items are depicted by blue boxes.

These two algorithms together chart the thinking process used by PTs to determine the appropriate direction and supervision of the PTA for optimal patient/client care. It is our hope that these diagrams, in light of the controlling assumptions, will guide PTs and PTAs as they work together to provide excellent physical therapy services.

[View PTA Direction Algorithm Chart \(.pdf\)](#) | [View PTA Supervision Algorithm \(.pdf\)](#)

- References

- 1. American Physical Therapy Association. A Normative Model of Physical Therapist Assistant Education: Version 2007.  
[www.apta.org/AM/Template.cfm?Section=Use\\_of\\_Personnel\\_Supervision\\_&TEMPLATE=/CM/ContentDisplay.cfm&CONTENTID=41490](http://www.apta.org/AM/Template.cfm?Section=Use_of_Personnel_Supervision_&TEMPLATE=/CM/ContentDisplay.cfm&CONTENTID=41490). Accessed May 10, 2010.
- 2. American Physical Therapy Association. Direction and Supervision of the Physical Therapist Assistant. (HOD P06-05-18-26)  
[www.apta.org/AM/Template.cfm?Section=Policies\\_and\\_Bylaws&CONTENTID=25672&TEMPLATE=/CM/ContentDisplay.cfm](http://www.apta.org/AM/Template.cfm?Section=Policies_and_Bylaws&CONTENTID=25672&TEMPLATE=/CM/ContentDisplay.cfm). Accessed May 18, 2010.
- 3. American Physical Therapy Association. Standards of Ethical Conduct for the Physical Therapist Assistant. (HOD S06-09-20-18)  
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- 4. American Physical Therapy Association. Procedural Interventions Exclusively Performed by Physical Therapists. (HOD P06-00-30-36)  
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*PT in Motion*, APTA's official member magazine, is the successor to *PT—Magazine of Physical Therapy*, which published 1993-2009. All links within articles reflect the URLs at the time of publication and may have expired.





## **F. Off Site Laboratory Experiences**



OKLAHOMA CITY COMMUNITY COLLEGE  
PHYSICAL THERAPIST ASSISTANT PROGRAM  
OFF-SITE LECTURE/LABORATORY ORIENTATION CHECKLIST

LOCATION: \_\_\_\_\_ DATE: \_\_\_\_\_

CONTACT: \_\_\_\_\_

FACULTY LIAISON: \_\_\_\_\_

The faculty at OCCC is committed to providing quality learning experiences for students. Occasionally the experience can best be achieved off-site. In order to provide a safe environment, the student will be oriented to each site.

Please check the appropriate designation:

- Lecture and Tour only
- Lab (hands on using equipment off-site)
- Other \_\_\_\_\_

Reviewed at each site:

1. Emergency Exits
2. Procedures appropriate to the off-site experience
3. Security procedures (location of phones, personnel, etc)

Reviewed as indicated:

1. Location and review of Safety Data Sheets/infection control
2. Precautions relating to the equipment and/or therapeutic procedure
3. Observations of current equipment safety inspection stickers

I have reviewed the above information appropriate to this experience with the OCCC PTA students

Faculty Signature: \_\_\_\_\_

Off-Site Instructor Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_



# GENERAL RELEASE, WAIVER AND AGREEMENT NOT TO SUE

I, \_\_\_\_\_ (the "Participant"), will be participating in an off campus activity, event and/or trip sanctioned by Oklahoma City Community College (the "College") on \_\_\_\_\_. The activity, event and/or trip is:

Name of Activity, event: \_\_\_\_\_

Sponsoring Division/Department: \_\_\_\_\_

In consideration of the College's agreement to permit me to participate in this activity, event and/or trip, I enter into this GENERAL RELEASE, WAIVER AND AGREEMENT NOT TO SUE ("GENERAL RELEASE") and agree as follows:

- 1. ACCEPTANCE OF RISK:** I understand that this activity, event and/or trip involves activities and risks not found in classroom study or employment at the College. These risks include but are not limited to the risks inherent in traveling to and from the off-campus location; varying standards of design, safety and maintenance of facilities, buildings, public places and conveyances; weather conditions; and negligence on the part of the College, its regents, employees, faculty, administrators, agents, officers, trustees and representatives; negligence on the part of students and others; property loss or injury; personal injury and even death. I accept these risks.
- 2. GENERAL RELEASE, WAIVER AND AGREEMENT NOT TO SUE:** I, individually, and on behalf of my heirs, successors, assigns and personal representatives, assume the risks and responsibilities surrounding my participation in this activity, event and/or trip. Individually, and on behalf of my heirs, successors, assigns and personal representatives, I hereby release, forever discharge and agree not to sue the College, its regents, employees, faculty, administrators, agents, officers, trustees and representatives (referred to hereinafter collectively as "Releasees") from and for any present or future liability whatsoever for any present or future damages, losses or injuries (including death) I sustain to my person or property, or both, including but not limited to any claims, demands, actions, causes of action, judgments, damages, including those arising from negligence of Releasees (but not including intentional acts or gross negligence of Releasees) and those arising from my own negligence, and expenses and costs, including attorneys' fees, which arise out of, result from, occur during or are connected in any manner with my participation in this activity, event and/or trip and/or any travel incidental thereto. In other words, I agree that I cannot sue or recover anything from Releasees if anything happens to me or my property as a result of Releasees' past or future negligence in connection with, or while preparing for or participating in, this particular activity, event and/or trip.

Form No.: Waiver 2

PARTICIPANT INITIALS \_\_\_\_\_

06/06/05

PARENT/GUARDIAN INITIALS \_\_\_\_\_

3. I agree that this GENERAL RELEASE is to be interpreted and construed under the laws of the State of Oklahoma, and that if any portion is held invalid, the balance shall continue in full legal force and effect.
4. SELECT ONE BY CIRCLING a. OR b. BELOW)
  - a. I declare that I am eighteen (18) years of age or older, and I am competent to read and sign this GENERAL RELEASE. I understand that I may have an attorney review this document before I sign it.
  - b. I declare that I am under age eighteen (18) years of age. I understand and agree that the signature of a parent or guardian below is required before I may participate in the activity, event and/or trip. I understand that I may have an attorney review this document before I sign it.
5. By signing this GENERAL RELEASE, I hereby acknowledge that I have carefully read this entire document, that (name) \_\_\_\_\_, (title) \_\_\_\_\_ was available to explain and answer any questions I had about this document, that I understand its terms and that I will abide by each of the terms and conditions.

**I UNDERSTAND THAT BY SIGNING THIS DOCUMENT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS I MIGHT OTHERWISE HAVE. I ACKNOWLEDGE THAT I HAVE SIGNED THIS DOCUMENT KNOWINGLY AND VOLUNTARILY.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
College/Student ID Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***If Participant is under 18 years of age:***

I, the parent or legal guardian of the above Participant, hereby give permission for Participant to attend and participate in the off-campus activity, event and/or trip described above. I have carefully read and understand the foregoing GENERAL RELEASE, WAIVER AND AGREEMENT NOT TO SUE. I agree both for myself and for the Participant to be bound by its terms, including but not limited to the AGREEMENT NOT TO SUE.

\_\_\_\_\_  
(Signature of Parent or Guardian)

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Dated

## **G. OCCC Drug Testing Policies**





# Health Professions Student Drug Testing Policies and Procedures

## Purposes:

- Promote and Protect Patient/Client Safety
- Comply with Clinical Affiliates Drug Testing Requirements
- Detect Illegal Drug Use
- Emphasize Professional and Appropriate Behavior

## Definitions:

- Confirmed Positive Drug Test: A drug test processed at a SAMHSA certified laboratory using GC/MC (see definition below) confirmation on all non-negative specimens. The ONLY person who can make a final determination regarding the results is the Medical Review Officer.
- Drug Testing for Reasonable Cause: A drug test required due to the suspicion that reasonable cause exists that the student is not free of illegal drugs.
- GC/MS: Gas chromatography/mass spectrometry will confirm all non-negative specimens.
- Illegal Drugs: Illegal drugs include those drugs made illegal to possess, consume, or sell by Oklahoma and Federal statutes. An illegal drug also includes those drugs taken by an individual which exceed the prescribed limits of a lawful prescription or the taking of a prescription drug without a valid prescription.
- Initial Random Drug Test: A drug test administered prior to the beginning of the first clinical assignment. Date and time of the random drug test will be scheduled solely by the College.
- Medical Review Officer (MRO): A medical doctor who is certified as a MRO. The MRO is independent of the College, the collection process, and the SAMHSA certified laboratory. The MRO is the ONLY person who will determine the final result of a non-negative specimen.
- Substance Abuse and Mental Health Services Administration (SAMHSA) Laboratory: SAMHSA Laboratory Certification is the highest standard available and ensures the most accurate processing. The laboratory confirms all non-negative/positive drug screen samples by GC/MS testing. This is the gold standard in drug testing.

## Initial Drug Testing:

Each student will provide a sample for a random drug test prior to the first clinical assignment. Any student receiving a confirmed positive drug test from the MRO, one time, will not be eligible to continue in the program at that time but may reapply to any of the Division Programs for a future semester. In order to be eligible to reapply/reenter the student must meet with his/her Program Director and the Clinical Affiliation Compliance Administrator (primary)/Division Assistant (secondary) to present documentation that he/she has satisfactorily completed drug counseling or treatment. If that documentation is provided, the student may re-apply. In order to be considered for entry into a program the student must have a **negative drug test** at the time and place set by the Clinical Affiliation Compliance Administrator/Division Assistant, current background check and be current on required immunizations and other health records required. The student is responsible for these expenses.

The results of the initial drug test are generally accepted for the duration of the student's continuous enrollment in the Program unless there is suspicion leading to reasonable cause that the student is not free of illegal drug use.

Continuous Enrollment: A student will be considered to have maintained "continuous enrollment" for purposes of nationwide background reports and drug testing if, since the date of the student's last nationwide background report or drug test, the student has participated in a minimum of one eight or sixteen week Health Professions course during each intervening sixteen week semester by

remaining enrolled in the course beyond the College withdrawal deadline. The College withdrawal deadline is defined as the end of the third quarter of a semester (through the twelfth week of a sixteen week semester or the sixth week of an eight week semester). In the event a student does not maintain continuous enrollment as defined in this paragraph, the student will be required to repeat, at his/her expense, both the nationwide background report and drug testing. Additional nationwide background reports and/or drug testing may be warranted for reasonable cause as set forth in the Health Professions Student Drug Testing Policy and/or Health Professions Nationwide Background Policy.

Unless appealed, the initial drug test result(s) reported by the independent MRO is final. A student can request to have his/her original specimen retested. The request must be submitted in writing to the Clinical Affiliation Compliance Administrator /Division Assistant, along with a money order for \$150 made out to "University Services" to cover the payment for the MRO, within 10 days of the incident. Cost for reevaluation of the specimen is the student's responsibility. If the final results are negative, the student will receive a refund.

If there is a second confirmed positive result due to a second test on the original sample, the student is required to withdraw from the clinical course, or academic course with clinical component, and all concurrent Health Professions Program related courses. There will be no additional opportunities to enroll in OCCC Health Professions Division Programs.

**Once the drug test analysis and GC/MS confirmation are completed, and the Medical Review Officer has reported the results of the second set of testing, those results are final and cannot be appealed.**

Drug Testing for Reasonable Cause:

"For-cause testing: A public or private employer/school may request or require an employee/student to undergo drug or alcohol testing at any time it reasonably believes that the employee/student may be under the influence of drugs or alcohol, including, but not limited to, the following circumstances:

- a. drugs or alcohol on or about the employee's person or in the employee's vicinity,
- b. conduct on the employee's part that suggests impairment or influence of drugs or alcohol,
- c. a report of drug or alcohol use while at work or on duty,
- d. information that an employee has tampered with drug or alcohol testing at any time,
- e. negative performance patterns, or
- f. excessive or unexplained absenteeism or tardiness;" If reasonable cause exists to suspect a student is not free of illegal drugs, he/she will be required to complete a new drug test at that time.

This test will be at a SAMHSA certified lab designated by the Clinical Affiliation Compliance Administrator/Division Assistant. The College will pay the fee for the test. Any student receiving a confirmed positive drug test from the MRO, one time, will not be eligible to continue in the program at that time but may reapply to any of the Division Programs for a future semester. If the student has had a previous confirmed positive drug test, a second confirmed positive for reasonable cause will result in no additional opportunities for the student to enroll in OCCC Health Professions Division Programs. **The student will not return to class/lab/clinical until/unless a negative result is obtained.**

The Program Director, Dean, or Clinical Affiliation Compliance Administrator/Division Assistant must request a test if reasonable cause exists. The student must complete the drug test at a time and place designated by the

College. The student is required to complete a release directing the company/agency conducting the drug test to send the results directly to the HP Clinical Affiliation Compliance Administrator/Division Assistant, who will provide the results to the Program Director or Dean.

Unless appealed, the drug test result(s) reported by the independent MRO is final. A student can request to have his/her original specimen retested. The request must be submitted in writing to the Clinical Affiliation Compliance Administrator (primary)/Division Assistant (secondary), along with a money order for \$150 made out to "University Services" to cover the payment for the MRO,, within 10 days of the incident. Cost for reevaluation of the specimen is the student's responsibility. If the final results are negative, the student will receive a refund.

**Once the drug test analysis and the GC/MS confirmation are completed, and the Medical Review Officer has reported the results of the second set of testing, those results are final and cannot be appealed.**

When the MRO determines that a student tested for reasonable cause has a confirmed positive drug test, readmission to any HP Program may be affected. The student with the confirmed positive drug test is required to withdraw from the clinical course, or academic course with clinical component, and all concurrent Health Professions Program related courses. In order to be eligible to reenter the student must meet with his/her Program Director and the Clinical Affiliation Compliance Administrator/Division Assistant to present documentation that he/she has satisfactorily completed drug counseling or treatment. If that documentation is provided, the student may re-apply. In order to be considered for entry into a program the student must have a **negative drug test** at the time and place set by the Clinical Affiliation Compliance Administrator/Division Assistant, current background check and be current on required immunizations and other health records required. The student is responsible for these expenses. When a student who has had a confirmed positive drug test is accepted into a Program he/she will be subjected to random drug testing at his/her expense.

**My signature certifies that I have read, understand and agree to accept the Oklahoma City Community College Health Profession's Division "Policy for Drug Testing".**

---

Student Name (print)

ID #

---

Signature

Program

---

Date



## **H. Comprehensive Skills Check Safety Expectations**



## COMPREHENSIVE SKILL CHECKOUTS

### PATIENT SAFETY

(\*Revised summer 2017/Reviewed 2019)

The Physical Therapist Assistant (PTA) Program at Oklahoma City Community College requires that each student perform a comprehensive checkout (practical exam) of skills. This exam is a part of PTA 1151 Clinical Prep I, prior to entering PTA 1312 Initial Practicum, and in PTA 2021 Clinical Prep II prior to entering PTA 2034 Practicum I.

The PTA program and faculty are committed to only allow those students who have demonstrated **safe and effective** performance on these practical exams to enter the clinical coursework. The PTA Program faculty make the best attempt possible during these exams to simulate the clinical environment during the lab and the clinical checkouts. Patient safety is the utmost concern and the expectation of the students is that this will be their number one priority.

A breach of safety is defined as ‘any action that could potentially place a patient at risk for injury’. For consistency purposes the faculty will determine what items in each checkout scenario will automatically determine a breach of safety, such as ‘not locking the brakes on the wheelchairs, failure to use a gait belt, etc’. These items are noted on the skills check grading forms. Students are provided the grading criteria prior to the practical exam. In those items that require problem solving and judgment, such as where to guard the patient for a particular transfer, the student is allowed to make safe choices, provided that they can give appropriate rationale for their choice.

Safety issues are addressed throughout the curriculum, but are introduced early in PTA 1013 Introduction to Physical Therapy. Content areas include managing patients with a variety of issues and with interventions such as bed positioning, mobility, transfers, and gait training. As the students progress through the various courses in the curriculum, they are made aware of critical indicators that will automatically result in failure of a practical exam due to safety concerns.

The failure to demonstrate safety is a major concern and could delay or permanently prevent the student from enrolling in the clinical courses and in entering the clinical setting. Failure of a comprehensive skill checkout requires the student to retake the exam with two faculty present and the examination to be recorded on video. Failure of the second examination requires the student and faculty develop a contract of remediation with the possibility of one final opportunity to demonstrate competency at a mutually agreed upon date/time.



## **EXAMPLES OF SAFETY FACTORS THAT WOULD RESULT IN AUTOMATIC FAILURE:**

### **GAIT**

- Failure to use gait belt
- Failure to instruct and monitor weight-bearing restrictions
- Unsafe guarding of the patient during fitting of device and/or ambulating
- Failure to adjust the device if the height of device poses a safety concern

### **TRANSFERS**

- Failure to use gait belt
- Failure to lock brakes on wheelchair
- Failure to observe weight-bearing precautions
- Choice of an inappropriate transfer if that choice would result in a breach of safety

### **MODALITIES**

- Failure to correctly identify target tissue/phase of healing
- Failure to safely operate any machinery

### **EXERCISE**

Exercise type that would be contraindicated (example-resistive when active assist is what is ordered) due to the specific diagnosis/condition and stages of injury.

Select/instruct/perform an exercise that would be detrimental and/or contraindicated due to the simulated patient's condition/diagnosis and for stages of injury, example: restrictive when AAROM is appropriate.

### **JUDGEMENT**

Attempt to perform any intervention in which SPTA is not trained or competent to perform. Failure to address a goal or treatment intervention in the physical therapist's plan of care. In an instance where a portion of the scenario contains an intervention the student is not competent or trained to perform, (example- Joint mobilization) the student should defer and state the appropriate action that they would take.

### **BODY MECHANICS**

Use of body mechanics by the student that would place the student and/or the simulated patient in an unsafe position.

### **PATIENT PRECAUTIONS AND CONTRAINDICATIONS**

Failure of the student to identify, observe and instruct the patient in precautions and/or contraindications.

## **I. Program Exit and Re-entry**



## Oklahoma City Community College PTA Program Exit Interview

Date \_\_\_\_\_  
Student's Name \_\_\_\_\_  
ID# \_\_\_\_\_  
Phone # \_\_\_\_\_  
Semester and Year of First PTA Enrollment \_\_\_\_\_  
Course \_\_\_\_\_ Date \_\_\_\_\_  
Courses Currently Enrolled \_\_\_\_\_

1. Test Scores/Grades for Current Semester

2. Clinical Evaluation at Time of Exit (if applicable)

Outstanding \_\_\_\_\_ Above Average \_\_\_\_\_ Competent \_\_\_\_\_

Minimal \_\_\_\_\_ Below Minimal Performance \_\_\_\_\_

If not in clinical practicums, previous semester grades

3. Reason for Exit from the Program (check appropriate)

Academic \_\_\_\_\_ Personal \_\_\_\_\_

Explanation of the situation, including plan for improvement/resolution of problems.

Comments: Faculty:

Planned Date of Application for Readmission: \_\_\_\_\_

Recommendations:

Signatures:

Student \_\_\_\_\_ Program

Director \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Revised July, 2013/Reviewed 2019



**Oklahoma City Community College PTA Program  
Petition for Readmission**

1. Student's Name \_\_\_\_\_  
Date \_\_\_\_\_  
ID# \_\_\_\_\_

1. Date of Requested  
Readmission: \_\_\_\_\_

2. Courses remaining to be taken prior to graduation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I have read and had the opportunity to discuss the Readmissions Policy for the PTA Program: \_\_\_\_\_yes \_\_\_\_\_ no. If no, make an appointment to do so before submitting the Petition for Readmission.

4. What steps have been taken to complete the requirements and/or recommendations for readmission?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student Signature/Date (contact information)

\_\_\_\_\_  
PTA Program Director/Date

Revised July 2019



## **J. Pregnant and Parenting Information**





**Pregnant and Parenting Students:**

Oklahoma City Community College does not discriminate against any student on the basis of pregnancy, parenting or related conditions. Pregnant or parenting students seeking accommodations should notify your professor immediately. For purposes of this notification, “parenting student” means a student who is pregnant or has recently been pregnant, or another student in a parenting role (regardless of gender), who is participating in a pregnancy-related or birth process, typically limited to the first year.

**Pregnancy-Related Absences:** When a doctor determines absence is necessary, absences will be excused for students who are pregnant or parenting for as long as the student’s doctor determines. Reasonable time will be given to make up missed work.

**Title IX Coordinators:** OCCC has designated a Title IX Coordinator, Regina Switzer (405-682-7540 or [regina.a.switzer@occc.edu](mailto:regina.a.switzer@occc.edu)), and Deputy Title IX Coordinators, as provided here: <http://www.occc.edu/1istoomany/coordinators.html>. In addition to notifying each professor, a pregnant or parenting student seeking assistance or accommodation, must contact the Title IX Coordinator or a Deputy Title IX Coordinator. The Title IX Coordinator will assist, to the degree necessary, in ensuring that the students’ rights under Title IX are understood and protected.

Oklahoma City Community College is committed to complying with the requirements of Title IX by making reasonable accommodations for pregnant and parenting students. Please let us know as soon as possible if an accommodation is necessary. All pregnancy and parenting accommodation requests will be evaluated on a case by case basis. Clinical / Fieldwork eligibility will be determined and/or approved through a joint endeavor by the PTA program faculty/administration; HP Compliance Administrator; clinical / fieldwork sites, and the OCCC Title IX Coordinator, in our best efforts to accommodate and address student needs, as well as help ensure the best educational experience possible.



## **K. Map of Main Building - OCCC**





**OKLAHOMA CITY COMMUNITY COLLEGE**  
Main Building Locator Map (01-09)

- Elevators
- Entrances
- Handicap Entrances
- Men's Restrooms
- Women's Restrooms
- Stairs
- Fire Stairwell

