NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM

STUDENT HANDBOOK 2024-2025

The regulations in this handbook are based upon present conditions and are subject to change without notice. Northeastern Oklahoma A&M College and the Physical Therapist Assistant Program faculty reserve the right to modify any statement in accordance with unforeseen conditions and to update and make policy and procedure changes when necessary

Welcome to the Physical Therapist Assistant Program (PTA) at Northeastern Oklahoma A&M College. We are pleased that you have chosen to pursue a career in Physical Therapy.

This handbook has been designed in an effort to make your transition to the PTA program easier. Information in this handbook will be used throughout the year. The handbook is updated annually, so keep this for reference. We also encourage the student to ask questions that are not adequately answered here.

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SECTION A GENERAL INFORMATION

INTRODUCTION

This handbook was developed as a guide to policies and procedures to aid students, instructors, clinical coordinators and clinical instructors in the Northeastern Oklahoma A&M College Physical Therapist Assistant Program. It should be used as a guide to understand the academic and clinical policies of the program. The provisions of this publication do not represent in any way a contract between student, prospective or otherwise, and the Boards or the College and should not be regarded as such.

The PTA faculty welcomes recommendations for changes from administration, academic and clinical faculty, and students. However, the PTA faculty members reserve the right to update and make policy and procedural changes when necessary. Administration, academic and clinical faculty, and students will be notified of any changes in policies and/or procedures in a timely manner.

In addition to the PTA program policies and procedures, PTA students must also comply with the policies and procedures of the College as stated in the College catalog and student handbook.

PHYSICAL THERAPIST ASSISTANT PROGRAM MISSION STATEMENT

NEO Mission: Northeastern Oklahoma A&M College is dedicated to providing opportunities that promote excellence in learning, service and leadership in a global society.

Mission statement: In keeping with the mission of Northeastern Oklahoma A&M College, the Physical Therapist Assistant program is dedicated to our students learning the theory and clinical skills necessary to serve the community as competent, quality-oriented physical therapist assistants and to be leaders in the health care field.

The PTA program supports and helps the institution meet its mission in the following ways:

- 1. The PTA program promotes "excellence in learning" by preparing graduates who are "quality-oriented".
- 2. The PTA program promotes "service" by preparing graduates to "serve the community" within the health care field.
- 3. The PTA program promotes "leadership" by preparing graduates to be "leaders in the health care field".

PROGRAM GOALS

Program Goals incorporate the concepts of excellence and quality.

- 1. To provide up-to-date information to the community, the clinical sites, and to prospective students regarding the practice of physical therapy and the role of the physical therapist assistant in health care delivery. (Students & Program)
 - a. Students will demonstrate appropriate knowledge of physical therapy practice by successfully passing the licensing examination.

- b. Students will educate the clinical facilities on a selected topic of need as identified by the student and clinical instructor during the clinical internship.
- c. Students will participate in community health fairs, public education opportunities, and/or recruitment events to promote the physical therapist assistant profession.
- 2. To maintain a faculty of physical therapy educators who are committed to the education of the physical therapist assistant student and who are qualified to teach in an educational institution. (Faculty)
 - a. Faculty in the program will strive to provide students with learning experiences that reflect the prevalent practice of physical therapy.
 - b. Faculty will be self-motivated to remain current with the practice of physical therapy through clinical practice, or review of the literature, or continuing education, and/ or involvement with the professional association.
 - c. Faculty will employ planning and evaluation using research and assessment to determine fiscal and program needs and goals.
 - d. Faculty will provide classroom, laboratory, and learning resource facilities to enhance the student's attainment of the knowledge and skills needed for graduation from the program and licensure.
 - e. Faculty will maintain sites for clinical education giving the student the appropriate environment to attain competence in the day-to-day work of the physical therapist assistant.
- 3. To graduate individuals who under the direction and supervision of the physical therapist: (Graduates)
 - a. carry out technical aspects of clinical work in a safe, efficient manner
 - b. are able to communicate orally and in writing in a clear and understandable manner
 - c. conduct themselves in a truthful and ethical manner with patients and other health professionals
 - d. recognize their personal qualities and limitations; and seek out avenues in which to broaden and expand their professional roles to more adequately serve the health care field
 - e. are active participants in health care field who demonstrate behaviors, conduct, actions, attitudes, and values consistent with the roles, responsibilities, and tasks of the physical therapist assistant

Program Outcomes:

- 1. There will be a 25% or less attrition rate during the program due to academic reasons, and less than 40% for any reason.
- 2. Ninety percent of students will complete their clinical education with a minimum grade of C per the syllabus for each clinical rotation.
- 3. There will be an 80% first-time pass rate and an 85% ultimate pass rate on the licensure examination by graduates for the program over a two- year average.

- 4. Ninety percent of graduates will be employed as physical therapist assistants within 12 months of graduation.
- 5. The Employer/Clinical Instructor Program Evaluation tool will have 85% above average ratings of the students including that they would hire a graduate from the program by the end of the last clinical rotation.
- 6. Faculty will attend continuing education courses in physical therapy to meet the requirements set forth by the state of Oklahoma to maintain licensure.
- 7. The program will be 100% compliant in the timely submission of required fees and documentation related to accreditation by the Commission on Accreditation of Physical Therapy Education.
- 8. Employer surveys in the Miami area will reveal 90% of graduates are performing at expected levels within 3 months of hiring.
- 9. Clinical instructors will identify 90% of students effectively educated the rehab team members on a selected area of need on the terminal clinical affiliations.
- 10. Students will participate in at least 1 event per year to promote the physical therapist assistant profession.
- 11. Faculty will identify at least 1 potential future need each year for alternative funding through grants to maintain contemporary equipment and provide adequate learning experiences to the students.

STUDENT LEARNING OUTCOMES

The comprehensive curriculum plan of our PTA program includes an organized and sequential series of integrated student-oriented learning experiences. The experiences are structured to facilitate attainment of the knowledge, skills and behaviors required to function as an integral member of the health care team within the contemporary health care delivery system.

Performance Outcomes

Graduates are prepared to provide quality physical therapy services as directed by a physical therapist. Program graduates will:

- A. Implement a comprehensive plan of care as directed by a physical therapist in a safe and effective manner including the application and progression of the following therapeutic procedures:
 - 1. Activities of daily living and functional training
 - 2. Assistive/adaptive devices
 - 3. Balance and gait training
 - 4. Biofeedback
 - 5. Developmental activities
 - 6. Electric current
 - 7. Electromagnetic radiations
 - 8. External compression
 - 9. Hydrotherapy
 - 10. Orthoses and prostheses
 - 11. Patient/family education

- 12. Postural training and body mechanics
- 13. Pulmonary hygiene techniques
- 14. Standard precautions/infection control
- 15. Therapeutic exercise
- 16. Therapeutic massage
- 17. Thermal agents
- 18. Traction
- 19. Ultrasound
- 20. Wound care
- B. Communicate on a timely basis with the supervising physical therapist about the patient's status.
- C. Perform appropriate intervention related data collection techniques to guide the PTAs clinical decision-making process. These techniques identify the patient's status with respect to:
 - 1. Architectural barriers and environmental modifications
 - 2. Endurance
 - 3. Flexibility/joint range of motion and muscle length
 - 4. Functional activities
 - 5. Gait and balance
 - 6. Pain
 - 7. Posture
 - 8. Righting and equilibrium reactions
 - 9. Segmental length, girth, and volume
 - 10. Skin and sensation
 - 11. Strength
 - 12. Vital signs
- D. Interact with patient and families in a manner that provides the desired psychosocial support, including the recognition of cultural and socioeconomic differences.
- E. Participate in the teaching of other health care providers, patients, and families.
- F. Document relevant aspects of patient interventions and data collection.
- G. Participate in discharge planning and follow-up care.
- H. Demonstrate effective written, oral, and nonverbal communication with patients and their families, colleagues, health care providers, and the public.

Behavioral Outcomes

It is important for graduates to value the roles and responsibilities of both the physical therapists and physical therapist assistants within the physical therapy delivery and to value the PT/PTA team. Physical therapist assistants interact with health care professionals and should effectively represent the profession and their roles and responsibilities. Toward this end program graduates will:

- I. Work under the supervision of a physical therapist in an ethical, legal, safe, and effective manner, including:
 - 1. Adhering to the Standards of Practice for Physical Therapy, the Standards for Ethical Conduct for the Physical Therapist Assistant, and the Guide for Conduct of the Physical Therapist Assistant;

- 2. Complying with applicable state and federal laws;
- 3. Demonstrating Values Based Behaviors;
- 4. Working within the scope of their knowledge and abilities in the delivery of care.
- J. Display an appreciation for the levels of authority and responsibility; planning, time management, supervisory process, performance evaluations, policies and procedures; fiscal considerations for physical therapy providers and consumers; and, continuous quality improvement.
- K. Read and incorporate findings from professional literature into their clinical work.
- L. Reflect upon their clinical knowledge and skills and seek out opportunities for continued development in areas of need.
- M. Serve the profession and the community, including activities occurring in conjunction with work or outside of work.

ACCREDITATION

Northeastern Oklahoma A&M College (NEO) is accredited by The Higher Learning Commission. For information about NEO's accreditation status contact The Higher Learning Commission, 230 South LaSalle Street, Suite 7-500, Chicago, Illinois 60604-1411, telephone 800-621-7440. The Physical Therapist Assistant Program is accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, Virginia 22314; telephone: 703-706-3245; email: accreditation@apta.org; website: www.capteonline.org.

POLICIES

All policies for the PTA Program are developed by the program faculty. This is submitted to the Advisory Council at the annual meeting for discussion, revision, and potentially approval. The Program Director sends the proposed policy to the Department Chair for Nursing, Allied Health, & Physical Education, where it will be reviewed, and potential revisions submitted to the Program Director. Upon final approval from the Department Chair, the policy will be forwarded to the Vice President for Academic Affairs for final approval prior to implementation. The program faculty review each of the policies to ensure they continue to be relevant & meet the needs of the program.

STUDENT SERVICES

For a complete list of student services available and how to access student services, the student should refer to the College Catalog and/or the College Student Handbook. If the student has questions about services available, the student should contact the PTA Program Director, ACCE, or the Office of Student Affairs.

STUDENT DATA

To assist in maintaining up-to-date records, the student should notify the PTA Program Director and the Office of Admissions, Records, and Recruitment of any name, address, and/or telephone number change immediately.

COMMUNICATIONS

There are individual mailboxes in the lab for each student, as well as the program director and ACCE. It is the student's responsibility to check his/her mailbox each day that he/she has oncampus PTA classes. The student will receive email through the Gold Key system regarding the program as well as college issues.

It is your responsibility to notify family members, babysitters, etc., of your location on clinical days. In an emergency, the clinical agency can locate your clinical instructor to relay a message to you. Your cell phone may not be used during class, lab, or clinical rotations except breaks.

POSTING GRADES

Grades will be available through the secure online learning platform. You will receive your own login and password to access the class and grades. Grades for all assignments will be posted by 1 week after the assignment's due date with instructor feedback regarding areas of concern.

SECTION B RETENTION, AND GRADUATION

LICENSING OF PERSONS WITH AN ARREST AND/OR CRIMINAL CONVICTION

No individual will be admitted to the Physical Therapist Assistant Program who has not or will not complete any parole and/or probationary requirements prior to the application deadline.

Individuals who have been arrested and /or convicted of a felony offense, a drug or alcohol related offense, or certain offenses involving moral turpitude (e.g. larceny) prior to admission to the PTA program are considered on an individual basis by the PTA program faculty. In these deliberations, the following factors will be considered:

- 1. The nature of the crime(s);
- 2. Evidence of rehabilitation;
- 3. Personal characteristics;
- 4. Behavior/action since the offense was committed;
- 5. Total criminal record; and
- 6. Disciplinary action of the court.

Individuals with an arrest and/or criminal conviction are advised that the Oklahoma State Board of Medical Licensure and Supervision will consider their application for licensure by examination on an individual basis. This may require a personal appearance before the Board prior to licensure. It is a prerogative of the Board to grant or deny the application for licensure. Please note the Criminal Record Check & Drug Screen Policies form in the appendix of the handbook.

MENTAL COMPETENCE

For individuals that have been declared mentally incompetent by a court of law, the Oklahoma State Board of Medical Licensure and Supervision will consider his/her application for licensure by examination on an individual basis. This may require a personal appearance before the Board prior to licensure. It is the prerogative of the Board to grant or deny the application for licensure.

ENTRANCE REQUIREMENTS

Before the classes begin in the first summer of the program, students will be required to submit evidence of a criminal background check and drug screen. Before the classes begin in the fall semester students will be required to submit evidence of current cardiopulmonary resuscitation certification, malpractice insurance, health examination, and immunizations. Students who do not submit the required documents will not be eligible to attend clinical experiences and, therefore, will not be able to complete the PTA program.

Cardiopulmonary Resuscitation

All PTA students must maintain current American Heart Association Healthcare Provider or the American Red Cross CPR certification throughout the program. Students must present a current certification card at the beginning of the program and maintain current certification throughout the program. Students will not be allowed to attend clinical rotations without current

certification. Absences incurred due to failure to maintain current certification will result in unsatisfactory clinical days.

Malpractice Insurance

All PTA students are required to maintain liability malpractice insurance throughout the program. This insurance is purchased through the Health Science Division when program classes begin.

Physical Examination

PTA students are required to submit a physical examination form completed by his/her physician prior to beginning clinical rotations (see Appendix D). If there has been a change in the student's physical condition, such as surgery, the student will be required to submit a Health Status Release Statement form completed by his/her physician to return to laboratory or clinical activities (see Appendix E).

Tuberculosis Skin Test/Chest X-ray

PTA students are required to submit evidence of a negative TB skin test or chest x-ray prior to beginning clinical rotations and then annually. The PTA ACCE, according to guidelines from the Department of Health, will advise students with a positive skin test.

Immunizations

The PTA department requires that students have the following immunizations: tetanus, diphtheria, measles, mumps and rubella (MMR) (2 immunizations required) and varicella (2 immunizations required).

PTA students are required to submit evidence of Hepatitis B immunization or a signed Vaccination Declination Form (see Appendix A). The first injection of the Hepatitis B series must be started by the first day of class in the fall for the program and the last injection must be completed by the beginning of the second clinical rotation. See Appendix B for health facts about Hepatitis B. Some clinical sites may require the student to have the Hepatitis B immunization. Students who have signed a declination and not completed the Hepatitis B series will not be placed in these clinical settings.

Health Insurance

PTA students are not required to maintain health insurance throughout the program. However, it is strongly recommended. As stated in the Liability Waiver, the student acknowledges that the decision to seek medical attention and resulting financial responsibilities are those of the student.

Laboratory Practice/Demonstration

Students are expected to act as "patients" for demonstration and practice as part of their laboratory experience. Consent to participate in practice and demonstration activities will be obtained prior to the first class of the PTA program.

Criminal Background Check

A criminal background check is required of current PTA students and clinical agencies have the right to deny a student clinical placement at their facility if the student has been convicted of a felony or misdemeanor. If a clinical agency refuses access due to a criminal conviction, the student will be unable to meet the clinical objectives of the PTA course for which he or she is enrolled. In this event, the student will be immediately dismissed from the PTA Program.

Continued admission in the PTA Program is contingent upon the student's immediate, written notification of *any change* in his/her criminal record to the PTA Program office. Failure to notify the PTA Program of any change in a student's criminal record *at any time* following initial admission could result in immediate dismissal from the program.

Drug Screen

Ten panel drug screening(s) are required of accepted PTA applicants. Accepted applicants who do not pass the drug screening may be unable to complete degree requirements or may be denied admission to or suspended or dismissed from the degree program.

It is the policy of the NEO PTA Program to provide a learning environment, which is free from the use, sale, possession, or distribution of illegal drugs or the improper or abusive use of alcohol and other legal drugs. Additionally, this policy requires that PTA students perform their duties without the presence of illegal drugs, alcohol, or inappropriate legal drugs in their systems.

The manufacture, use, possession, sale, purchase or transfer of illegal drugs, alcohol, and/or inappropriate legal drugs by a PTA student is prohibited. Arriving on the NEO campus, while under the influence of any of the above substances is prohibited. The objective of this policy is to ensure a safe, healthy and work efficient environment for students and the community. The faculty and staff of NEO will utilize every reasonable measure to maintain a drug and alcohol free environment. See Appendix K for the Northeastern Oklahoma A&M College Drug Screening Policy for Programs With Clinical Components.

Arrest and Conviction

Students must report any charge, whether resulting in conviction, plea of guilty, finding of guilt, probation, suspended imposition of sentence, suspended execution of sentence, or plea of nolo contendere under a criminal drug or alcohol statute for violations occurring on or off College premises. Any such violation must be reported within five (5) days to the PTA Program Director. Student with involvement in a criminal drug or alcohol offense will be dismissed from the PTA program.

SUPPORTIVE GUIDELINES

Northeastern Oklahoma A&M College subscribes to all principles and requirements of the Rehabilitation Act of 1973 for qualified handicapped individuals and the Americans with Disabilities Act of 1990. Therefore, applicants are encouraged to self-identify their accommodation needs. It is important to note that in order to successfully progress through the

physical therapist assistant program, an individual should be able to perform certain physical activities that include vocal, visual, auditory, and dexterity requirements.

The following guidelines are provided and may be useful in helping potential students to determine their potential for success in the clinical physical therapy setting.

- The clinical physical therapy setting requires the employee to have a reasonable degree of mobility and to lift heavy objects (up to 50 lbs). In addition, the student's coordination needs to be such as to allow for fine manipulation and movement. Gross and fine motor coordination as to respond promptly and implement the skills required in meeting patient health care needs safely. These include, but are not limited to, manipulation of equipment and performance of CPR.
- The clinical physical therapy setting requires visual acuity, such as is needed to make accurate measurements of body parts and/or movement, and for the observation necessary for monitoring patient safety. Students with visual defects that cannot be corrected with glasses or contacts will find physical therapy work very difficult. Students with correctable visual defects have been able to compensate for these problems and work successfully in the physical therapy setting.
- The clinical physical therapy setting requires auditory perception such as to receive verbal communication from patients and members of the health care team, to assess health needs of people through the use of monitoring devices such as stethoscopes, cardiac monitors, fire alarms, etc. Students with auditory defects that cannot be corrected with hearing aids or devices will find physical therapy work very difficult. Students with correctable auditory defects have been able to compensate for these problems and work successfully in the physical therapy setting.
- The clinical physical therapy setting requires communication and language skills to interact effectively with patients and members of the health care team. These skills include the ability to speak, comprehend, read and write for effective communication as may be necessary in the patient's interest and safety.
- Students who are interested in the physical therapy profession need to be emotionally, mentally, and physically capable of coping with the eight hour day, working revolving schedules to include weekends, handle work place relationships, accept supervisory direction and the stress that is part of a continuous learning environment. Intellectual stability is needed to implement the plan of care for their patients.

Through the application requirement to complete 20 hours of physical therapy volunteer work, the prospective student can accurately evaluate his/her potential and capabilities for a career in the field of physical therapy.

Northeastern Oklahoma A&M College maintains an office for assisting Americans with Disabilities (ADA) and Section 504. The ADA Act and Section 504 are federal anti-discrimination statues that provide civil rights protections for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides reasonable accommodations for their disabilities. If you believe you have a disability requiring an accommodation, the student must contact the ADA Coordinator.

For more information regarding the institution policy and contact information for the coordinator can be found on the college's website under Academics- Support- ADA/Section 504.

Northeastern Oklahoma A&M College does not discriminate on the basis of age, race, color, religion, sex, sexual orientation, genetic information, gender identity or expression, national origin, disability, protected veteran status, or other protected category, in any of its policies, practices or procedures. This provision includes, but is not limited to, admissions, employment, financial aid, and educational services.

PROGRESSION AND RETENTION

Permission to enroll in all physical therapist assistant courses after initial admission to the program is based on achievement of a 2.75 cumulative grade point average or above (on 4.0 scale) in all didactic coursework. Students must complete courses prior to or during the semester in the plan of study (Appendix J). For PHTA 1292 (PT Procedures I), 2343 (PT Procedures II), 2388 (Orthopedic Rehabilitation), 2363 (Kinesiology), and 2414 (Rehabilitation) the courses will be graded on both theory and laboratory skills. Students must pass both theory and laboratory skills to receive a passing grade in the course. (See "Student Performance" p. 22).

Students who score below 75% on unit examinations must complete the Test Review Form and submit to the instructor on the learning management system within 3 days after the exam has been completed. Failure to do so will result in a professionalism deduction until the form has been completed. (See Appendix L).

READMISSION

Students who have withdrawn from the PTA program in good standing are eligible to apply for readmission to the program. A student may be readmitted to the program one time only and must happen within one year of being withdrawn. Students who are withdrawn from the program for unsatisfactory performance are not eligible for readmission. To reapply to the PTA program the student should:

- Submit a letter stating the reason for withdrawal and any information which may indicate the student's ability to successfully complete the program (work experience, additional college courses, etc.)
- Submit a PTA program application form.
- Submit transcripts of any additional course work attempted since withdrawal from the program.
- Schedule an appointment with the Program Director to discuss steps to assure successful completion of the program.

Students readmitted to the program must maintain a 2.75 cumulative grade point average to continue to progress through the program. It will be necessary for the student who is readmitted to show proficiency in previous courses through passing the final examination for those courses and passing the final practical and all skill checks for each skills course.

Readmission to the program is not guaranteed. The application will be reviewed and placed with the new applicants. If the withdrawn student does not have a score equal to the minimum score admitted that student will not be readmitted. However, that student will be chosen if his/her score is equal to the minimum score of new applicants. Readmission in any semester other than the first one in the summer may be restricted due to availability of clinical space.

STUDENT COMPLAINT/ GRIEVANCE POLICY

Students may submit complaints/ grievances regarding the PTA program as identified on the PTA Program Website. No retaliation will occur by either the PTA program or the College due to a complaint being filed.

The college identifies a process for student complaints involving academic & non-academic aspects of student life. The Student Complaint Form is to be used to submit a formal complaint when a student has been unable to satisfactorily resolve an issue with the NEO faculty or staff, or another student. Information is posted on the NEO website in addition to the NEO Student Handbook.

ADVANCED STANDING

Students may submit written evidence of pre-existing knowledge of course content and apply to audit or sit for an advanced standing examination of a PTA theory course. Advanced standing credit will be offered in accordance with College procedures. A student requesting advanced standing should contact the PTA program director.

GRADUATION

The PTA student must:

- Meet basic college requirements for graduation.
- Complete the 69 hours of college work with a cumulative grade point average of 2.75 or above.

Students meeting requirements for graduation are awarded an Associate of Applied Science Degree by the College and certified by the Physical Therapist Assistant program director or ACCE to the Oklahoma Board of Medical Licensure and Supervision as being eligible to sit for the Federation of State Boards Physical Therapy Licensing exam.

LICENSURE

Upon graduation from an accredited program, a physical therapist assistant student is considered to be a candidate for the certification examination offered by the Federation of State Board of Physical Therapy. The PTA program director or ACCE will provide the Oklahoma Board of Medical Licensure and Supervision a list of eligible candidates along with his/her mailing address. It is the candidate's responsibility to complete the application form and return it with payment of fees to the board office/testing agency.

GRADUATE FOLLOW-UP

The PTA program will conduct follow-up surveys after completion of the program. Graduates will be asked to provide information to assist the program in assessing if program outcomes were met, job placement rate, graduate satisfaction, and continued professional development. This information is important in the overall assessment of the program so graduates are encouraged to respond to these inquiries.

AMERICAN PHYSICAL THERAPY ASSOCIATION MEMBERSHIP

Any physical therapist assistant student enrolled in an accredited program is eligible for student membership in the American Physical Therapy Association (APTA). Upon payment of dues, the student is entitled to receive publications and regular mailings. The student is also encouraged to participate in the Oklahoma Physical Therapy Association. The OPTA has monthly meetings and educational programs for its members. Non-members and students are welcome at these meetings.

SECTION C RIGHTS, PRIVILEGES AND RESPONSIBILITIES

ATTENDANCE AND TARDINESS

Absences and tardiness by the student should be held to a minimum as they deprive the student of valuable class and clinical experiences. The student will complete the Missed Class Form (Appendix M) anytime the student is absent or tardy and deliver it to the instructor of the class/classes missed. If the class was attended virtually, the student is required to complete a virtual attendance form (Appendix N). Failure to do so within 2 days of the student's return will result in a professionalism deduction until the form has been completed.

Absence

Class Period

- Absence is not an acceptable performance. The student should make every effort to participate in all class periods. Although in-person attendance is preferred, virtual attendance is permissible in instances of illness with proper notification of the instructor.
- Absences will affect the grade and continued participation in the program as indicated in each course syllabus. The loss of points due to absence will be outlined in the course syllabus.
- Four absences from any course will result in counseling by the instructor and/or program director concerning continued participation in the class.
- Missed quizzes, tests, and other evaluations due to absence may or may not be made up depending on the criteria in the course syllabus.

Clinical

• Refer to Section D – Laboratory and Clinical page 27.

Tardiness

Class Period

- Tardiness is not an acceptable performance. Students should be in class on time. Students are expected to remain in class through the end of each class period. The loss of points due to being tardy will be outlined in the course syllabus.
- Five times of being tardy in any course will result in counseling by the instructor and/or program director concerning continued participation in the class.
- Time lost on quizzes, tests, and other evaluations due to tardiness may or may not be made up depending on criteria in the course syllabus.

Clinical

• Refer to Section D – Laboratory and Clinical page 27.

CONDUCT AND BEHAVIOR

Students are expected to conduct themselves in a courteous, considerate, and professional manner during all aspects of their PTA education. The Generic Abilities will provide the guidelines for this.

Classroom – Students should:

- Be on time for all classes.
- Read assignments before class.
- Participate and allow others to participate in learning activities.

- Avoid actions which could distract the instructor or other students.
- Cell phones are to be on silent during class. Please notify family members, babysitters, etc. how to contact you in the event of an emergency. Clinical rotations do not allow cell phone use except during breaks. You will be instructed how you may be contacted in an emergency.
- Refer to Section D Laboratory and Clinical page 27.

Standards of Ethical Conduct for the Physical Therapist Assistant

The APTA Guide for Conduct of the Physical Therapist Assistant (Guide) is intended to serve physical therapist assistants in interpreting the Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) of the American Physical Therapy Association (APTA). The APTA House of Delegates in June of 2009 adopted the revised Standards of Ethical Conduct, which became effective July 1, 2010.

The Guide provides a framework by which physical therapist assistants may determine the propriety of their conduct. It is also intended to guide the development of physical therapist assistant students. The Standards of Ethical Conduct and the Guide apply to all physical therapist assistants. These guidelines are subject to change as the dynamics of the profession change and as new patterns of health care delivery are developed and accepted by the professional community and the public.

This document can be accessed at:

http://www.apta.org/uploadedFiles/APTAorg/Practice_and_Patient_Care/Ethics/GuideforConductofthePTA.pdf.

STUDENT PERFORMANCE

Minimum levels for student performance must be maintained to assure achievement of competencies as a PTA. Performance encompasses grades, laboratory, and clinical skills.

- Grade Point Average Students must maintain a 2.75 cumulative grade point average or above (on 4.0 scale) in all didactic coursework to continue progression through the PTA program.
- Course Grades All specialized course requirements within the PTA program must be completed with a grade of "C" or higher and maintain a 2.75 grade point average in order to proceed to the next courses in the PTA program.
- Because all information is important to understand the concepts in every course, all tests must be passed with a minimum score of 69.45%. If a student does not pass a test, the student will retake the test up to 3 times until a passing score (69.45%) is obtained. The earliest retest date will be 3-5 days after the initial test, will be given outside of class time, and may have to occur on a Friday. The intent is any retest will happen before the next test in the same course. If more than one retest is required, the test date will be any time that can be arranged regardless of the current test schedule. The student will be

given the initial score earned on the first test, and all grades will be calculated on this score regardless of what subsequent retest scores may be. However, to complete the entire class, the student must pass all unit tests with the minimum score within two retests before the final for the current semester. If any retest does not score at the minimum 69.45% by the final for the course, the student will not pass the course. The student will be limited in the number of retests they have access to. This will be set at 33.33% of the total unit examinations, excluding the final examination. Once the student takes the final retest, all test grades will be averaged and must be higher than 69.45%. If the student exceeds the number of allowed retests with the test grade average <69.45%, **the student will not pass the course.**

- Critical elements are indicated on the skills check/ practical sheets. If one of the critical elements is not addressed or is completed incorrectly, the student repeats the skills check/ practical one time to verify all critical elements are correct. A passing score on each skills check/ practical sheets will be indicated and will be required to be a minimum score of 70%. If the student repeats the skill correcting critical elements, the highest grade earned would be 70%. If on the 2nd skills check/ practical, the student does not correctly complete the skill, then that is considered a failure of the skill, and the student will not pass the course or be allowed to go to clinical rotations. The second attempt will be graded by both program faculty and will be completed within 7 days of the first attempt.
 - o Faculty will determine these critical elements, but they are based on patient safety and basic performance of the intervention. These critical elements will be indicated on each of the skills check/ practical sheets.
- Grading Scale The following grading scale will be used in the Physical Therapist Assistant program courses. Course requirements and evaluation methods will be stated in the course syllabus.

≥89.45%=A, 79.45-89.44%=B, 69.45-79.44%=C, 59.45-69.44%=D, 0-59.44%=F

• During the Clinical Experience courses, if a student does not meet entry-level performance or minimum standards for passing a clinical experience, the ACCE coordinates additional time for the student to complete the clinical experience with the clinical instructor (CI). The ACCE meets with the CI and the student to develop a plan to address clinical deficits. A new clinical placement is an option if it is deemed necessary by the ACCE and Program Director to best meet student needs. If a student continues to exhibit failure to pass clinical goals, a meeting between the student, ACCE, and Program Director is established to review the standing of the student in the program and deem failure to complete the clinical experience. This will result in removal from the program. Clinical incidents and dismissal procedures are stated in the course syllabus for each Clinical Experience course.

COUNSELING

Counseling is defined as an interaction resulting from a student's observed academic, professional, or clinical performance by an instructor. A counseling conference provides an opportunity for the student and instructor to mutually discuss areas of concern in private.

Either party at any point in the PTA Program may initiate counseling of a student by an instructor. A counseling or progress record will be provided at the time of the conference. Both records are documentation of the conference and will be part of the student's file.

Guidelines for Counseling Record

- Any evaluation of the student's academic, professional performance, or clinical performance that requires elaboration should be documented.
- The counseling or progress record should indicate positive and/or negative performance.
- An inappropriate student performance (incident) should be described objectively.
- The time, place, and factors influencing the student's performance should be included.
- If applicable, the instructor should make recommendations to assist the student in improving performance.
- The instructor and student should both sign and date the counseling record.
- If a student refuses to sign either the counseling record or progress record, the signature of another instructor will be obtained to validate the conference.
- The student will receive a digital copy of the counseling or progress record and a hard copy will be maintained in the student's file.

WITHDRAWAL IN GOOD STANDING

Students may withdraw from the PTA program and, upon request, may be given the opportunity to reapply for admission to the program the following year. Students must complete the program within two years from beginning the PTA courses and may only retake a semester one time. If readmitted, the student will be required to complete outstanding courses and prove proficiency in previously completed courses. To withdraw from the program in good standing the student should follow these guidelines:

- Exit Interview The student withdrawing from the PTA program must schedule an exit interview with the PTA program director to discuss the circumstance of withdrawal and the procedure for readmission to the program. The student and the program director will sign a summary of the exit interview. A copy of the exit interview summary will be maintained in the student's file.
- Readmission Students who withdraw from the program in good standing are eligible to reapply.

DISMISSAL

Students may be dismissed from the Physical Therapist Assistant Program for reasons that include but are not limited to:

- Failure to maintain a cumulative grade point average of 2.75 or greater in all didactic coursework.
- Failure to successfully complete all required course work and graduate from the program within 2 years of initial enrollment in the technical portion of the PTA program.
- Failure to pass the exit exam at the end of the PTA program in 4 attempts.

- Violation of any local, state, or federal criminal provision whether or not occurring during an educational experience or on College property whether or not related to the student's education activities.
- Excessive tardiness and/or absenteeism.
- Conduct probation exceeding one semester.
- Violating the confidentiality of information or knowledge concerning a patient.
- Any activity that would jeopardize the health, safety, and/or welfare of a patient, instructor, the student or students, or clinical staff.
- Physical or mental disability that constitutes an immediate hazard or threat to patients.
- Illegal possession, sale, or distribution of drugs or being under the influence of illegal drugs or alcohol while in class or in the clinical area.
- Failure to act or committing an act that a reasonable and prudent physical therapist assistant student would not perform at his/her level in the program.
- Cheating, unauthorized possession of an exam, plagiarism, or inaccurate recording, falsifying or altering a patient, agency and/or personal record.

In the event student behavior or performance may lead to dismissal from the PTA program or participation in clinical experiences, the appropriate faculty member or program director should contact the student as soon as reasonably possible to discuss this behavior or performance. In the clinical setting, the initial contact may be verbal at the time of the incident. If the initial contact is verbal, a written report will be developed as soon as possible after the incident.

The appropriate faculty member or program director will develop a written report to provide documentation of the specific inappropriate behavior or performance, the student's response, if any, and the action taken. The action taken may be a warning, probation, or a recommendation for withdrawal. A copy of the report will be provided to the student and will be placed in the student's file. If possible, the student should be provided with the written report at the time of the meeting or conference. Otherwise, the student will be provided with a copy of the written report as soon as practical.

If the report recommends dismissal, it will be forwarded to the PTA program director. The program director will convene a meeting on the next available date to receive the information and recommendation of the faculty member and to consider any additional information from the student. The meeting should be scheduled in a timely manner so that the student will not be jeopardized by prolonged absence from clinical experiences or program courses.

The student will be advised of the meeting date, receive a copy of the report and be invited to attend and present additional information and explanation. An advisor, who may be an attorney, may assist the student. The advisor's role will be as an assistant in nature only and the advisor will not be allowed to present any evidence, nor speak on behalf of the student.

Generally, a student will be entitled to receive a hearing before being withdrawn from active participation in clinical experiences or from the PTA program. However, in cases where the observed behavior of the student is deemed to constitute an immediate threat to the safety and/or welfare of student, faculty, patients, or the general public, the student may be summarily

withdrawn from clinicals or the PTA program without prior notice. In these instances, as soon as reasonably practical, the student will be entitled to a hearing before the PTA program director regarding said withdrawal. If possible, alternative-learning experiences may be provided for the student during the period of withdrawal and the hearing date.

The PTA program director may appoint members of the PTA faculty, as the director deems appropriate under the circumstances of each case to act as a committee with the director in hearing recommendations for involuntary withdrawal. A written report of the hearing will be forwarded to the student and the Vice President for Academic Affairs within seven (7) days of the hearing.

In the event of involuntary withdrawal from the program, the student may appeal the decision to the Vice President for Academic Affairs within two weeks of the decision. The decision of the Vice President for Academic Affairs will be final.

SECTION D CLINICAL AND SKILLS LABORATORY

CONDUCT AND BEHAVIOR

Laboratory – Students should:

- Be on time.
- Be prepared to participate in learning activities and allow others ample opportunity for participation.
- Maintain a professional manner toward peers and instructor during lab activities.
- Adhere to all lab procedures as outlined by the instructor.
- Wear prescribed lab clothes.
- Maintain privacy and confidentiality of other students.

Clinical Setting – Students should:

- Be on time for all clinical rotations.
- Adhere to appearance and uniform requirements of the PTA program unless otherwise specified by the Clinical Instructor.
- Take the necessary materials to the clinical site.
- Be prepared to perform a variety of activities as directed by the Clinical Instructor.
- Cooperate fully with clinical staff and accept direction from appropriate staff in addition to the Clinical Instructor.
- Use learning opportunities independently.
- Adhere to each facility's regulations regarding release of information, photo releases, consent forms, confidentiality, documentation procedures, safety procedures, etc. Students should refer matters concerning any of the above information to their Clinical Instructor unless told otherwise by the Clinical Instructor.
- Conduct himself/herself in a professional, appropriate manner at all times, putting patient needs first and maintaining high quality performance at all times.
- Recognize the patient's rights to privacy, confidentiality, and dignity.
- Identify self as a student (by name tag and through introduction) and give the patient the right to decline treatment by a student.
- Demonstrate preservation of health, welfare, and safety of patients, clinical staff, instructor, other students and/or self.

Note: Students are responsible for assuring the rights and privacy of those people with whom they come in contact during their PTA education (other students, instructors, patients and their families, clinical staff, etc.)

DRESS CODE

Laboratory (on campus)

- Maintain good personal hygiene with sparing use of make-up and cologne/ perfume.
- No gum use during laboratory time.
- Hair may need to be restrained away from the face depending on the lab activity.
- Nails should be short & clean.
- Wedding bands, wristwatches and one pair of stud earrings are allowed. Extra body piercings or jewelry may be required to be removed depending on the lab.

- Loose clothing that permits freedom of movement and access to skin 10" above the knee as appropriate.
- Tight or revealing clothing is not allowed.
- Pants or shorts should cover completely and not allow exposure of undergarments or skin normally covered by undergarments.
- Clean, closed-toe, low heel, non-skid sole shoes and socks tennis shoes are recommended.

Professional Dress (professional events, clinical scenarios, clinical setting)

- Maintain good personal hygiene with sparing use of make-up and cologne/ perfume.
- Hair, beards, and sideburns must be neatly groomed, clean, and a natural color. Hair is restrained off the shoulders and away from the face. No hats or caps are permitted.
- Nails should be short, clean, and without polish. No artificial nails or nail jewelry.
- Wedding bands, wristwatches and one pair of stud earrings are allowed. No other visible body piercing jewelry is allowed.
- Tattoos should be covered.
- Polo shirt is worn with loose-fit and full-length khaki or dress pants or a knee length skirt that permits freedom of movement. Clothing must be clean, neat, free from wrinkles, and fit appropriately.
- Clean, closed-toe, low heel, non-skid sole shoes and socks tennis shoes are recommended.
- NEO student name tag will be used in the clinical setting.

Failure to abide by these regulations may result in loss in professionalism points for the class.

The clinical facility may have additional requirements for appearance and dress. Students are expected to follow the policies and procedures of the clinical facility site in addition to those of the PTA program.

LABORATORY DEMONSTRATION

Students are expected to act as "patients" for demonstration and practice during many courses. This is part of the educational experience.

LABORATORY PRACTICE HOURS

The laboratory is open from 8:00am to 4:30pm Monday through Thursday for current students. Students can access the lab during those college operation hours to work on coursework and techniques that do not require direct personal supervision. Supervised techniques are activities that have a safety factor within them, such as the application of electrotherapeutic modalities, and require an instructor to be present in the laboratory. Students can request additional supervised lab time. Instructors also hold additional scheduled "open lab" times prior to skills checks and practicals, and all students are encouraged to attend. Outside of the scheduled lab times or open lab times, the laboratory is locked.

The expectation is the students do not perform skills they are not academically prepared for, and students inform the instructor of the skills they intend to practice while in the lab. Students are held responsible for their own safety and the safety/welfare of their student-partners and all laboratory equipment and supplies. Failure to adhere to guidelines established by the faculty member for open lab time may result in disciplinary action.

Students are permitted to check out some items for practice at home, such as goniometers, gait belts, crutches, etc., but they must have instructor approval. Students are never allowed to check out any electrotherapeutic equipment.

LABORATORY/CLINICAL SAFETY

Safety is of uppermost importance during both lab and clinical activities. The student is expected to take responsibility for his/her own and other's safety.

The student will:

- Not use any faulty equipment and report any such defects to his/her laboratory or clinical instructor. If faulty equipment is suspected, the student will immediately unplug the defective item, inform the laboratory or clinical instructor, label the machine "defective", and remove the unit from the classroom or treatment area.
- Maintain a calm quiet atmosphere, attending to the patient, task at hand, and the immediate environment.
- Never leave a patient or fellow student unattended without a call system.
- Obtain complete instructions/information regarding the assigned task and the patient or student's condition.
- Follow prescribed procedures.
- Notify the laboratory or clinical instructor of any problems or unexpected effects immediately.
- Know his/her limitations and seek assistance when needed.
- Perform within the bounds of his/her training and role.
- Keep walkways clear of obstruction, such as cords and backpacks.
- Wipe up any spills immediately.
- Unplug machines immediately after use.
- Clean all equipment, utensils, etc., immediately.
- Dispose of waste items, linen, etc., properly, and promptly.
- Inform laboratory or clinical instructor of any safety infractions observed.
- Document any injury, no matter how minor, that occurs in accordance with program and facility policy.

The faculty will:

- Prepare the student to perform laboratory skills through lecture, videos, demonstration, case studies, and practice for scenarios.
- Supervise the learning of all laboratory skills.
- Schedule annual calibration and safety checks of all laboratory equipment

STUDENT HEALTH

Health Status

All students participating in clinical education are required to:

- Submit documentation of a current negative 1-step PPD (tuberculin) test or chest x-ray
- Submit documentation of Hepatitis B immunization or signed Declination Form
- Submit documentation of MMR and varicella immunizations (both require 2 shots or positive titer)
- Review and understand Standard Precautions
- Review the hazardous materials management.

Students will sign a statement of fitness to perform course related physical activities at the time of their enrollment. This signature indicates that the student accepts responsibility and liability for his/her own physical/mental condition and ability to complete assigned course activities.

Pregnancy

Students will be advised about the potential hazards associated with participating in the PTA program while pregnant. Detailed information pertaining to these potential risks will be available to all participants. Following childbirth, a licensed physician's written verification of fitness to return to class and clinicals is required. Any student absent from clinicals due to pregnancy will be subject to the same rules and regulations as stated in clinical attendance policies.

Illness or Injury

A student who has an extended illness, surgery and/or injury will be required to submit a physician's written verification of fitness to return to classes or clinicals. This letter will be directed to the attention of the PTA program director and a conference with the program director will follow. Any clinical absence due to a prolonged illness or injury will be subject to the same rules and regulations as stated in clinical attendance policies as stated in the syllabus for the clinical affiliation.

Infectious Disease

NEO A&M College has an Infectious Disease policy (see the College Student Handbook at http://www.neo.edu/student-life/). PTA students are expected to adhere to this policy. Due to the personal contact inherent in physical therapy, students are advised that a communicable disease poses a serious threat to themselves, their peers, and patients. Students are encouraged to report to their clinical instructor if they know or suspect they have a communicable disease.

ACCESS TO LEARNING OPPORTUNITIES

- Students are encouraged to practice skills for which patients are unavailable or the situation warrants that patients not be used.
- The clinical instructor is requested to provide appropriately supervised opportunities for practice when patients are unavailable, or the situation warrants patients not be used.
- Materials such as equipment manuals, treatment protocols, and home programs should be made available to and utilized by students.

• Students are required to attend all departmental in-services if scheduling permits.

SITE SELECTION

The Physical Therapist Assistant program's philosophy toward clinical education is one of quality supervision in a progressive treatment setting presenting a variety of learning experiences. In selecting a site, the ACCE will talk with the Clinical Coordinator (CCCE) or director of the physical therapy department of the prospective clinical facility. The facility will be evaluated to determine if an appropriate clinical experience may be obtained (e.g., sufficient patient load, treatment variety, and consistent quality available clinical supervision). If mutual agreement can be reached regarding the privileges and responsibilities of each facility, steps will be taken to obtain a signed clinical agreement. The sites are chosen first for their educational value. This may involve the student to be assigned to a site that is not as convenient for their personal situation. We have some clinical sites that are up to 200 miles from campus. Students are required to pay for all costs associated with the clinical portion of the program including transportation, housing, and emergency medical care (if required). There are 3 required clinical rotations. One is in outpatient orthopedics, one in acute inpatient and/or one in long term care or skilled nursing. Additional setting opportunities can include home health, pediatrics, and outpatient neuro; however, these are not required nor guaranteed. These assignments are made based on class rank academically after the first summer school grades are recorded in addition to ACCE consideration. The student will complete the 3 clinical rotations in 3 separate environments. The student will not contact a clinical site to set up a clinical but will submit their request to the ACCE for consideration.

CLINICAL ASSIGNMENTS

It is essential that written work be submitted on expected due dates. Completion of all paperwork is necessary for a satisfactory clinical grade in the course. Consistent failure to turn in assignments on time will result in an unsatisfactory grade. The instructor has the right to extend the due date on an individual basis if notified in advance of the circumstances.

In addition to assignments listed in the clinical course syllabi, the clinical instructor may assign projects or presentations that are pertinent and significant to a student's clinical education.

CLINICAL VISITS

The Academic Coordinator of Clinical Education and/or other faculty members will make clinical visits by telephone and/or on-site visits. For Clinical I the ACCE or other core faculty will make every effort to complete an on-site visit but a visit by telephone will be completed. For Clinical II and III, telephone visits will be made with each Clinical Instructor or an on-site visit if deemed necessary.

ATTENDANCE

Clinical education is integrated into the program curriculum, allowing clinical experiences concurrently with academic course work or at the latter portion of the academic semester. Clinical sites and clinical instructors may vary with the semester and clinical course level. Students are responsible for their own transportation and housing accommodations for clinical experiences. Students will not receive monetary compensation for clinical experiences.

- Students must complete the total number of hours required for each clinical affiliation or an incomplete "I" will result.
 - o PHTA 2333 Clinical Experience I: This clinical experience offers 160 total contact hours. At minimum, the students must complete 144 contact hours, taking into consideration any of the holidays or release time.
 - PHTA 2434 & 2534 Clinical Experience II & III: This clinical experience offers 200 total contact hours per clinical. At minimum, the students must complete 188 contact hours per clinical, taking into consideration any of the holidays or release time.
- Students should advise their Clinical Instructor (CI) and the Academic Coordinator of Clinical Education of an absence prior to the time the student is scheduled to be at the clinic. Repeated absences may place the student at risk for not completing the program.
- Students are expected to arrive and be prepared to begin the clinical day on time.
- All absences are made up with the Clinical Instructor's permission.
- If possible, arrangements for clinical make-up should be made at the time the student notifies the CI and ACCE of an absence.

CONFIDENTIALITY

Student information and records will be treated confidentially. Only those people involved in the student's educational process will have access to the student's records, which includes the program director & clinical coordinator. The clinical facility will have access to the student immunization record, criminal background check, drug screen results, and CPR certification after placement has been determined for the clinical experience. Access by any other person will require a release of information statement signed by the student.

Students will be oriented to and will observe all procedures related to patient confidentiality and release of information during all clinical contact.

STUDENT EVALUATION

Student's clinical performance will be evaluated mid-rotation and at the completion of the rotation. The ACCE will provide the Clinical Instructor with the Clinical Assessment Tool and directions for completing the evaluation. The Clinical Instructor will complete the evaluation form and review the evaluation with the student at mid-rotation and the end of the rotation. Clinical Instructors are responsible for direct supervision of the student. Clinical Instructors must be a physical therapist or physical therapist assistant.

In the event the student is not meeting the objectives for the clinical experience or patient, student, or staff safety is compromised, the Clinical Instructor should notify the ACCE immediately.

CLINICAL REMEDIATION POLICY

A student who is not achieving the clinical goals during the clinical experience will go through a remediation process to achieve expectations for the course. The Academic Coordinator of Clinical Education (ACCE) will meet with the student and clinical instructor to address any deficits and/or concerns. The ACCE will assist in establishing a plan for remediation within the established time frame. Additional time will be scheduled if needed for successful completion of all clinical goals. Other options for consideration by the ACCE for clinical remediation include a change of the clinical instructor and/or clinical facility.

DISMISSAL FROM CLINICAL ASSIGNMENT

Students who exhibit conduct that constitutes a threat to the safety of patients, faculty, themselves, other students, or clinical staff may be involuntarily dismissed from active participation in clinical experiences or from the PTA program. Additionally, when a student's performance in the clinical setting is unsatisfactory and the student is unable to demonstrate competence, the student may be dismissed from active participation in the clinical experience or from the PTA program.

Ordinarily a student would receive a warning or be placed on probation prior to being dismissed. However, summary action may be taken in order to protect the safety and/or well-being of other students, faculty, patients, or clinical staff without prior warning or opportunity for improvement being extended to the student.

GUIDELINES FOR PROTECTION OF HUMAN PARTICIPANTS IN EDUCATIONAL SETTINGS

I. Introduction

These guidelines are intended for use by faculty, staff, and students when using human subjects for demonstrations and/or laboratory activities. These guidelines are intended to cover situations in regularly scheduled courses, special seminars, continuing education programs, and clinical education settings.

Safeguarding the rights and welfare of human subjects is primarily the responsibility of the coordinating faculty member. The policy of this institution is that demonstrations and/or laboratory activities placing human subjects at risk shall be undertaken only when documentation of informed consent exists.

II. Definition

- A. "Participant at risk" means any individual who may be exposed to the possibility of injury including physical, psychological, or social injury, as a consequence of participation in planned educational activities.
- B. "Informed Consent" means the knowing consent of a competent individual. The basic elements of informed consent are the competency of the person giving the consent, disclosure of material information, understanding by the person giving consent, and voluntary consent of said person. The information provided to the person giving the consent should include:
 - 1. The disclosure of all information that a reasonable person would want to consider before participating in the program, including an explanation of the procedures and their purposes
 - 2. A description of any attendant discomforts and/or precautions
 - 3. An offer to answer any inquiries concerning the procedure
 - 4. An instruction that the person is free to withdraw his/her consent and to discontinue participation in the activity at any time.

III. Documentation of Informed Consent

The procedure used to obtain legally effective informed consent shall be fully documented. The documentation of the informed consent should be in writing and should include the signature of the person giving consent.

Record of informed consent should be maintained by the sponsoring faculty member with student grading documents and preserved for a period of no less than three years.

STUDENT INJURY DURING CLINICAL

Any injury sustained by a student in the clinical area must be reported and the required health care facility report filed. A report concerning the injury will be written up by the student and clinical instructor and placed in the student's college file.

- Reporting such an injury to the clinical instructor as soon as possible and seeking medical attention is the responsibility of the student.
- If the injury is of such a nature that the student could not provide safe patient care or might further aggravate the injury by returning to class or the clinical areas as determined by the clinical instructor involved, the student will be required to provide a Health Status Release Statement signed by a physician (Appendix D). This will be required before the student may return to class or clinical.
- The student is responsible for the medical expenses incurred because of an injury.

STANDARD PRECAUTIONS

Since medical history and examination cannot reliably identify all patients infected with HIV or other blood borne pathogens, Standard Precautions should be consistently used for all patients. This approach previously recommended by the Center for Disease Control (CDC) and referred to as "universal blood and body fluid precautions" should be used in the care of all patients, especially those in emergency care settings in which the risk of blood exposure is increased and the infection status of the patient is usually unknown.

- All health care workers must routinely use appropriate barrier precautions to prevent skin
 and mucous membrane exposure when contact with blood or other body fluids of any
 patient is anticipated.
 - o Gloves must be worn for touching blood and body fluids, mucous membranes or non-intact skin of all patients.
 - o Gloves must be worn for handling items or surfaces soiled with blood or body fluids.
 - o Gloves must be worn for performing venipuncture and other vascular access procedures.
 - o Gloves should be available in all patient rooms, exam rooms, on crash carts, and should be carried in pockets of health care workers.
 - o Gloves must be changed, and hands washed after contact with each patient.
 - o Masks and protective eye wear or face shields must be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure of mucous membranes of the mouth, nose, and eyes.
 - o Gowns or aprons must be worn during procedures that are likely to generate splashes of blood or other body fluids.
- Routine patient care not involving contact with blood or other body fluids, mucous membranes or non-intact skin does not require the use of any barrier methods. Routine careful hand washing is required before any patient contact.
- Hand and other skin surfaces must be washed immediately and thoroughly if contaminated with blood or other body fluids. Hands should be washed immediately after gloves are removed. Use of these barrier methods in no way eliminates the need for appropriate hand washing before and after patient contact.
- All health care workers must take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during disposal of used needles; and when handling sharp instruments after procedures.
 - o To prevent needle stick injuries, needles must not be recapped, purposely bent or broken by hand or otherwise manipulated by hand.
 - o After they are used, disposable syringes and needles, scalpel blades and other sharp items must be placed in puncture-resistant containers for disposal; the puncture-resistant containers must be located as close as practical to the use area. Large bore reusable needles must be placed in a puncture-resistant container for transport to the reprocessing area.
- Although saliva is not implicated in HIV transmission, to minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags or other ventilation devices must be available for use in areas in which the need for resuscitation is predictable.
- Health care workers who have a lesion with exudates or weeping dermatitis should refrain from all direct patient care and handling patient care equipment until the condition resolves.
- Pregnant health care workers are not known to be at greater risk of contracting HIV infection than health care workers who are not pregnant; however, if a health care worker developed HIV infection during pregnancy, the infant is at risk of infection resulting from

- perinatal transmission. Because of this risk, pregnant health care workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission.
- There is no data suggesting an increased risk of other infections (herpes simplex, cryptosporidiosis, etc.) from HIV-infected patients to health care workers. Careful adherence to these precautions should adequately protect health care workers, including those women who are pregnant or of childbearing age.
- Invasive Procedures:
 - o For this document, an invasive procedure is defined as:
 - Surgical entry into tissues, cavities or organs or repair of major traumatic injuries in an operating or delivery room, emergency department or outpatient setting, including both physicians' and dentists' offices.
 - Cardiac catheterization and angiographic procedures
 - Vaginal or caesarean delivery or other invasive obstetric procedures during which bleeding may occur.
 - Manipulation, cutting or removal of any oral or perioral tissues, including tooth structure, during which bleeding occurs or the potential for bleeding exists.
 - o Standard precautions combined with the following shall be the minimum precautions for all such invasive procedures.
 - All health care workers who participate in invasive procedures must routinely use appropriate barrier precautions to prevent skin and mucous membrane contact with blood and other body fluids of all patients.
 - Protective eye wear of face shields must be worn for procedures that commonly result in generation of droplets, splashing/spraying of blood or other body fluids or the generation of bone chips.
 - Gowns or aprons (made of materials that provide an effective barrier) must be worn during invasive procedures likely to result in splashing of blood or other body fluids.
 - If a glove is torn or a needle stick or other injury occurs, the glove must be removed, and the new glove donned promptly as patient safety permits.
- Patient Specimen Labeling
 - Implementation standard precautions for all patients eliminates the need for use of the isolation category of "blood and body fluid precautions" previously recommended by the Centers for Disease Control for patients known or suspected to be infected with blood borne pathogens. Standard precautions (e.g., airborne isolation) should be used as necessary if associated conditions such as tuberculosis are diagnosed or suspected. Likewise, implementation of standard precautions for all patients eliminates the need for warning labels on specimens since blood and other body fluids from all patients should be considered infected.

INCIDENT REPORTS

When a student makes an omitted or committed error while providing patient care and the error requires that an incident report be placed on file at the health care facility, the following procedure will be implemented:

- If the student becomes aware of the error before the Clinical Instructor, the student will immediately inform the instructor.
- As soon as the error has been noted, the student and the Clinical Instructor will notify the PT in charge of the department where the error occurred.
- The Clinical Instructor will assist the student in completing the required health care facility incident report and will cosign the report with the student. The student will follow the facility's procedure for incident reporting.
- The Clinical Instructor will notify the PTA program director ACCE as soon as possible.
- The Clinical Instructor will document the incident for the student's evaluation. The report will document the nature of the error, the circumstances surrounding the incident, and the corrective action taken by the instructor regarding the student.
- The incident will be reflected on the student's evaluation form.

APPENDICES

APPENDIX A

FACTS ABOUT HEPATITIS B

What is Hepatitis B?

Hepatitis B (formerly called serum hepatitis) is a viral infection that causes swelling of the liver. While most people who get Hepatitis B recover from the disease, a few become chronic carriers who can pass the virus on to others for a long time.

What are the symptoms of Hepatitis B?

People infected with the Hepatitis B virus (HPV) often feel weak and vaguely ill, lose their appetite, run fevers, and develop headaches. Less common symptoms include muscle pain, darkened urine, jaundice (yellow skin and whites of eyes), nausea, abdominal discomfort, depression, and irritability. Symptoms can begin as soon as six weeks or as long as six months after infection with HBV.

How is Hepatitis B spread?

People with acute Hepatitis B infections and those who are chronic carriers have HBV in their blood, semen, saliva, and other body fluids. These infected fluids enter the blood of susceptible (non-immune) people through mucous membranes or breaks in the skin. Hepatitis B is most easily spread to drug users who share needles, sexual partners of infected people, and health care workers who accidentally stick themselves with used needles. Pregnant women who have HBV in their blood can pass the virus to their babies during delivery. Sharing items such as toothbrushes, razors, and washcloths with infected people can also spread the infection.

Who gets Hepatitis B?

In the United States, the estimated lifetime risk of HBV infection can be as low as 5% or as high as 90% depending on circumstances.

- Infants born to infected mothers
- Users of intravenous drugs
- Sexual partners of infected people
- People with many sexual partners
- Health care workers
- Anyone else who has frequent blood contact

Clients and staff of institutions for the mentally retarded and housemates of chronically infected people are at higher risk than the general population, but lower risk than those listed above.

Is Hepatitis B dangerous?

Most people (about 90%) who get Hepatitis B recover within 6 months of their first symptoms. Some others, however, become chronic Hepatitis B carriers. These carriers can develop chronic liver disease, that may lead to cancer and cirrhosis (scarring and shrinking) of the liver. Carriers can also put their sexual partners, families, and housemates at risk of infection.

Can Hepatitis B be treated?

Currently there are no drugs specifically for treating Hepatitis B. However, researchers are working on drugs for treating chronic hepatitis.

Can Hepatitis B be prevented?

The best way to prevent Hepatitis B is to avoid contact with the body fluids of infected people. A vaccine for Hepatitis B given in three separate doses is available for people who have not yet been exposed but are at high risk because of occupation or lifestyle. The vaccine is safe for most people with the most common complaint being soreness at the injection site. People who receive the vaccine as a precautionary measure can continue to donate blood.

People, who have been exposed to Hepatitis B, such as newborn infants of infected women, are given a solution called hyper immune Hepatitis B globulin, or HBIG, as well as the vaccine. HBIG is a concentrated solution of natural disease-fighting proteins made by the human body. This antibody solution is made from donated blood that is treated so it cannot pass on the AIDS virus. People who receive an injection of HBIG are only "borrowing" temporary protection against Hepatitis B. This is why people at high risk of another exposure are also given the vaccine.

What is the difference between Hepatitis B and other kinds of hepatitis?

The symptoms of different kinds of hepatitis are similar so blood tests are necessary to make a definite diagnosis. However, the viruses that cause different kinds of hepatitis spread in different ways. Hepatitis B and non-A, non-B Hepatitis are usually spread through body fluids, while Hepatitis A is spread through contaminated food, water, or stool (feces).

Where can I get more information?

- Your personal doctor
- Your local board of health
- Your state department of public health

APPENDIX B

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM HEPATITUS B VACCINATION DECLINATION FORM

DATE	
STUDENT NAME	
STUDENT ID#	
materials I may be at risk of acquiring necessary information concerning He vaccinated with Hepatitis B vaccine. I understand that by declining this vac B, a serious disease. If I should contraction Northeastern Oklahoma A&M Colleg practice as a student responsible. I al	pational exposure to blood and other potential infectious g Hepatitis B virus (HBV) infection. I have received the patitis B vaccine and have been given the opportunity to be However, I decline the Hepatitis B vaccination currently. Eccine, I continue to be at risk of acquiring Hepatitis ract Hepatitis B virus (HBV) infection, I will not hold ge or any health care facility where I have had clinical so understand that by declining this vaccination that I may obtations in a timely manner as some clinical sites will refuse series.
successors, and assigns, fully release Regents for the Agricultural and Med Mechanical College, the Clinical Pra colleges, departments, employees, fa heirs, successors, assigns executors capacities, of and from any and all r proceedings, damages, losses, and ex	ED, I do, for myself, my heirs, executors, administrators and discharge and undertake to hold harmless the Board of chanical Colleges, Northeastern Oklahoma Agricultural and ctice Facility, and all of their respective officers, members aculty members, students, and agents, together with their and administrators, in both their personal and official manner of claims, demands, actions, causes of action, suits penses of any and every kind or nature whatsoever, relating my decision not to take the Hepatitis B vaccine.
•	ve and foregoing Vaccination Declination Form and that late this release voluntarily and with full knowledge of its
Student Signature	Date
Director, Department of PTA	Date

APPENDIX C

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM HEPATITIS B VACCINE INTENT FORM

DATE	:
TO:	PTA Program Staff
FROM	: (Student's full name)
RE:	Hepatitis B vaccine
	I have received information regarding the Hepatitis B vaccine, and I am planning to be vaccinated. I will provide verification that I have received the vaccine to NEO A&M College. This written verification will be kept in the PTA office.
	I will also provide my clinical supervisors with this verification at the appropriate times.
	I have decided not to receive the Hepatitis B Vaccine series. I understand in declining this vaccination that I may not be able to complete my clinical rotations in a timely manner as some clinical sites will refuse to accept me without the vaccination series.
<u>(U.</u>	
(Signal	ture of student)

APPENDIX D

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM ADMISSION MEDICAL RECORD

TO BE COMPLETED BY THE APPLICANT'S PHYSICIAN:

i nave examined.			
(Last)	(First)	(Middle)	(Maiden)
Social Security Nu	mber (last 4 digits):	Date of Birth: _	
A&M College, and	person is a Physical Thered I have found no condition forming the duties of the position	(see attached requirement	its) that appears to preven
	no indication of any condi- th care setting or other stude		a hazard to the health of
Date	Physician	n's Name (Please Print)	
	Physicia	ı's Signature	

- The clinical physical therapy setting requires the employee to have a reasonable degree of mobility and to lift heavy objects (up to 50 lbs.). In addition, the student's coordination needs to be such as to allow for fine manipulation and movement. Gross and fine motor coordination as to respond promptly and implement the skills required in meeting patient health care needs safely. These include, but are not limited to, manipulation of equipment and performance of CPR.
- The clinical physical therapy setting requires visual acuity, such as is needed to make accurate measurements of body parts and/or movement, and for the observation necessary for monitoring patient safety. Students with visual defects that cannot be corrected with glasses or contacts will find physical therapy work very difficult. Students with correctable visual defects have been able to compensate for these problems and work successfully in the physical therapy setting.
- The clinical physical therapy setting requires auditory perception such as to receive verbal communication from patients and members of the health care team, to assess

health needs of people using monitoring devices such as stethoscopes, cardiac monitors, fire alarms, etc. Students with auditory defects that cannot be corrected with hearing aids or devices will find physical therapy work very difficult. Students with correctable auditory defects have been able to compensate for these problems and work successfully in the physical therapy setting.

- The clinical physical therapy setting requires communication and language skills to interact effectively with patients and members of the health care team. These skills include the ability to speak, comprehend, read, and write for effective communication as may be necessary in the patient's interest and safety.
- Students who are interested in the physical therapy profession need to be emotionally, mentally, and physically capable of coping with the eight-hour day, working revolving schedules to include weekends, handle work place relationships, accept supervisory direction and the stress that is part of a continuous learning environment. Intellectual stability is needed to implement the plan of care for their patients.

APPENDIX E

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM HEALTH STATUS RELEASE STATEMENT

RELEASE DATE	
Director of Physical Therapist Assistant Program Northeastern Oklahoma A&M College 200 I Street Northeast Miami, OK 74354-6497	n
Director:	
	is under my care for the following
condition(s):	
I have examined and assessed the above individu	al and do certify that he/she is able to return to
class and perform ALL clinical/laboratory physic	cal therapy activities in a manner that will not
harm the student or compromise patient safety.	
	ATTENDING PHYSICIAN:
	Printed name
	Signature
	Mailing Address
	City, State, ZIP
	Telephone Number

APPENDIX F

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM LIABILITY WAIVER

I acknowledge and understand that many hazards are associated with participating in laboratory and clinical rotations as a student in the Associate in Physical Therapist Assistant Education Program, including, but not limited to, needle sticks, inhalation of microorganisms, and contact with infected body fluids.

I further acknowledge that I am solely responsible for following standard precautions and other infection control guidelines in practice and providing my own health insurance.

If I am injured or become ill during the course of my student activities, I will immediately notify my instructor. I acknowledge that the decision to seek medical attention, and the resulting financial responsibilities are mine alone.

I agree to hold harmless Northeastern Oklahoma A&M College, and its agents, representatives, and employees, from any and all claims, damages, losses and expenses, including reasonable attorney's fees, in case it shall be necessary to file an action arising out of performance and participation in laboratory or clinical activities as a student in the Physical Therapist Assistant program, for bodily injury, illness, or death.

Signed	
Date	
Witness	

APPENDIX G

NORTHEASTERN OKLAHOMA A&M COLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM PROMOTIONAL RELEASE

I,	do hereby authors	orize Northeaste	rn Oklahoma	A&M College
Physical Therapist Assist	tant Program permission to	use any record	led media (i.e	., audio, video
photographs, written text) in which I may appear to	be used in the	classroom for	the purpose of
instruction and for use compensation.	in promotional materials.	I understand	that I will n	ot receive any
Signed:		_ Date:		

APPENDIX H

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM EXIT EXAM CONSENT FORM

For quality assurance purposes we participate in an ongoing assessment of all aspects of the program. The Commission on Accreditation in Physical Therapy Education (CAPTE), our accrediting body, monitors the pass rate of the first-time test takers of the state board exams. Our goal is that 80% of students taking their board exams will pass the first time. After assessing why students did not pass the first time and consulting with other PTA programs, it was decided to have a comprehensive exam on the last day of the spring semester.

The pass point for this test will be set at the national average of all students taking the test. The student's grade for the test and the national average are given upon completion of the test. The test will affect the grade of the last clinical rotation, PHTA 2534. If a student does not achieve a score at or above the national average, he or she may be given a second test called PEAT on the last day of Clinical II Experience. If a passing score is not achieved the second time, the student will be given a second Score Builders test on the last day of Clinical III Experience. If a passing score is not achieved the third time, the student will be given a PEAT comprehensive exam by August 31. Upon passing the exam, the student will be given the grade earned per the Clinical Assessment Tool. If a passing score is not achieved by the fourth time, the student will receive an "F" in PHTA 2534, will not complete the program, and therefore will not be allowed to take the official state board exam.

The first test is a computerized test produced and graded by Score Builders that is paid for by the student at the orientation meeting. This company also provides the seminar for the students to prepare them to be successful in studying for and passing the state board exam. Along with the seminar and supplemental material, they offer practice board exam tests for student preparation. If the student does not pass the Score Builders exit exam, the student will not be allowed to sit for the July state board exam which is given before graduating from the NEO PTA Program.

The 2nd test will be the PEAT from FSBPT (testing agency for all PT & PTA's), which is a retired board exam. The 3rd and 4th test will be standardized tests from either Score Builders or FSBPT and will be paid for by the student at that time.

I understand that I	must pass the	Score Builder	rs OR the	e PEAT	comprehensive	exam t	o pass
PHTA 2534 and com	plete the Physi	ical Therapist	Assistant	t Progran	1.		
	•	•		Ü			

Printed Name	Date	
Signature	Witness Signature	

APPENDIX I

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM REQUIRED COURSE SEQUENCE

Third Semester- Summer*

Introduction to Physical Therapy Physical Therapy Procedures I	PHTA 1292		Mon- Thurs June 7- July 1 8:30 – 3:50PM with lunch break
		3 credit flours	

Fourth Semester- Fall (13 weeks) *

Physical Therapy Procedures II	PHTA 2343	3 credit hours	Fall Class Hours
Orthopedic Rehabilitation	PHTA 2388	8 credit hours	Mon & Wed 8:30-4PM
Pathology for the PTA	PHTA 2432	2 credit hours	Tues & Thurs 8:30- 3:15PM
Clinical Preparation I	PHTA 2321	1 credit hour	
-		14 credit hours	

Intersession- Fall (5 weeks) *

Clinical Experience I	PHTA 2333	3 credit hours	4 week of outpatient clinical
			rotation Mon-Fri 8-5PM**

Fifth Semester-Spring (16 weeks) *

Kinesiology for PTA	PHTA 2363	3 credit hours	Mon & Wed 8:30-2:30PM
Neurology & Pathology	PHTA 2353	3 credit hours	Tues & Thurs 8:30-12:15PM
Selected Topics in PT	PHTA 2473	3 credit hours	
Rehabilitation		4 credit hours	
		13 credit hours	

Sixth Semester- Summer (10 weeks) *

Clinical Experience II	PHTA 2434	4 credit hours	2 clinical rotations
Clinical Experience III	PHTA 2534	4 credit hours	5 weeks each Mon-Fri 8-5PM**
		8 credit hours	

^{*}Students must be accepted into the program to enroll in these classes.

Note: In order to progress through the technical portion of the PTA program, each previous semester must be successfully completed. Prior to the first clinical experience, all courses in that semester must be successfully completed.

^{**}The clinical site's hours may differ, but the total time will average 40 hours per week of clinical rotation.

APPENDIX J

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM CRIMINAL RECORD CHECK & DRUG SCREEN AGREEMENT

Upon admission to the Physical Therapist Assistant (PTA) Program at Northeastern Oklahoma A&M College (NEO), I will submit the program's required criminal record background check and drug screen. I understand that I will pay Certified Background.com directly for the cost of my background check and drug screen and that NEO is not responsible for that cost. I understand that some clinical healthcare agencies require a criminal background check of current PTA students and that clinical agencies have the right to deny a student clinical placement at their facility if the student has been convicted of a felony or misdemeanor. If a clinical agency refuses me access due to a criminal conviction, I will be unable to meet the clinical objectives of the PTA course for which I am enrolled. In this event, I agree and understand that I will be immediately dismissed from the PTA Program.

I also understand and agree that my continued admission in the PTA Program is contingent upon my immediate, written notification of *any change* in my criminal record to the PTA Program office. Failure to notify the PTA Program of any change in my criminal record at any time following my initial admission could result in immediate dismissal from the program.

I also understand that applicants for PTA licensure must provide the Oklahoma Board of Medical Licensure and Supervision necessary information regarding drug, alcohol, or conviction history for determination of licensure eligibility. The Oklahoma Board of Medical Licensure and Supervision has the power to deny a PTA graduate the right to take the FSBPT licensing examination.

As a further condition of my admission and continuance in the program, I agree and consent to an initial drug screen and random drug screening at the discretion of the PTA Faculty and/or clinical faculty, and that the costs of <u>all</u> such screening will be my responsibility. The NEO A&M College Drug-Free Campus Policy, principles related to drug testing, and procedures that will be followed in the event of suspected abuse by students will be followed per policy of the current PTA Student Handbook.

My signature below indicates that I have been fully informed of, understand and agree to the above information and conditions. I hereby authorize the NEO PTA Program to release my criminal record background check information and/or drug screen results to any and all clinical facilities to which I will be assigned each semester.

My admission into the program is contingent upon this form being signed, notarized, and returned to the

PTA Program office.

Student Name

STATE OF ______

COUNTY OF _____

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named _______, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who upon oath acknowledged that he/she the within named instrument for the purposes therein contained, this the _____ day of ______, 20__.

My commission expires:

NOTARY PUBLIC STATE AT LARGE

APPENDIX K

NORTHEASTERN OKLAHOMA A&M COLLEGE DRUG SCREENIG POLICY FOR PROGRAMS WITH CLINICAL COMPONENTS

Scope

The Physical Therapist Assistant Program includes clinical experiences as part of the degree completion requirements. The program enters into agreements with participating clinical affiliates for clinical experiences designed to meet these program requirements. The information in this policy is intended for all applicants admitted to the Physical Therapist Assistant Program and for all currently enrolled Physical Therapist Assistant Program students in meeting the clinical affiliates' requirements for drug screening and compliance with the clinical affiliates' policies, as defined in this policy.

Compliance with Federal Regulations

As an institution that receives federal funding, Northeastern Oklahoma A&M College ("NEO") is legally bound to comply with the Federal Drug-Free Schools and Communities Act ("DFSCA"), which mandates the implementation of drug prevention programs and prohibits the use of illegal drugs on campus and/or at NEO-sponsored events and activities. Furthermore, NEO must also comply with the Federal Controlled Substances Act ("FCSA"), which criminalizes the growth and use of marijuana. Therefore, despite the recent passage of State Question 788, federal law requires NEO to adopt and adhere to policies prohibiting the unlawful use, possession and/or distribution of illegal drugs, including marijuana. Consequently, NEO prohibits the use, possession, distribution or cultivation of marijuana for any reason at both the Miami Campus and the Grove Center and at any events authorized or supervised by NEO.

Principles

The general principles used by the Physical Therapist Assistant Program Faculty in developing this policy are that:

- 1. Substance abuse compromises both the educational process and client care.
- 2. The Physical Therapist Assistant Program has a commitment to the health, welfare, and safety of students and clients.

Definitions

Controlled Substance

A drug or substance that is listed in Schedules I through V of the Federal Controlled Substances Act (21 U.S.C. § 812).

Drug Screen

A laboratory test administered for the purpose of determining the presence or absence of a Controlled Substance, its metabolites, or alcohol.

Medications or Prescribed Drugs

Medications or prescribed drugs, for purposes, of this policy, are drugs that an individual may be taking under the direction of a licensed medical professional to address specific physical, emotional, or mental condition that could impair their ability to perform required duties. To lawfully take a prescription drug, a student must be under the direct medical care of the licensed health care professional. Although medical marijuana is legal in the State of Oklahoma, marijuana is a Schedule 1 Controlled Substance under 21 U.S.C. § 812 and continues to be a prohibited substance for purposes of this policy even with a valid prescription or license.

Identification of Vendors

The Physical Therapist Assistant Program will designate a qualified and approved vendor(s) to perform the drug screenings. Results from any company or government entity other than those designated by the Physical Therapist Assistant Program will not be accepted.

Allocation of the Cost

The student is responsible for all costs associated with the required drug screenings during the initial enrollment process and any additional drug screening in accordance with the requirements in this policy.

Policy for the Possession, Use and/or Distribution of Drugs

It is the policy of the NEO Physical Therapist Assistant Program to provide a learning environment that is free from the use, sale, possession, or distribution of illegal controlled substances or the improper or abusive use of alcohol and other legal drugs. Additionally, this policy requires that Physical Therapist Assistant Program students perform their duties without the presence of illegal controlled substances, alcohol, or medicine or prescribed drugs that may impair a student's ability to perform required duties.

The manufacture, use, possession, sale, purchase or transfer of illegal controlled substances, alcohol, and/or medicine or prescribed drugs that may impair a student's ability to perform required duties by a Physical Therapist Assistant Program student is prohibited. Arriving at Cunningham Hall, Science Lab Building, clinical affiliate, or other school related location, while under the influence of any of the above substances is prohibited. The Physical Therapist Assistant Program prohibits the use or abuse of such drugs.

Students in the Physical Therapist Assistant Program practicing in the clinical agencies will be subject to and must abide by the policies of the agency in which they are practicing as a Physical Therapist Assistant Program student. A student may be required to have alcohol or drug screening alone or in combination. Any student who refuses to submit to initial or subsequent

screening will be deemed to have submitted a positive Drug Screen result and will be dismissed from the Physical Therapist Assistant Program.

Drug Screening Policy

The objective of this policy is to ensure a safe, healthy and efficient work environment for students and the community. The faculty and staff of the Physical Therapist Assistant Program will utilize every reasonable measure to maintain a drug and alcohol free environment.

Physical Therapist Assistant Program will require a 10-panel Drug Screen, which tests for: Amphetamines, Barbiturates, Benzodiazepines, Cocaine Metabolites, Marijuana Metabolites, Methadone, Methaqualone, Opiates, Phencyclidine, and Propoxyphene.

In addition, the Physical Therapist Assistant Program may additionally require alcohol screening.

Rationale

- 1. Health care providers are entrusted with the health, safety, and welfare of patients/clients; have access to confidential and sensitive information; and operate in settings that require the exercise of good judgment and ethical behavior. Thus, an assessment of a student's suitability to function in a clinical setting is imperative to promote the highest level of integrity in health care services.
- 2. Clinical facilities are increasingly required by the accreditation agency Joint Commission on Accreditation of Healthcare Organizations ("JCAHO"), to provide a drug screening for security purposes on individuals who supervise care, render treatment, and provide services within the facility.
- 3. Clinical rotations are an essential element in the degree programs' curricula. Students who cannot participate in clinical rotations due to a positive drug screening are unable to fulfill the requirements of a degree program. Therefore, these issues must be resolved prior to a commitment of resources by a student admitted to the (name of program) and/or the College.
- 4. Additional rationale include (a) meeting the contractual obligations contained in affiliation agreements between the Physical Therapist Assistant Program and the health care facilities; (b) performing due diligence and assessment of competency of all individuals who may have contact with patients/clients; (c) ensuring uniform compliance with JCAHO standards and agency regulations pertaining to human resource management; and (d) meeting the public demands of greater diligence in light of the national reports on deaths resulting from medical malpractice and medical errors.

Procedures for Drug Screening

Initial Drug Screening (Admission to the Program)

Drug screening is required of all applicants upon acceptance and admission to the Physical Therapist Assistant Program. The drug screen must be completed and results must be available prior to the first day of classes that require admission to the Physical Therapist Assistant Program as a condition for enrollment in the class. In accordance with clinical affiliation agreements, a student will not be able to attend clinical, and therefore, will be unable to complete the clinical components of the program if the student has a positive drug screen and has not been cleared through the review process (see Procedure for Drug Screening). Upon admission to the Physical Therapist Assistant Program, students will be provided with the necessary procedures and consent forms for the required drug screening.

- 1. Students must complete, sign, and notarize the Student Acknowledgement/Drug Screen Consent and Release Form and return the form to the Physical Therapist Assistant Program.
- 2. The Physical Therapist Assistant Program faculty will notify the student of the date, time, and location for the drug screening.
- 3. A urine sample for testing will be collected and processed by an outside vendor selected by the Physical Therapist Assistant Program. Students will be responsible for the cost of the drug screening.
- 4. Any positive finding from the drug screen will be forwarded to a contracted reference laboratory for confirmation of results. The student will be responsible for the additional cost of the confirmatory test.
- 5. Students with a positive drug screen report will have an opportunity to consult with a Medical Review Officer, provided by the vendor, to verify whether there is a valid medical explanation for the screening results. The vendor will notify the Physical Therapist Assistant Program of a clear test. If the Medical Review Officer does not clear the test, the student may retest one time, 21 days from the initial test at the student's expense. If the second drug screen is negative and/or cleared by the Medical Review Officer, the student may continue in the program. Any student with a confirmed positive drug screen not cleared by the Medical Review Officer will be unable to complete the clinical component of the Physical Therapist Assistant Program and, therefore, will be unable to progress through the Program. This will result in the student being administratively withdrawn from the Program.
- **6.** The student must complete the process, including the retest and review by the Medical Review Officer, prior to the first day of class. Students who have not completed the process before the first day of class may not begin the program courses.

Students who have received "confirmed" positive drug screens not cleared by the Medical Review Officer will not be allowed to re-enroll in the Physical Therapist Assistant Program.

Drug Screening for Students Matriculating through the (name) Program

Students may be required to submit to a drug screen at any point in the Physical Therapist Assistant Program as required by a clinical affiliate or if reasonable suspicion exists (see policy and procedure for *Reasonable Suspicion* below). Students who need to complete drug screening will be provided with the necessary procedures and consent forms for the required drug screening by the respective college designee.

- 1. Students must complete, sign, and notarize the Student Acknowledgement/Drug Screen Consent and Release Form and return form to the Physical Therapist Assistant Program.
- 2. The Physical Therapist Assistant Program faculty will notify the student of the date, time, and location for the drug screening, which may be immediately.
- 3. A urine sample for testing will be collected and processed by an outside vendor selected by the Physical Therapist Assistant Program. Students will be responsible for the cost of the drug screening.
- 4. Any positive finding from the drug screen will be forwarded to a contracted reference laboratory for confirmation of results. The student will be responsible for the additional cost of the confirmatory test.
- 5. Students with a positive drug screen report will have an opportunity to consult with a Medical Review Officer, provided by the vendor, to verify whether there is a valid medical explanation for the screening results. The vendor will notify the Physical Therapist Assistant Program of a clear test. If the Medical Review Officer provided by the vendor does not clear the test, the test results will stand.

Students who fail to adhere to the drug screening deadline set by the Physical Therapist Assistant Program will be suspended from all classes until the vendor (see below) provides a clearance documentation to the program designee. Failure to adhere to the drug screening deadline set by the designated degree program may jeopardize status in the program.

Students in the designated programs practicing in the clinical agencies will be subject to and must abide by the policies of the agency in which they are practicing as a student. A student may be required to have alcohol or drug testing alone or in combination. Any student who refuses to submit to initial or subsequent testing may be dismissed from the Physical Therapist Assistant Program.

Drug Screening for Reasonable Suspicion of Substance Abuse

Students in the clinical setting may be screened for drugs based on reasonable suspicion of substance abuse or the use of drugs impairing the student's ability to perform required duties.

Reasonable suspicion may include, but is not limited to:

- Accidents and injuries caused by human error;
- Unusual or serious violations of rules;
- Secured drug supply disappearance;

- Irrational or extreme behavior; or
- Unusual inattention or personal behavior, such as smelling of alcoholic beverages, changes in attitude or performance level, disorientation, confusion or lapses in memory, slurred speech, mood swings, excessive absences and/or tardiness, unexplained disappearances while on duty, and/or imprudent judgment under the set of circumstances.
- Direct observation of unauthorized use or possession of a Controlled Substance;
- Observation of physical symptoms indicative of the unauthorized use of a Controlled Substance;
- Arrest or conviction for a drug related offense;
- Report(s) of unauthorized use or possession of a Controlled Substance that has been corroborated by additional evidence.

This list is for reference only. It does not encompass all possible situations that may warrant drug testing for reasonable suspicion.

Procedure for Drugs Screening for Reasonable Suspicion of Substance Abuse

- 1. All persons reporting activity or behavior that causes Reasonable Suspicion of unauthorized use or possession of a Controlled Substance under this policy shall document the exact reason(s) for these suspicions, including relevant details such as date, location, witnesses present, and the symptoms or actions of the student.
- 2. All such reports shall be made to the Clinical Coordinator; if not available, Program Director or his/her designee, who will conduct an investigation of the reported activities or behavior, including obtaining corroborating statements from other administrators, faculty, employees, students or witnesses where reasonably possible.
- 3. When a determination of Reasonable Suspicion has been made, the Clinical Coordinator; if not available, Program Director or the designated administrator may authorize drug screening for reasonable suspicion.
- 4. Upon approval for the drug screen, the student will be requested to immediately have the drug screen conducted by the approved laboratory, at the student's expense.
- 5. If the result of the student's drug screen is confirmed to be positive through a confirmation test, the testing laboratory will notify the Physical Therapist Assistant Program Director.
- 6. The Physical Therapist Assistant Program Director will notify the student of the results of the drug screen. A student with a confirmed positive drug screen will be dismissed from the Physical Therapist Assistant Program.
- 7. Refusal to submit to reasonable suspicion drug screening will be deemed to have submitted a positive Drug Screen result and will result in in dismissal from the Physical Therapist Assistant Program.

Drug Screening for Students with a Break in Enrollment

Students who withdrew from the Program and were subsequently re-admitted to the Physical Therapist Assistant Program will be subject to a drug screening test prior to the first day of class, as stated in the *Initial Drug Screening* (see above).

Reporting of Findings

Access to Drug Screening Report

The Physical Therapist Assistant Program Director will maintain a list of those students who participated in the drug screening process and the results of the drug screening.

Recordkeeping

Reports and related records (both electronic and paper media) shall be retained in a secure location in the respective college or program office for 5 years, unless otherwise required by law.

Confidentiality of Records

Drug screening reports and all records pertaining to the results are considered confidential with restricted access. The results and records are subject to the Family Educational Rights and Privacy Act ("FERPA") regulations. For additional information on FERPA please see:

http://www.ed.gov/policy/gen/guid/fpco/ferpa/index.html

Falsification of Information

Falsification of information will result in immediate removal from and dismissal from the Physical Therapist Assistant Program.

Board approval 04/26/19

APPENDIX L

Physical Therapist Assistant Program Test Review Form

Instructions: With any grade below 75%, you must complete this form and turn in to the instructor of that course. Failure to do so within 3 days will result in a professionalism deduction until the form has been completed.

Name:		Date: Grade on Test:	Course: Date of Test:	
1)	Did you critically read all the assigne	ed reading material?		
2)	Did you attend all classes?			
3)	Did you complete all assigned tickets to class, study guides, etc.?			
4)	Did you feel like you spent enough time studying the material?			
5)) Did you feel like the quality of your studying was adequate?			
6)	6) Did you study alone, with others, or a combination?			
7)	What content did you not understand	?		
	a. What will you do to make sur	re that you have grasped those	concepts?	
8)	Was there something specific that inf	luenced your grade on this ex	am?	
9)	What will you change to ensure you	improve your grade on the fol	lowing exam?	
after th	wed the above exam and understood vone test review, and I will not make sime	•	erstand the material	

APPENDIX M

Physical Therapist Assistant Program Missed Class Form

Instructions: Complete this form any time you are tardy, leave class early, or are absent from class. Failure to do so within 3 days of your return will result in a professionalism deduction until the form has been completed.

For questions 3 & 4, have the students initial who you received assistance from. It is your responsibility to seek out assistance from your class members. If you are still confused, it is your responsibility to then go to the instructor of the course for assistance.

Name:	Date: Course:
1)	Did you complete all the reading identified in the syllabus for the class period? What pages/ book did you review?
2)	Did you watch recorded sessions/ podcasts for the class? Which specific ones?
3)	Did you meet with class members to discuss content delivered during the class? Please identify the student's names that you met with.
4)	Did you meet with class members to complete practice of lab skills missed if applicable? Who did you meet with? What specific activities did you practice?
5)	Outline the content that you missed and include at least 3 key items or activities that you missed.
Studen	t Signature

APPENDIX N

Physical Therapist Assistant Program Virtual Class Form

Instructions: Complete this form any time you zoom for an entire class period. Failure to do so within 3 days of your return will result in a professionalism deduction until the form has been completed.

For questions 3 & 4, have the students initial who you received assistance from. It is your responsibility to seek out assistance from your class members. If you are still confused, it is your responsibility to then go to the instructor of the course for assistance.

Name:	· ·	Date:	Course:	
1)	Did you receive permission be	forehand to miss class?		
2)	Did you contact the instructor with as much notice as possible beforehand? Note: Emergency/ last-minute situations still provide notice to the instructor.			
3)	What specific lab skills were t	aught in the class when y	you were virtual?	
4)	If there were specific lab skills Have the student who assisted		ractice those and with whom?	
Studen	t Signature			

APPENDIX O

NORTHEASTERN OKLAHOMA A&M COLLEGE PHYSICAL THERAPIST ASSISTANT PROGRAM STUDENT HANDBOOK REVIEW FORM

I acknowledge that I have read and understand the Northeastern Oklahoma A&M College Physical Therapist Assistant Program Student Handbook for the current school year and do agree to abide by the policies set forth in this handbook. I understand this handbook is on the PTA website under "Student Information".

In addition, I understand that I must comply with the policies found in the Northeastern Oklahoma A&M College Student Handbook and College Catalog. The College Student Handbook is located on the college website under "Current Students". The College Catalog is located under "Academics".

Signed	
Date	
Witness	