

DES MOINES  UNIVERSITY

# **CLINICAL EDUCATION HANDBOOK**

(Supplement to DMU Student Handbook)

**Doctor of Physical Therapy Program**

**Department of Physical Therapy**

**College of Health Sciences**

# PREFACE

This Clinical Education Handbook serves as a guide for students during clinical education experiences (CEEs). It contains links to general information, policies, and procedures to ensure that students understand and are meeting expectations during CEE. Students are responsible for becoming familiar with and abiding by the contents of this handbook in addition to the DMU Student Handbook. Students are also expected to follow the American Physical Therapy Association's [Guide for Professional Conduct](#) and [Code of Ethics](#).

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### USEFUL RESOURCE LINKS

American Physical Therapy Association (APTA) - <http://www.apta.org>

APTA Learning Center - <http://learningcenter.apta.org>

Commission on Accreditation in Physical Therapy Education (CAPTE) -  
<http://www.capteonline.org/home.aspx>

E\*Value - <https://www.e-value.net/login.cfm>

APTA Iowa - <http://www.iowaapta.org>

PT CPI Web - [https://cpi2.amsapps.com/user\\_session/new](https://cpi2.amsapps.com/user_session/new)

Federation of State Boards of Physical Therapy (FSBPT) - <https://www.fsbpt.org>

# DOCTOR OF PHYSICAL THERAPY (DPT) PROGRAM

The mission and vision of the DPT program can be reviewed in the Academic Catalog.

Program Outcomes: To review the DPT program's outcome statistics (average graduation rate, average employment rate, average licensure exam pass rate, graduate survey data, etc.) please visit the program's outcomes webpage.

## Overview of DPT Program at DMU

The DMU DPT program is a 34-month long program divided into eight terms. Hands-on skills and movement evaluation form the foundation of the Doctor of Physical Therapy program, while classroom and clinical instruction emphasize problem-solving and critical thinking that prepare students to be exceptional and caring health care providers.

The first four didactic terms cover foundational content such as anatomy, biomechanics, physiology, and professional development. Students are also educated in management and care of patients with musculoskeletal pathologies. Students complete the first of four full-time clinical education experiences (CEE) during the fall of year two. This first CEE is 10 weeks and is an outpatient orthopedics experience.

After the first CEE, students complete neuromuscular and cardiopulmonary content. Students are introduced to the movement systems diagnoses as well as neuromuscular pathologies. The neuromuscular content covers information across the lifespan from pediatrics to the older adult, with progression of handling skills with the neuro population. The cardiopulmonary content includes information on cardiac and pulmonary diagnoses, examination, and treatment concepts in the inpatient environment. Students then complete their second full-time 10-week clinical education experience. This experience can be in any setting and students will either complete the inpatient or an elective clinical education requirement.

After the second full-time CEE, students return to campus for the final didactic term which includes specialty practice areas such as aquatic therapy, wound care, women's health, and advanced manual therapy techniques. Students then complete their final 2 fulltime clinical education experiences which are 8 weeks in length and can be completed in any setting to meet either the inpatient or elective requirement.

The complete curriculum outline of the DMU DPT program can be viewed in the Academic Catalog.

# DPT Clinical Education

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The Des Moines University Clinical Education Program is comprised of full-time clinical education experiences (CEEs) which are integrated throughout the program. The clinical education component of the DPT program is designed to provide students the opportunity to apply and expand upon knowledge and skills gained during the didactic curriculum. The Program goals and Student Learning Outcomes are the foundation of the clinical education curriculum and goals. The goals of the CEEs are to

- Develop entry-level competence in physical therapy practice.
- Demonstrate a commitment to self-evaluation and life-long learning behaviors.
- Establish evidenced-based practice for safe and effective patient/client care.
- Exhibit professional behaviors and develop interpersonal skills to work as part of an interprofessional team.

CEEs are crucial aspects of the DPT student's development to gain important skills and develop professional behaviors and become effective clinicians. CEEs are designed to provide students with experience in the evaluation and management of patients with musculoskeletal dysfunctions, neuromuscular and cardiopulmonary disorders, and acute care diagnoses. The progression of expectations and objectives for each CEE are designed to reach entry level expectations and DPT Student Learning Outcomes at the end of the curriculum. Each student is expected to complete an inpatient and outpatient CEE as well as two elective experiences. In order to ensure depth and breadth of clinical experiences, no more than two similar experiences are permitted. Prior to the selection process for CEE 2, students will complete a clinical education plan and the clinical education advisors will review and reach out to students if there are any concerns. Prior to the selection process for CEE 3 & 4, student will update their clinical education plan and must meet with their clinical education advisor.

## CLINICAL EDUCATION CONTACT INFORMATION

You may access information about PT faculty and staff online (DMU website or internal PT Pulse page). For clinical education concerns, contact the Director of Clinical Education (DCE) or Assistant Director of Clinical Education (ADCE).

Dr. Cindy Utley, DCE  
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## CLINICAL EDUCATION SEQUENCE

**First full-time clinical education experience (CEE) - 1**  
**10 Weeks Oct – Dec**

**Year-2 Fall Term**

This ten-week supervised CEE is designed to provide learners with the first full-time opportunity to utilize skills and clinical reasoning in the management of patients with musculoskeletal disorders. Learners will integrate the five elements of patient management: examination, evaluation, diagnosis, prognosis and intervention. Patient caseloads during the clinical experience may vary and could range from specialty clinics to general hospital outpatient departments. Learners will complete the outpatient clinical education requirement during this experience

*Performance level expectations upon CEE completion: **Advanced Beginner***

**Intermediate full-time clinical education experience (CEE) - 2**  
**10 Weeks June – Aug**

**Year-3 Summer Term**

This ten-week full-time supervised CEE is designed to provide learners with experiences in direct patient management. Students will integrate the five elements of patient management: examination, evaluation, diagnosis, prognosis and intervention. Patient caseloads during the clinical experience may vary. Experiences

could be in practice settings from hospital acute care, acute rehabilitation centers, outpatient clinics, skilled nursing centers, home health, or specialty clinics (e.g. geriatrics, pediatrics, sports medicine). Learners will complete either the inpatient or elective clinical education requirement during this experience.

*Performance level expectations upon CEE completion: **Intermediate***

### Terminal full-time clinical education experience (CEE)-3

Year-3 Spring Term

#### 8 Weeks Jan – Feb

This course is the first of two-final full-time eight-week supervised CEEs completed in the last term of the third year. It is designed to provide learners with experiences in direct patient management of various patient populations. Learners will have the opportunity to integrate all curricular content and begin to manage a full patient caseload. Opportunities are available in a broad spectrum of clinical settings. Learners will complete either the inpatient or elective clinical education requirement during this experience.

*Performance level expectations upon CEE completion: **Advanced Intermediate***

### Terminal full-time clinical education experience (CEE)-4

Year-3 Spring Term

#### 8 Weeks March – May

This course is the second of two-final full-time eight-week supervised CEEs completed in the last term of the third year. It is designed to provide learners with experiences in direct patient management of various patient populations. Learners will have the opportunity to integrate all curricular content and begin to manage a full patient caseload. Opportunities are available in a broad spectrum of clinical settings. Learners will complete either the inpatient or elective clinical education requirement during this experience.

*Performance level expectations upon CEE completion: **Entry Level***

## CLINICAL EDUCATION DEFINITIONS AND ABBREVIATIONS

- **Assistant Director of Clinical Education (ADCE):** The appointed PT faculty member who assists the DCE in carrying out all aspects of the clinical education curriculum.
- **Clinical Education Faculty:** A health professional who has agreed to provide instruction to a DPT student at a clinical site by serving as a SCCE or CI.
- **Clinical Education Plan (CEP):** A flexible planning and survey tool used by students to assist in developing a plan for their clinical education. The student will review annually and update as their areas of interest change. The CEP is used by the clinical education team to evaluate the quantity of available sites based on student's areas of clinical interest and geographic preferences.
- **Clinical Instructor (CI):** The licensed PT employed by the clinical education site that is selected by the SCCE to supervise, instruct and evaluate the performance of the PT student. A minimum of one-year practice experience is required.
- **Clinical Education Affiliation Agreement:** A written, legal document that defines the agreement between DMU and the partnering facility/corporate entity outlining the roles and responsibilities of all parties involved.
- **Clinical Education Site (Facility):** An approved health care site/facility that maintains an affiliation contract with DMU to provide a clinical experience and patient access in a variety of locations and settings.
- **Clinical Site Information Form (CSIF):** A uniform document developed by the APTA that is completed by the SCCE to provide information about the clinical education site. Serves as an aide in selection and student placements. Used to assess the available learning experiences and opportunities for students.
- **Clinical Performance Instrument (CPI):** A standardized online evaluation tool developed by the APTA to assess student performance both at mid-term and upon completion of the CEE.
- **Desire2Learn (D2L):** The learning management system utilized by DMU to disseminate course materials, content and exams.
- **Director of Clinical Education (DCE):** The appointed DPT faculty member, who develops, organizes, supervises, coordinates, and evaluates the clinical education components of the PT curriculum in conjunction with the ADCE.

- **E\*Value:** Clinical education database which maintains student, practicum and CEE site information and availability. E\*Value matches students with clinical assignments. Students also use this program to evaluate and assess different aspects of their clinical experiences.
- **First Come First Served (FCFS):** Clinical education sites that do not hold spots specifically for any physical therapy program. CEE spots with these identified sites are filled as stated- on a First Come First Served basis.
- **Site Coordinator of Clinical Education (SCCE):** The appointed individual at the clinical education site that is the primary contact for the DPT program. This person is responsible for organizing, coordinating, supervising and evaluating the clinical education program at their facility. This individual may also be a CI.
- **Student Physical Therapist (SPT):** Students are required to introduce themselves as a student and sign all documentation with SPT. Patients have the right to refuse treatment by the student.

## CLINICAL EDUCATION AFFILIATION AGREEMENT

The clinical education team is responsible for ensuring all active clinical education sites have current clinical education agreements on file. Prior to a CEE, the academic assistant for clinical education will review agreements for sites that are scheduled to host a student to ensure a fully executed agreement is on file. Sites with outdated agreements or nearing term, will be requested to...

- Review an updated DMU Affiliation Agreement and sign an Implementation Letter, or
- Submit an updated facility agreement to DMU for review and signature

(See Appendix for DMU Affiliation Agreement and Implementation Letter)

## NEW CLINICAL SITES

The DPT Program, in its effort to provide students with the highest quality clinical education experience, will identify, develop, and retain clinical education sites based on a process which is implemented and monitored by the program's Director and Assistant Director of Clinical Education. This policy will facilitate efficient and effective management of clinical education and will enhance the development of long-term relationships with clinical education partners.

The decision to recruit or add new clinical education sites is the responsibility of the DCEs. The DCEs will explore new affiliations with potential clinical education sites. The DCEs will determine if the clinic/facility meets the needs and goals of the program. Clinical education sites are not set up for one time use or for a specific student. The goal is to establish sustainable relationships with all clinical partners.

An extensive amount of administrative time is required to adequately vet a potential clinical site. New sites will be established based upon current educational needs of the program and present status of the clinical education environment.

Following are guidelines for developing new clinical education sites:

- The DCEs will manage all communication between the program and potential sites.
- Students are not permitted to contact potential sites.
- Clinical sites are not set up for one time use only.

Factors considered when developing new clinical sites:

- Quality of education program (does the site meet established standards of the organized bodies – APTA, WCPT, etc.)
- Type of facility/practice (i.e. Medically complex, Rehab, Community and/or niche practice area)
- Location of site
- Likelihood of subsequent students utilizing the site

## HEALTH INFORMATION AND PRE-CLINICAL REQUIREMENTS

STUDENT CLEARANCES FOR ADMISSION AND/OR CLINICAL EXPERIENCE*	
<b>Certified Background Check (CBC)</b>	Completed upon acceptance into the program. Recheck completed annually during Fall term. (Additional state abuse checks performed per state specific requirements based on CEE location).
<b>Child or Adult Abuse Registry Check (Iowa)</b>	
<b>COVID-19 Vaccination</b>	
<b>CPR/BLS Certification</b>	Certified according to the American Heart Association. Initial certification is completed fall term of years 1 and 3.
<b>HIPAA Training</b>	Training completed annually during Fall term. Students will provide certificates to their clinical education site upon request.
<b>OSHA Training</b>	
<b>Bloodborne Pathogens/Universal Precautions</b>	
<b>Mandatory Reporter Training</b>	Training completed during the first-year spring term. Students will provide a certificate to their clinical education site upon request.
<b>History &amp; Physical Exam</b>	Required within one year prior to start of classes and upon requirement of a clinical site prior to CEE.
<b>Flu Shots</b>	Provided annually during Fall term.
<b>Immunizations (DPT, MMR, Polio, Varicella)</b>	Documentation required upon admission.
<b>Hepatitis B Vaccine (or declination form)</b>	Required upon admission.
<b>TB Test</b>	Required upon admission. Tests provided annually.
<b>Drug and/or Alcohol Screen(s)</b>	Completed upon acceptance into the program. Recheck completed in accordance with school policy or upon requirement of clinical site prior to CEE.
<b>Professional &amp; General Liability Insurance</b>	Provided by DMU, renewed annually in July.
<b>Personal Health Insurance</b>	Students must maintain and provide proof of coverage.

\*additional requirements as notified by SCCE

- A. Students may be required to provide verification of these requirements prior to attending a CEE. Students can find the instructions in how to obtain the verification documentation in the clinical education data base. Requirements may differ from site to site.
- B. It is the student's responsibility to verify and complete all needed requirements for CEE. These requirements can be found on the Clinical Education Database (E\*Value) and the Clinical Site Information Form (CSIF) located on the CSIF webpage. The student should confirm requirements with the SCCE when making contact prior to a CEE. The student is responsible for payment of these services.

(See Appendix for additional resources)

## CLINICAL EDUCATION ATTENDANCE GUIDELINES

- A. Attendance during a CEE is mandatory for the designated length of the experience. If the Clinical Instructor (CI) or Site Coordinator of Clinical Education (SCCE) determines that this mandatory attendance requirement is not met, they will communicate with the DCEs. The DCEs, in consultation with the CI or SCCE, will determine if the attendance requirements in the syllabus have been met satisfactorily to pass the experience.
- B. Any scheduling changes or requests for changes to the CEE time frame (start and/or end dates) MUST be coordinated through the DCEs.
- C. At times, special requests for absences will be entertained (e.g. family wedding). These requests should be made in a timely manner or prior to the beginning of experience, if possible. If an absence is requested during the CEE, the student will communicate with the sites' CI and/or SCCE for approval of days off. It is at the discretion of the CI and/or SCCE to approve the request and identify a plan to



account for the missed clinical time. The student is required to notify the DCEs of approval of such situations.

- D. In the event of an illness, a death in the family, or an emergency, the student must contact the CI, SCCE, or facility staff personnel prior to the start of the working day or as soon as possible. The student is responsible to notify the DCEs of the absence as well.
- E. Absence requests due to a program related event (e.g. CSM, research presentations) will be coordinated with the DCEs.
- F. Absences for job/residency interviews may be entertained during CEE 3 and 4 only.
- G. Students will follow the work schedule of the clinical instructor/clinical site. DMU holidays and breaks do not apply to CEE. (e.g. DMU is closed the Friday after Thanksgiving. If the clinic is open, the student will attend and participate in the CEE.)

## GRADING

(Clinical education experiences shall be graded on a PASS/FAIL basis)

- A. Pass
  1. Satisfactory completion of CEE is determined by the DCEs based on the criteria outlined in each CEE syllabus. Grading decisions by the DCEs may also consider the complexity of the clinical practice, relative weighting of each performance criterion, and progress from midterm to final evaluation. The DCEs determine the final grade.
  2. Paperwork requirements include:
    - Clinical Performance Instrument evaluation by Clinical Instructor
    - Clinical Performance Instrument evaluation by student
    - Clinical Instructor/Site evaluation by student via E\*Value
    - Daily patient encounters (Case Logs in E\*Value)
    - Student Weekly Summary Form
    - In-service or special project
- B. Fail
  1. Given if the student does not fulfill all the requirements for a "PASS" grade based on criteria outlined in the CEE syllabus and completion of required paperwork.
  2. As per the procedures outlined under the Doctor of Physical Therapy section of the Student Handbook under the section for Mechanism for Clinical Education Experience Repeats.
- C. Incomplete
  1. As per the procedures outlined under the Doctor of Physical Therapy section of the Student Handbook under the section for Rescheduling of Clinical Education Experiences.
- D. A student must pass ALL CEEs to graduate.

## CEE SELECTION AND ASSIGNMENT

Approximate TIME FRAME	SITE SELECTION PROCESS*
<b>March 1</b>	Facility Commitment Forms sent out to sites
<b>March - May</b>	Students review & request First Come First Served clinical sites
<b>May 1</b>	Commitment Forms Returned- List of available experiences by site/experiences in E*Value
<b>May-June (CEE-2, CEE-3, CEE-4)</b>	Students review available sites and rank top 5 choices in E*Value
<b>June-July (CEE-2, CEE-3, CEE-4)</b>	- E*Value optimization of student selections, DCE reviews and notifies students - Student Placement Confirmation letters sent to sites
<b>Sept-Oct (CEE-1)</b>	First year students review available sites and complete the FCFS process or rank top 5 choices in E*Value for optimization.
<b>November (CEE-1)</b>	- E*Value optimization of student selections, DCE reviews and notifies students - Student Placement Confirmation letters sent to sites

\*Some clinical sites may request a pre-selection process that includes an application and/or interview. Students coordinate this process with the DCEs.

- A. Clinical assignments will be coordinated by the DCEs 10-12 months prior to each CEE using the following procedure:
  1. DMU DPT program abides by the American Physical Therapy Association (APTA) uniform mailing date (March 1) for commitment forms.
  2. The deadline for returning commitment forms is April 30.
  3. As clinical site commitment forms are received, the data is entered into the clinical education database system.
- B. Students are allowed access to the clinical education database system to evaluate their options and to develop their clinical site preferences.
  1. Sites identified as First Come First Served (FCFS)
    - a. DCEs will notify students of a deadline for FCFS requests.
    - b. DCEs will facilitate a process to complete requests for these sites.
    - c. DCEs will contact the clinical site to determine if they have availability during the intended CEE time frame.
    - d. DCEs will notify the student if the spot was available and confirmed.
      1. If a student is confirmed, the student does not participate in making site preferences for that CEE time frame. Once the student is confirmed, no requests for changes will be allowed.
      2. If a spot is not available for the student, they continue with the site preference process.
  2. Sites identified as having a special interview, application or selection process.
    - a. Students should immediately notify the DCEs of interest in a specific site requiring this process.
    - b. Students should complete the required paperwork, application and/or resume listed for that sites process upon consultation with the DCEs.
    - c. DCEs shall complete the process per the sites requested procedures for submission.
    - e. DCEs will notify the student if they were chosen by the site to complete the CEE.
      - If a student is confirmed, the student does not participate in submitting site preferences for that CEE time frame. Once the student is confirmed, no requests for changes will be allowed.
      - If a student is not selected, they continue in the site preference process.
    - f. If a student is not selected and has missed the optimization process due to the timeline of the above selection process, DCEs will work individually with the student to obtain placement at another site.

3. Sites available for optimization. Students will enter their top 5 preferences into the clinical education database system. At a minimum, students are required to enter 1 site that is out of the Greater Des Moines area and 1 site that is out of state.
4. Students will be notified of the site preference/selection process deadline. DCEs will close the selection process at this time to begin optimization.
5. During optimization, the system will match students to available clinical sites based on student preferences. The DCEs will review assignments generated by the system and notify students.
6. Once final clinical assignments are made, students will **NOT** be allowed to request changes in clinical assignments. Changes will only be made if the clinical site cancels or an emergency exists.

## CANCELLATIONS

- A. A clinical site may cancel a CEE after a student has been assigned due to reasons beyond our control.
- B. DMU has no liability for reimbursement of deposits on housing, transportation or other expenses incurred by the student in relationship to the CEE.
- C. DMU will be responsible for securing another CEE for the student.

## RESCHEDULING OF CLINICAL EXPERIENCES

A student may be granted rescheduling of a CEE when the DCE and the Director of DPT, in consultation with the Dean of the College of Health Sciences, deem that the student has a valid reason for not beginning a scheduled clinical experience. The mechanism for rescheduling can be found under the Doctor of Physical Therapy section of the Student Handbook.

## CLINICAL EDUCATION EXPERIENCE REPEATS

Clinical education experience repeats are offered for the purpose of providing those students who have failed a CEE a second opportunity to demonstrate clinical competency after participation in a remediation program. The mechanism for CEE repeats can be found under the Doctor of Physical Therapy section of the Student Handbook.

# Roles and Expectations

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## DPT PROGRAM AND DCE

- A. Rights
  - 1. Add, suspend, inactivate, and terminate sites as needed.
- B. Responsibilities
  - 1. DPT program will designate one faculty member as the Director of Clinical Education (DCE) to act as the liaison between the program and the facility.
  - 2. DCE will assign to sites students that have satisfactorily completed prerequisite didactic curriculum and continue to be in good standing within the DPT program.
  - 3. To provide in writing, the dates and names of students scheduled to participate in a clinical experience at the assigned facility.
  - 4. Recruit, secure, develop and maintain a variety of affiliating clinical sites for students.
- C. Communication
  - 1. The site will be provided with a packet of clinical internship information approximately 8 weeks prior to the arrival of the assigned student. This packet shall include but not be limited to, student information sheet, Medicare guidelines for student interns, clinical experience attendance policy, curriculum overview, and cover letter. Course syllabus, if completed, will be included. Otherwise, the syllabus will be sent at a later date prior to the experience start date.
  - 2. DCE create a schedule in the database for midterm contact of students and CIs during each clinical experience.
    - a. Assigned DPT faculty will complete midterm contact and document the interaction.
    - b. DCE will schedule site visits during the midterm of the clinical experience.
      - 1. An attempt will be made to schedule a site visit during one of the four clinical internship experiences for each student.
      - 2. If a site visit is performed, the student and CI will not receive a midterm contact from a faculty member.
    - c. Contact documentation/communication is maintained in the program database.
  - 3. If a problem arises during the clinical experience, the student and CI are encouraged to communicate with each other to come to a mutually acceptable resolution. If that is not possible, the SCCE and/or DCE may be used as resources. All conversations are held in confidence.
  - 4. DCE shall communicate information related to student clinical performance to DPT program core faculty during monthly faculty meetings or more frequently if warranted. Clinical education will remain a running agenda item for this monthly meeting.
- D. Clinical Education Program Assessment
  - 1. Students will complete a post-clinical education experience survey evaluating the clinical education program. It will be maintained in the clinical education database. (See appendix for Clinical Education Course Evaluation)
    - a. Evaluations are reviewed during clinical education team meeting and presented to faculty.
    - b. Ratings of 3 (neutral) or below trigger further review.
  - 2. Students will complete a post-CEE survey evaluating their clinical site and clinical instructor. Student will provide feedback to the CI at the end of the experience. The data from the evaluations will be maintained in the clinical education database. (See appendix for Clinical Site Evaluation, Clinical Instructor Evaluation)
    - a. DCE will review student feedback on the clinical site and clinical instructor following each clinical experience.
      - 1. Survey reports are generated and presented to DPT faculty following each clinical experience.

2. Site/CI ratings of 3 (neutral) or below trigger further review. Further review may include, but is not limited to,
  - a. monitoring site and/or CI to determine continued quality of the clinical experience
  - b. provide site and/or CI development
  - c. or no longer assigning students to the site and/or CI
3. A record of any site and/or CI development completed will be maintained.
3. SCCE/CI that have been identified as having a student assigned to their site or self within the calendar year will complete a feedback survey about the clinical education program/team annually at the end of the year.
4. DCE will routinely evaluate the clinical education program and policies using various forms of communications to include but not limited to data collected via the student, SCCE, and CI evaluation of the clinical education program and in consultation with the DPT program core faculty.

## STUDENT

### A. Rights

1. Reasonable accommodations during clinical experience upon timely request for a documented disability.
2. Receive adequate time for CI/Student feedback and formal conferences, including mid-term and final CPI review.
3. To request guidance and assistance as needed.
4. To be removed from a clinical experience due to harassment, concern for safety or other concerns.
5. Access to a variety of learning experiences.

### B. Responsibilities

1. Provide DCE with preferences for clinical education assignments following the guidelines outlined in "Selection and Assignment".
2. Completing all mandatory requirements of the DPT program and clinical site in a timely manner, including ensuring documentation of training has been completed and remains up-to-date and valid throughout the clinical experiences.
3. Link proof of completion of applicable pre-clinical requirements (HIPAA, OSHA, BBP certificates, etc.) in the clinical education database.
4. Budget for, arrange, and have reliable transportation to site and housing during clinical experiences.
5. Read and abide by the policies, procedures, guidelines and standards of DMU, the DPT Program, the clinical facility and profession. Become familiar with the guidelines and policies related to clinical education (Clinical Education Handbook, assigned clinical site policies, etc.).
6. Participate actively in the clinical education process, working incrementally towards developing the professional skills, behaviors and attitudes of an entry-level physical therapist.
7. Review and understand the CPI evaluation tool. Request guidance or clarification as needed.
8. Complete and submit all assignments and paperwork requested by the clinical site and required per the course syllabus for satisfactory completion of the experience.

### C. Communication

1. Monitor DMU email daily and respond to requests from DPT program, SCCE/CI within two business days.
2. Contact facility/SCCE in writing approximately 6-8 weeks prior to the clinical experience start date.
  - a. Review and confirm all pre-clinical requirements have been met, and/or complete any additional requirements necessary in a timely manner.
  - b. Identify work schedule, first day procedures, clinical instructor information, appropriate dress, parking, etc.

3. Keep an open line of communication with assigned CI. Be prepared to share goals, expectations, learning style and feedback preferences. Maintain a positive learning attitude, accepting feedback and constructive criticism.
  4. Communicate any personal performance issues or concerns during the clinical experience with the appropriate individual (CI, SCCE, DCE). Any significant concerns should be communicated as soon as possible so that successful resolution can be obtained.
  5. Provide formal and informal feedback regarding the clinical instructor, clinical experience and the clinical education program.
- D. Evaluation of Student
1. CIs should provide consistent on-going feedback, both formal and informal, in addition to completing the CPI at mid-term and at the end of the clinical experience. These evaluations should be reviewed together and signed-off by the student.
  2. Routine self-assessment is recommended.
  3. DCE will gather and assess data from multiple sources to determine satisfactory completion of the student's clinical experience, to include but not limited to mid-term and final CPI evaluation, verbal communication with the CI and/or SCCE, and student communications.

## CLINICAL FACILITY AND SCCE

- A. Rights
1. To change or require additional requirements prior to student placement, such as face-to-face or phone interview.
  2. To have a student removed from an experience for demonstrating unsafe, unethical, or unprofessional behaviors in regards to self, patient, and/or staff.
  3. To request feedback regarding the clinical experience and/or clinical instructor as gathered via evaluations completed by students.
- B. Responsibilities
1. Facility will designate a staff member as the Site Coordinator of Clinical Education (SCCE) to act as the liaison between the facility and the clinical education program.
  2. Facility will assume complete responsibility for patient care and treatment at all times.
  3. SCCE will coordinate activities related to the student clinical education program.
  4. Will provide the student with the opportunity to observe and/or participate in a variety of learning experiences in an active, stimulating environment appropriate to the student's level of education, interests and prior experiences.
  5. SCCE will supervise, select, and assign clinical instructors.
  6. Provide the site's policies and procedures to student.
  7. Identify, coordinate and/or conduct staff development activities to enhance clinical education.
  8. Act as a role model for ethical, legal, and professional behavior.
- C. Communication
1. Collaborate with the DCE, CI and student, as needed to problem solve and assist in planning alternative, remedial, accommodative or challenging learning experiences as indicated.
  2. Notify DPT program of changes in student requirements, staffing changes related to a scheduled clinical experience, or change in role of SCCE.
- D. Evaluation of Facility / Clinical Site
1. Students will complete a post-experience survey evaluating their clinical site. It will be maintained in the clinical education database. (See appendix for Clinical Site Evaluation)
  2. DCE will review student feedback following each clinical experience.
  3. SCCE will routinely evaluate the site and clinical education program and policies.

## CLINICAL INSTRUCTOR

### A. Rights

1. To request a conference or to have a student removed from a clinical rotation at any time.
2. To provide feedback on the curriculum and to have that feedback documented.
3. To request individual training, information and/or assistance related to clinical instruction.
4. Opportunities to attend selected continuing education programs and seminars sponsored by the DPT program.
5. Opportunities for collaboration in clinical research.
6. Upon request, receive documentation of clinical instructor participation in the form of a certificate to use for continuing education credit.

### B. Responsibilities

#### 1. Clinical Instructor (CI) Qualifications

- a. The DPT program follows the APTA recommendations that all clinical instructors must have been practicing a minimum of one year prior to supervising a student.
- b. All CIs must be in good standing with their employers.
- c. Interested in educating students in the clinical environment.
- d. PT licensed/credentialed in the state which they are practicing.
- e. APTA credentialing as a CI is recommended.
- f. APTA provides the following guidelines for clinical instructors.

- The clinical instructor (CI) demonstrates clinical competence, and legal and ethical behavior that meets or exceeds the expectations of members of the profession of physical therapy.
- The clinical instructor demonstrates effective communication skills.
- The clinical instructor demonstrates effective behavior, conduct, and skill in interpersonal relationships.
- The clinical instructor demonstrates effective instructional skills.
- The clinical instructor demonstrates effective supervisory skills.
- The clinical instructor demonstrates performance evaluation skills.

*APTA GUIDELINES: CLINICAL INSTRUCTORS BOD G03-06-21-55*

2. Create/develop a good working relationship with their student and schedule regular meetings to discuss goals, objectives, and performance.
3. Monitor and modify student's learning experiences appropriately based on student performance and feedback.
4. Recognize student progress and deficiencies and provide feedback that is constructive, positive, frequent and timely.
5. Ensure the student is properly supervised according to governing regulations (i.e. Medicare, state/local laws and regulations).
6. Complete online training to be able to effectively utilize CPI Web.
7. Provide a thorough student orientation to the facility, to include, but not limited to: staff, general policies, emergency procedures/contacts, evacuation plan, clinic operations, learning objectives, and education opportunities.
8. Act as a role model for ethical, legal, and professional behavior.
9. Complete a midterm and final evaluation on CPI Web and discuss performance with the student in addition to ongoing feedback.
10. Contact DCE as soon as possible to notify of any of the five "red flag" items on the CPI.
11. Secure appropriate clinical supervision or observational activities for the student during an absence.
12. If a problem arises during the clinical experience, communicate with the student to come to a mutually acceptable resolution. If the issue cannot be resolved or continues, contact the SCCE in a timely manner.

E. Evaluation of Clinical Instructor

1. Students will complete a post-experience survey regarding the effectiveness of their clinical instructors and will be maintained in the clinical education database. (See appendix for Clinical Instructor Evaluation)
2. DCE will review student feedback following each clinical experience.



# Appendices

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**DES MOINES UNIVERSITY OSTEOPATHIC MEDICAL CENTER  
CLINICAL TRAINING AGREEMENT**

The purpose of the Clinical Training Agreement (“Agreement”) and Implementation Letter is to guide and direct the parties respecting their affiliation, working arrangements, and agreements in furtherance thereof to provide high-quality clinical learning experiences for health professions students at Des Moines University Osteopathic Medical Center (“University”). University is ultimately responsible for the medical education program, academic affairs, and the assessment of health professions students. Clinical Site will provide medical students and faculty, if applicable, access to appropriate resources for medical student education.

Agreement includes the following health professions students:

- Doctor of Osteopathic Medicine
- Doctor of Podiatric Medicine and Surgery
- Doctor of Physical Therapy
- Physician Assistant

**A. Responsibilities of the Clinical Site.** The Clinical Site shall:

1. Provide a supervised clinical education experience in accordance with the objectives of the University’s education program. The Clinical Site shall participate in the health professions student’s performance report/evaluation process. University shall be responsible for providing any such forms for process, and Clinical Site agrees to submit evaluations within 14 days of any completed clinical education experience.
2. Appoint a clinical program coordinator and identify an authorized individual who will be the primary on-site resource for assigned students regarding security and personal safety issues.
3. Be responsible for the facilitation of the health professions student’s professional growth through selection of patients for teaching purposes and educational assignments and for the provision of adequate space, equipment and supplies to the objectives of clinical training.
4. Assume complete responsibility for patient care and treatment. The Clinical Site will provide clinical instructors to maintain an acceptable instructor-health professions student ratio. The health professions student will participate in providing patient care under the supervision of qualified Clinical Site staff. The Clinical Site will remain responsible for the patient’s care when a health professions student is assigned. Health professions students will not replace Clinical Site staff or act in a service capacity, apart from their educational goals.

Clinical Site agrees that clinical instructors assigned to educate the health professions students shall abide by this Agreement. If Clinical Site does not have the authority to

manage clinical instructors, the clinical program coordinator shall contact the University in accordance to the notice section, section A 11, of this agreement.

5. In the event a health professions student is exposed to an infectious or environmental hazard or other occupational injury (e.g. needle stick) while at the Clinical Site, the Clinical Site will provide such emergency care as is provided its employees, including, where applicable: examination and evaluation by Clinical Site's emergency department or other appropriate facility as soon as possible after the injury.

Exposures to blood borne pathogens via needlestick will be handled in accordance with standard needlestick protocols at the Clinical Site. The health professions student's health insurance will be the first party payer in instances of accidental exposure requiring testing and prophylaxis of the student. The Clinical Site is responsible for testing of the patient. The health professions student will be responsible for any charges thus generated.

6. If, in the course of the clinical education experience, the health professions student has a likelihood of exposure to radiation through exposure to fluoroscopy procedures or other significant radiologic sources, the Clinical Site will badge the health professions student in accordance with its protocols for measurement and reporting of radiation dosage. The health professions student's health insurance will be the first party payer. Reporting of any abnormal exposures will be in accordance with applicable state and federal regulation and policies within the Clinical Site. Alternately, in lieu of badging the health professions student, the Clinical Site may take steps to protect the student from the radiation source of concern (e.g., excuse them from fluoroscopy procedures) in order to assure radiation dosages are in accordance with the ALARA (As Low As Reasonably Achievable) principle.
7. Health professions student may have access to clinical facilities, which are not wholly owned/and or operated by Clinical Site, and may be used to furnish additional clinical learning experience. Clinical Site will ensure and verify supervision of health professions students while on rotation at these clinical facilities. Both parties acknowledge that all terms and conditions described in this agreement will apply to these clinical facilities.
8. Maintain liability insurance in an amount that is commercially reasonable.
9. Upon reasonable notice, permit the inspection by the University or its accreditation agencies of the Clinical Site's facilities and the services available for clinical experiences.
10. Provide written notification to the University promptly if a claim arises involving a health professions student.
11. All notices provided by the Clinical Site will be in writing, and will be deemed to have been duly given when delivered personally, deposited in the United States mail, by Federal Express or UPS, facsimile or email, addressed as follow:

Des Moines University  
Attn: Senior Vice President and Chief Financial Officer  
3200 Grand Avenue  
Des Moines, IA 50312-4198  
Contracts@dmu.edu  
Phone: 515-271-1422  
Fax: 515-271-4248

**B. Joint Responsibilities**

1. The representatives of both parties will seek each other's cooperation in carrying out the provisions of this Agreement. Both parties will recognize that the specific nature of the clinical experience required by the University may vary, and that following the execution of this Agreement and within the scope of its provisions, the parties may develop policies and procedures to formalize operational details of the program.
2. Both parties shall designate individuals who will be responsible for coordinating the clinical education program. Coordination, at a minimum, includes determining the number of health professions students, their length in the program, and their desired learning experiences. In addition, faculty supervision and expectations of the Clinical Site staff shall be determined prior to beginning any clinical education program.
3. The parties will work together to maintain an environment of quality patient care for Clinical Site patients and the attainment of learning objectives.
4. Both parties shall provide adequate orientation time for health professions students new to the Clinical Site. The Clinical Site, as part of orientation, will inform the health professions students of its policies and procedures to which the health professions student(s) are expected to adhere during the clinical education program and while on Clinical Site premises. A copy of the policies and procedures will be provided to the University's program representative upon request.
5. Both parties shall plan and administer a clinical education experience, which will satisfy the requirements of all applicable laws, regulations and licensing or supervisory agencies. Each party to this Agreement is responsible for verifying that any of their health professions students and/or employees providing services under this Agreement is currently and appropriately licensed if applicable.
6. Both parties shall maintain in confidence health professions student files and personal information and limit access to only those employees that need to know and agree to comply with the Family Educational Rights and Privacy Act (FERPA), to the same extent as such laws and regulations apply to University. For the purpose of this Agreement, pursuant to FERPA, University hereby designates facility as a school official with a legitimate educational interest in the educational records of the health professions students who participate in educational rotations at Clinical Site to the extent that access to the records is required by Clinical Site to carry out its responsibilities.

7. The parties agree to comply with Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act Amendments Act, the Age Discrimination Act of 1975, and the related regulations to each. There shall be no discrimination on the basis of race, color, national origin, ethnicity, creed, religion, age, disability, sex, gender identity, sexual orientation, pregnancy, veteran status, genetic information and other characteristics protected by law in either the selection of Program Participants for participation in the Program, or as to any aspect of the clinical training; provided, however, that with respect to disability, the disability must not be such as would, even with reasonable accommodation, in and of itself preclude the Program Participant's effective participation in the Program.
8. Both parties understand that neither party to this Agreement may assign this Agreement without the prior written consent of the other.
9. The health professions students participating in the program will not be considered employees or agents of the Clinical Site for any purpose. Health professions students will not be entitled to receive any compensation from the Clinical Site or any benefits of employment from the Clinical Site, including but not limited to, health care or worker's compensation benefits, vacation, sick time, or any other benefit of employment, direct or indirect. The Clinical Site will not be required to purchase any form of insurance for the benefit or protection of any health professions student of the University.
10. Nothing in this Agreement is intended to or shall be construed to constitute or establish an agency, employer/employee, partnership, franchise, or fiduciary relationship between the parties; and neither party shall have the right or authority or shall hold itself out to have the right or authority to bind the other party, nor shall either party be responsible for the acts or omissions of the other except as provided specifically to the contrary herein.
11. This Agreement contains the entire Agreement of the parties as it relates to this subject matter and may be modified only by additional written provisions contained in a properly executed Implementation Letter.
12. This Agreement may be terminated at any time and for any reason by either party upon not less than 180 days prior written notice to the other party. Should notice of termination be given under this Section, health professions students already scheduled to train at Clinical Site will be permitted to complete any previously scheduled clinical assignment at Clinical Site.

**C. Responsibilities of the University.** The University shall:

1. Appoint a program representative, who will serve as the University's representative to the Clinical Site. The program representative of the University shall be responsible for establishing a contact at the Clinical Site who agrees to serve as the Clinical Site representative.

2. Be responsible for submission of required reports/evaluations on health professions student's performance in the clinical education program. Only those health professions students who have satisfactorily completed curriculum prerequisites of the University's program shall be assigned to the Clinical Site clinical education program.
3. Be responsible for the assignment of health professions students to the Clinical Site. The University will provide the Clinical Site with the following required information in writing prior to the assignment of health professions students: health professions student's name, dates and hours of assignment, course expectations and other information specified by the Clinical Site at least 30 days in advance (or as soon as it is available).
4. Acknowledge that the Clinical Site will have no responsibility for the health care needs of health professions students except on an emergency basis and with prompt notification to the University. The University is also not responsible for the health care needs of the health professions students. It is also understood that the University will not allow health professions students to leave campus for a clinical experience without proof of personal health insurance.
5. Provide proof that both the University, and its health professions students, are each covered under a professional liability insurance policy for their acts at the Clinical Site. Such coverage shall be at least \$1 million per incident and \$3 million in aggregate. The University shall indemnify, save, and hold harmless the Clinical Site, its employees, and its affiliates from and against any loss (including legal expenses and attorney's fees), damage injury, or loss of life for the acts of its health professions students in the Clinical program. The Clinical Site shall cooperate fully with the University in defending against, and disposing of, any such suits.
6. Agree to require all health professions students to maintain the confidentiality of all patients and all information relating to patients. The University further agrees to require the health professions students to agree to maintain the confidentiality of all propriety information of the Clinical Site. The unauthorized release and/or discussion of a patient's protected health information or Clinical Site's proprietary information can result in the termination of the participation of a health professions student in the program or the termination of the Agreement.
7. Inform the participating health professions students of their responsibilities under this Agreement and of the requirements established in accordance with this Agreement. The University shall advise the health professions students that they will be required to adhere to the policies, procedures, clinical protocol, rules, regulations, and schedules of the Clinical Site, and conform to all uniform requirements, and participate in other Clinical Site facility activities as deemed appropriate to the clinical education experience.
8. Withdraw any health professions student at the request of the Clinical Site if performance is unsatisfactory to the Clinical Site. A request for health professions student withdrawal will be directed to the University's Clinical Program Representative. The Clinical Site shall have the right to suspend the health professions student

immediately from clinical duties pending their formal withdrawal from the clinical program at the Clinical Site. The Clinical Site may restrict the health professions student to an observer role, pending either a further investigation or a request for withdrawal from the Clinical Site. The Clinical Site agrees to cooperate fully in the investigation and resolution of the health professions student's unsatisfactory performance.

9. Ensure that health professions students demonstrate hepatitis B, rubella, rubeola, and influenza vaccinations or immunizations as specified by the Clinical Site. Health professions students should have current (within ten years) tetanus immunization, current (within one year) negative PPD Tuberculosis test (Mantoux preferred); or if a positive PPD history, a negative chest x-ray, and physician documented history Chicken Pox or laboratory verification of immune status.
10. Ensure that each health professions student has obtained a criminal background check prior to leaving campus for a clinical education experience. The University shall maintain a repository for all files concerning criminal background checks of its health professions students and shall be responsible to report any criminal acts appearing on criminal background checks in writing to the Clinical Site before health professions students report for clinical education experience. Failure to report health professions student's criminal acts to the Clinical Site will negate the clinical experience and agreement between the University and the Clinical Site. Any additional background checks required by the Clinical Site are the responsibility of the health professions student to obtain and all costs related to the additional background checks are that of the health professions student's as well.
11. Have primary responsibility for planning the clinical educational program of the clinical experience at the Clinical Site after consultation with the Clinical Site staff. Health professions students may participate in the care of the patients in accordance with the policies and procedures set by the Clinical Site.
12. Report to the Clinical Site any change in the approval or accreditation of the University or its program.

**DES MOINES UNIVERSITY OSTEOPATHIC MEDICAL CENTER  
CLINICAL TRAINING AGREEMENT  
Implementation Letter**

The purpose of this Implementation Letter is to provide a record of the clinical training affiliation agreement between the University and the Clinical Site with respect to the clinical training experiences of the University’s health profession students and the agreement of the parties to abide by all terms and conditions of the Des Moines University Osteopathic Medical Center Clinical Training Agreement (Version August 2019) which is hereby incorporated by reference, without modification or exception except as specified below.

1. Date:

2. Term of Clinical Training Agreement (3-year term recommended):

	through	
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3. Clinical Site notice:

Clinical Site name:	
Attention:	
Address:	
City, State, Zip:	
Phone number:	
Facsimile:	
Email:	

4. Edits: Please reference section of Clinical Training Agreement (Example A1).

Section	Edit

5. Additional language to Clinical Training Agreement:

Section	Addition

6. This agreement will be renewed for one additional term of three years unless terminated by either party. This Agreement may be modified at any time with the mutual written consent



of the parties and either party may terminate the agreement according to Section B-12 of the Clinical Training Agreement.

7. This Agreement supersedes all prior contracts, agreements and understandings (whether written or oral) between the Parties with respect to the subject matter addressed in this Agreement.

The individuals executing this Implementation Letter are authorized to sign on behalf of their institutions and certify that their institutions have accepted the terms of the Clinical Training Agreement and further agree to comply with its terms except as noted above. Electronically reproduced signatures will be treated as original.

**CLINICAL SITE:**

\_\_\_\_\_  
Name/Title: Date

**DES MOINES UNIVERSITY OSTEOPATHIC MEDICAL CENTER:**

\_\_\_\_\_  
Mark Peiffer Date  
Senior Vice President  
and Chief Financial Officer

**STUDENT CRIMINAL BACKGROUND CHECK (CBC) PROGRAM  
AT DES MOINES UNIVERSITY  
(DPT)**

Des Moines University requires a criminal background check of all students prior to matriculation and prior to clinical internship experiences. No student can begin a clinical internship until they have been cleared by their program's Clinical Affairs office or program director. Attached is an information sheet regarding the scope of our student criminal background check program and a copy of the students' rights with respect to their criminal background check report. Please note that criminal background checks are a type of consumer report and are subject to the same rights and regulations as credit reports. However, credit is not included in the scope of the DMU student criminal background check.

Certiphi Screening is the vendor selected by Des Moines University to conduct all of our student criminal background checks. Since its inception, Certiphi Screening has focused on serving the healthcare community exclusively, and is the only company whose applicant screening services are endorsed by the American Hospital Association. We are confident that our selection of an industry leader will ensure the quality and comprehensive design of our student criminal background checks will satisfy the needs of our clinical affiliates.

In addition to Des Moines University Clinical Affairs offices and/or program leadership, students will have access to their reports and the capability to forward those results to any clinical site or future employer upon request. We are hoping this will eliminate the need for students to complete multiple criminal background checks during their training.

**THE PROCESS**

1. During the fall term, DMU will upload a list of the DPT class that is anticipated to begin clinical internships during the upcoming year. This upload will contain student information including each student's DMU email address. Note: The DMU email address is the only official student email address that will be used by Certiphi to communicate and conduct the authorization process. Therefore, students must access their DMU email account regularly in order to respond in a timely manner.
2. Certiphi will email each student with: 1) instructions on how to complete the authorization process for them to conduct the criminal background check and 2) instructions and the link to the Iowa SING (Elder & Child Abuse authorization paperwork).  
**NOTE:** IOWA will only accept hard copies of their authorization paperwork, so it is very important that students access the link, download the form(s), complete them, and submit them to Certiphi as soon as possible.
3. The cost for the criminal background check is \$60.00, and will be added to the spring term's tuition and fee charges.
4. DPT program administration and DCEs will be able to track the status of the criminal background check from the time the request is made (file uploaded) through completion.

5. The turnaround time for the general criminal background check is 3-5 business days. The Iowa Elder & Child Abuse reports are taking up to 4 weeks.
6. Upon completion of the criminal background check, the DPT program and the student will have access to the report.
7. Some clinical affiliates will only accept a copy of the report from DMU. As a part of the authorization process, you have authorized DMU to release a copy of the report and/or share the results on your behalf. However, students will have the capability to forward their report to as many recipients as they desire.
8. DPT program leadership and DCEs will contact any student for whom there are any significant findings that may prevent them from being placed at a clinical site. Additional information may be required to obtain clearance to begin clinical experiences.
9. Enrolled students are required to disclose to their program any misdemeanors, arrests, charges, or felony convictions or pleas of no contest, other than minor traffic violations, including adjudications, within three (3) business days. Non-disclosure or falsification may be grounds for discipline described in the Student Handbook, up to and including dismissal.
10. If a clinical site requires additional searches not included in the scope, design, or frequency of the annual DMU student criminal background check program, it is the student's responsibility to complete these requirements at their expense. Certiphi can perform these additional searches and add them to your report. Notify your DCE if you need additional searches beyond DMU's CBC scope and frequency.
11. Effective with the 2014-2015 academic year, Des Moines University will conduct annual criminal background checks on all of its on-campus students. For DPT students, the criminal background checks will be conducted in the fall of each academic year. A \$60.00 fee will be assessed with the spring tuition and fee charges in the 2<sup>nd</sup> and 3<sup>rd</sup> years of the program to cover the cost of one criminal background check per year conducted in the previous fall. The pre-matriculation (admissions) criminal background check will count for the first year.

If you have any questions regarding the student criminal background check program at Des Moines University, you may contact Dr. Utley in the Department of Physical Therapy.

Thank you!

## SCOPE OF ANNUAL STUDENT CRIMINAL BACKGROUND CHECKS

### Social Security Number Validation

(Verifies valid SSN, place & issue data, death index search)

### Analyzed Social Security Number Search

(credit bureau data analyzed for names, SSN's & addresses)

### Iowa Statewide Criminal Records Repository

(Iowa State Police Search (SING); conducted on all students regardless of address)

### County Criminal Records Search

(searches conducted in all counties of residence for the past 7 years)

### Federal Criminal Records Search

(searches conducted in all districts of residence for the past 7 years)

### National Criminal File Search

(national database search covering more than 375 million criminal, sex offender and violation records, includes verification of hits)

### National Sexual Offender Database Search

(database search covering sex offender records collected nationwide)

### OIG/SAM EPLS Search

(search covers the federally-mandated HHS Office of Inspector General's (OIG) List of Excluded Individuals/Entities (LEIE), and the SAM Excluded Parties List (EPLS))

### Sanctions Base

(proprietary search covering sanctions, disciplinary and administrative actions taken by hundreds of federal and state healthcare regulatory authorities, including FDA, NIH, GSA, OFAC, terrorist watch lists and more)

### Elder Abuse Registry Searches - Iowa

### Child Abuse Registry Searches - Iowa



## **Immunization and Health Requirements For DMU's Clinical Programs 2016**

DMU follows the CDC's recommended immunizations for health care workers. We ask students to do their due diligence by tracking vaccination dates down now, prior to enrollment; checking with an undergrad facility, high school, elementary, pediatrician, primary care provider, former healthcare employers, and/or the military, if applicable, is often very helpful. Forms, more detailed instructions and FAQ's are available on Pulse once a student has been accepted. If you have a documented allergy or medical contraindication to any of the required vaccinations, please contact the Student Health Nurse at 515-271-7801.

### **HISTORY & PHYSICAL EXAM**

- DMU's History and Physical Exam form or equivalent. A physical exam completed within one year of registration is acceptable. The history form needs to be signed by the student.

### **MEASLES, MUMPS, AND RUBELLA**

- 2 MMR vaccination dates or positive IgG antibodies for measles, mumps, and rubella (lab tests)

### **POLIO**

- Primary vaccination dates for polio; if vaccinated and dates are not available, a recent IPV

### **DIPHTHERIA, PERTUSSIS, TETANUS**

- Primary vaccination dates for DPT
- Tdap
- Tdap or Td must be within the past 8 years

### **HEPATITIS B**

- 3 vaccination dates

### **AND**

- Quantitative Hepatitis B surface antibody (this is a lab test, due no sooner than 1 month upon completion of the series). The results of this test should be in a numeric format or include numeric values in the reference range. A qualitative test may be insufficient for some rotation sites. We require the lab test in addition to vaccination dates.

### **VARICELLA (CHICKEN POX)**

- 2 vaccination dates or a positive varicella IgG antibody (lab test). Date of disease is insufficient.

## **TUBERCULOSIS**

**Those who have NOT tested positive in the PAST or those who have tested positive but are unable to procure any documentation from the positive test must complete ONE of the two items below:**

- Two-step TB test (2 TB skin tests given 1-3 weeks apart, e.g. have test administered on Monday, read on Wednesday, if negative can get a 2<sup>nd</sup> test the following Monday)

### **OR**

- An IGRA blood test (i.e. a Quantiferon Gold TB Test or T-Spot)

**Those who have tested positive need to submit the following:**

- A copy of the positive test record (may be a skin test or IGRA)
- A chest x-ray done after the positive test – submit a copy of the radiology report
- A record of a conversation with a healthcare professional regarding treatment/prophylaxis for latent TB infection; AND a record of treatment if completed (medication with start and completion date)
- Complete an annual symptom survey form.

DMU requires annual tuberculosis surveillance. Surveillance may consist of a skin test, a symptom survey, or a quantiferon gold test in rare instances. Flu shots may also be required for rotations. Failure to comply with annual TB surveillance or any other health requirement could result in administrative discipline.

Des Moines University does not discriminate against students on the basis of hepatitis or HIV infection. However, students who know they are infected with HIV or hepatitis or those who believe they may be infected have an ethical obligation to disclose this information to the student health nurse at 515-271-7801 so appropriate accommodations, if deemed necessary, are provided during the clinical component of the curriculum. See the following references:

1. Updated CDC Recommendations for the Management of Hepatitis B Virus–Infected Health-Care Providers and Students. <http://www.cdc.gov/mmwr/pdf/rr/rr6103.pdf>
2. SHEA Guideline for Management of Healthcare Workers Who Are Infected with Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus: [http://www.shea-online.org/Assets/files/guidelines/BBPathogen\\_GL.pdf](http://www.shea-online.org/Assets/files/guidelines/BBPathogen_GL.pdf)

## **PENALTY FOR NON-COMPLIANCE**

Late enrollees will have 4 weeks after classes begin to complete the requirements. Failure to submit required items can result in the following:

1. Placement on administrative leave (suspension)
2. Disciplinary action by the dean of your college
3. Unable to start clinical rotations in a university-affiliated facility

*\*A student may request a waiver for a University immunization requirement in the event of medical contraindication to an immunization. The waiver must be approved by DMU's Student Health Nurse, as well as the student's respective College Dean/Program Director. Students must be aware that the requirements are established by DMU and affiliated clinical rotation sites. Failure to comply with immunization requirements will compromise a student's ability to participate at certain clinical rotations sites that require those immunizations. Alternate clinical rotation sites that do not require immunizations may not always be possible. As a result, a student's progression through their academic program and anticipated graduation date is likely to be delayed if clinical rotations cannot be completed. A student also may be unable to complete their clinical program and may not graduate if alternate clinical sites cannot be secured.*

**Appendix D: Students - Where to Locate Documents for CEE (Pages 31-32)**

E*Value	Blood Borne Pathogens Training (BBP) - (Universal Precautions)	Completed on D2L. Upload certificates into E*Value by selecting Home Tab → Other Tasks → Manage Personal Records → add attachment (upload the certificate) and enter the following: <ul style="list-style-type: none"> <li>• “event date” (date completed),</li> <li>• expiration date (1 year from completion),</li> <li>• status (met)</li> <li>• click “add”</li> </ul>
	Hazardous Chemicals	
	HIPAA	Completed within the curriculum. Upload certificate into E*Value by going to Home Tab → Other Tasks → Manage Personal Records add attachment (upload the certificate) and enter the following: <ul style="list-style-type: none"> <li>• “event date” (date completed),</li> <li>• expiration date (1 year from completion),</li> <li>• status (met)</li> <li>• click “add”</li> </ul>
	BLS/CPR certification	Initially completed during the first term, then renewal during term 7. Upload a copy of the CPR card into E*Value by going to Home Tab → Other Tasks → Manage Personal Records → add attachment (upload the certificate) and enter the following: <ul style="list-style-type: none"> <li>• “event date” (date completed),</li> <li>• expiration date (1 year from completion),</li> <li>• status (met)</li> <li>• click “add”</li> </ul>
	Mandatory Reporting (Dependent Adult/Child Abuse Training)	Completed during the first year before CI 1. The certificate should be uploaded into E*Value. It is good for 3 years.
Pulse	Immunizations/ Flu Shot / TB test	All will be on your student immunization report found on the Student Health Portal on Pulse.
Certiphi	Criminal Background Check	Completed through Certiphi – If your SCCE is requesting a copy you need to send her/him a copy through the Certiphi system. <ul style="list-style-type: none"> <li>• Access the Certiphi system through this link. <a href="http://www.applicationstation.com">http://www.applicationstation.com</a> <ul style="list-style-type: none"> <li>○ School Code <ul style="list-style-type: none"> <li>• <b>DMU-DPT-RECHECK</b> for the CBC</li> </ul> </li> <li>○ Colleague ID# (student ID)</li> <li>○ Click on the link to distribute a report to create a new delivery by e-mail with the codes (otherwise you will have to send another e-mail to your clinical site with the codes so they can review your report)</li> </ul> </li> </ul>
	Drug Screen	Completed through Certiphi – If your SCCE is requesting a copy you need to send her/him a copy through the Certiphi system. <ul style="list-style-type: none"> <li>• Access the Certiphi system through this link. <a href="http://www.applicationstation.com">http://www.applicationstation.com</a></li> </ul>

Certiphi		<ul style="list-style-type: none"> <li>○ School Code <ul style="list-style-type: none"> <li>▪ <b>DMU-PT-UDS</b> for the drug screen</li> </ul> </li> <li>○ Colleague ID# (student ID)</li> <li>○ Click on the link to distribute a report to create a new delivery by e-mail with the codes (otherwise you will have to send another e-mail to your clinical site with the codes so they can review your report)</li> </ul>
Miscellaneous	Finger Printing	VA sites and most sites in Minnesota will request this to be completed. If you are completing a clinical experience at a VA outside of DSM, you can complete the process at the local VA. Minnesota fingerprinting is completed through MN Net2.0.
	Current Physical	Your site will request this specifically if required. You will likely need to provide a document from your physician indicating that you are in good health (no communicable diseases) and you are physically able to participate in activities for a physical therapy clinical experience.
	Insurance Forms	<ol style="list-style-type: none"> <li>1. Your site may request the updated liability insurance forms. These can be found on E*Value on the home page. There are 2 forms, general liability and professional liability. You can download these and send to your SCCE.</li> <li>2. Your site may request proof of health insurance. You will need to send a copy of your health insurance card.</li> </ol>
	Site specific Documentation	Some sites require forms to be signed by a representative of the program. Dr. Porter or Dr. Utley will sign the forms. Melissa can assist in scanning/faxing any needed documentation to your site.



APTA House of Delegates Positions Statement (09/20/2019)

Student physical therapists, when participating as part of a physical therapist professional education curriculum, are qualified to provide services only under the direct supervision of the physical therapist who is responsible for patient and client management.

Direct Supervision: The PT or the PTA supervising a student PT or student PTA, is physically present and immediately available for supervision. In both cases, the PT or PTA will have direct contact with the patient/client on each date of service. Telecommunication does not meet this requirement.

*Levels of Supervision HOD P06-19-13-45 [Initial: HOD P06-00-15-26] [Position] August 20, 2019  
Student Physical Therapist and Physical Therapist Assistant Provision Of Services HOD P06-19-10-06*

Medicare Rules for Student Supervision

**Medicare A**

Hospital & Intensive Rehabilitation Therapy Program (IRF)

- CMS's current policy does not prohibit therapy services by a therapy student under the appropriate supervision of a qualified PT or PTA from counting toward the intensive rehabilitation therapy program.
- To ensure the health and safety of this population, CMS expects that all student therapy services will be provided by students under the supervision of a licensed therapist following oversight, standards, and requirements established by their training programs and by the American Physical Therapy Association.

*Statement from the Centers for Medicare & Medicaid Services on December 20, 2018*

SNF

- The supervising PT shall not be treating / supervising other individuals and he/she is able to immediately intervene/assist the student as needed. Does not have to be in the room. Minutes may be coded as individual therapy.
- The therapy student is treating one resident and the supervising therapist/assistant is treating another resident, and both residents are in line of sight of the therapist/assistant or student providing their therapy. OR The therapy student is treating 2 residents, regardless of payer source, both of whom are in line-of-sight of the therapy student, and the therapist is not treating any residents and not supervising other individuals. Minutes may be coded as concurrent therapy.
- Supervising therapists must make the determination as to whether or not a student is ready to treat patients without line-of-sight supervision.

*CMS Long-term Care Facility RAI 3.0 User's Manual, October 2019.*

[https://downloads.cms.gov/files/mds-3.0-rai-manual-v1.17.1\\_october\\_2019.pdf](https://downloads.cms.gov/files/mds-3.0-rai-manual-v1.17.1_october_2019.pdf)

## Medicare B

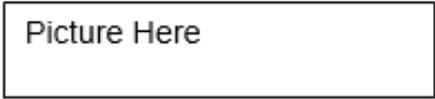
- Direct PERSONAL Supervision – The PT Intern can perform interventions and procedures under “direct personal supervision” or “joined at the hip” supervision. This means the PT is physically present and immediately available to direct and supervise tasks related to patient care/management. The direction and supervision is continuous throughout the time of tasks performed.

Therapists may bill and be paid for the provision of services in the following scenarios:

- The qualified practitioner is present and in the room for the entire session. The student participates in the delivery of services when the qualified practitioner is directing the service, making the skilled judgment, and is responsible for the assessment and treatment.
- The qualified practitioner is present in the room guiding the student in service delivery when the therapy student and the therapy assistant student are participating in the provision of services, and the practitioner is not engaged in treating another patient or doing other tasks at the same time.
- The qualified practitioner is responsible for the services and as such, signs all documentation. (A student may, of course, also sign but it is not necessary since the Part B payment is for the clinician’s service, not for the student’s services). When the PT Intern does participate in the Medicare B patient’s plan of care, the CI should note on documentation: “the qualified practitioner is directing the service, making the skilled judgment, and is responsible for the assessment and treatment.”

*CMS’ Medicare Benefit Policy Manual Chapter 15 Section 230*

**DES MOINES UNIVERSITY  
DOCTOR OF PHYSICAL THERAPY PROGRAM**



**CLINICAL INTERNSHIP  
STUDENT INFORMATION SHEET**

<b>Student Name</b>		<b>Student Email</b>	
<b>Present Mailing Address</b>			
<b>Phone</b>			
<b>Person to Notify in Case of Emergency</b>			
<b>Name</b>			
<b>Phone</b>			

**Student's Goals for the Clinical Internship (3-5 goals)**

1	
2	
3	
4	
5	

**Getting to know the student**

Preferred learning style(s)	
How I prefer to receive feedback (e.g. timing – how often, method, type)	
Strengths (e.g. knowledge and/or clinical practice skills):	
Specific areas to improve (e.g. knowledge and/or clinical practice skills)	
Previous Internship, Work, or Volunteer Experience (relating to P.T.)	

## Appendix G: Clinical Education Course Evaluation (Page 36)

### Selection Process

1. The information for site selection was available in a timely manner.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
2. The selection process was well-organized.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
3. The selection process was equitable for all students.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
4. The selection process information in the clinical internship course in the E\*Value system was useful.  
Strongly Disagree Disagree Neutral Agree Strongly Agree Did not use

### Internship Preparation

5. The internship preparation information presented was useful.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
6. My role and responsibilities for the internship were clearly explained.  
Strongly Disagree Disagree Neutral Agree Strongly Agree

### Clinical Internship

7. The internship objectives were useful in guiding my learning.  
Strongly Disagree Disagree Neutral Agree Strongly Agree Did not use
8. I understood the grading procedures.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
9. I was able to utilize the E\*Value system efficiently.  
Strongly Disagree Disagree Neutral Agree Strongly Agree
10. I was able to complete the CPI Web evaluations without difficulty.  
Strongly Disagree Disagree Neutral Agree Strongly Agree

### Directors of Clinical Education

11. The Directors of Clinical Education provided clear and concise communication.  
Yes, No
12. The Directors of Clinical Education were accessible within 1 to 2 business days.  
Yes, No
13. The Directors of Clinical Education were helpful in advising me during the process of my internship change/cancellation.  
Strongly Disagree Disagree Neutral Agree Strongly Agree Did not require

### Additional Questions

14. What suggestions would you offer to improve the clinical education process?
15. In regards to the curriculum, what suggestions would you offer that would have better prepared you for the clinical experience?
16. Additional Comments/Suggestions:

## Appendix H: Clinical Site Evaluation (Page 37-39)

### **PRACTICE SETTING**

What was the setting of your clinical education experience?

If you were in more than one area indicate approximate % of time spent in each.

Practice Setting	% Time	Practice Setting	% Time
Acute Care/Hospital (Critical Care, ICU)		Outpatient Clinic (General OPT Clinic)	
Acute Care/Hospital (General, not critical care units)		Outpatient Clinic (Sports Medicine)	
Home Health/Hospice		Outpatient Clinic (Workman's Compensation)	
Long Term Acute Care (LTAC)		School System	
Rehabilitation Unit/Hospital		Skilled Nursing Facility (SNF)/Sub-acute	
		Other	

Other Comments:

### **ORIENTATION**

#### Pre-clinical experience orientation

What information did you receive from your clinical site prior to your internship?

- Name of Clinical Instructor
- Logistics for first day (time to arrive, parking, etc)
- Dress Code
- Requirements to complete prior to start of internship
- Other

What other type of information did you receive from your clinical site prior to your arrival?

#### Orientation at clinical experience location

The orientation at my site included:

- Introduction to other staff members
- Tour of the clinical site/department
- Site Policies/Procedures (e.g. emergencies – fire, tornado, medical)
- other

Did the clinical site have objectives/expectations for your clinical experience beyond the course syllabus?

- Yes , No

If yes, what were the additional objectives/expectations?

### **PATIENT MANAGEMENT**

What was your average patient caseload per day at the midterm point of your internship?

What was your average patient caseload per day at the end of your internship?

What was your primary patient caseload diagnosis category during this experience?

- Musculoskeletal
- Neuromuscular
- Cardiopulmonary
- Endocrine and Metabolic
- Integumentary and Lymphatic Systems
- Oncology
- Other (GI, GU, Renal)

Indicate the approximate percentage of your patient caseload that was in each category during this experience. (%)

- Pediatric (preemie to 11)
- Adolescent/teen (12 to 17)
- Adult (18-65)
- Geriatric (> 65)

Indicate the approximate percentage of your patient care time during this experience was spent completing these activities. (%)

- Examination/Evaluation
- Discharge Planning
- Interventions
- Consultations

This clinical education experience allowed me to improve my patient evaluation diagnostic skills.

Strongly Disagree   Disagree   Neutral   Agree   Strongly Agree

This clinical education experience allowed me to improve my patient management skills

Strongly Disagree   Disagree   Neutral   Agree   Strongly Agree

### **CLINICAL ENVIRONMENT**

Rate the clinical site during this experience.

Strongly Disagree (1)          Disagree (2)          Neutral(3)          Agree (4)          Strongly Agree (5)

- The practice followed billing and coding guidelines.
- The practice followed Medicare guidelines.
- The therapists used practice guidelines care.
- The therapists used standardized outcome measures in their practice.
- The interaction of all staff members was professional.
- All staff members were culturally sensitive in all interactions.
- The patient caseload was sufficient to meet the objectives for this experience.
- As a student, I felt welcome.
- Therapists demonstrated life-long learning activities beyond attending continuing education courses. (in-services, journal club, etc.)
- The therapists encouraged involvement in professional and/or legislative activities.
- The therapists encouraged involvement in community service activities.

The clinical site provided additional learning opportunities that I participated in. (Select all that apply)

- administrative and business practice management
- community service activities
- health and wellness activities
- in-services/educational programs
- meetings/conferences
- patient co-treatment sessions with other disciplines (please specify disciplines)
- research activities
- surgery
- Other; Please specify

Did you participate in or observe interprofessional collaborative practice during your clinical experience?

- Yes, with other students
- Yes, with other professional practitioners
- No

Provide information regarding the collaborative activities and your role during the activity?

Explain/list this clinical site's strengths.

Explain/list what this clinical site could improve upon to provide a better student experience.

I would recommend this site to another student.

Strongly Disagree   Disagree   Neutral   Agree   Strongly Agree

How should future students prepare for this internship?

### **HOUSING**

What were your housing arrangements during this clinical experience?

- Lived in my own home/apartment
- Lived with family members
- Housing provided by clinical site
- Secured your own housing

Provide information regarding housing that may be helpful for future students. (e.g. cost room/board, contacts)

Any other comments you wish to add?

### **ACADEMIC PROGRAM**

Explain/list what the physical therapy program did well to prepare you for this clinical experience.

Explain/list what the physical therapy program could do better to prepare you for this clinical experience.

What experiences or techniques were you exposed to that you had not received academic instruction?

## Appendix I: Clinical Instructor Evaluation (Page 40)

### **CLINICAL INSTRUCTOR INFORMATION**

Was your CI

- APTA Credentialed Instructor (yes / no)
- DMU alumni (yes / no )

Please list any other specialty certification or credentials your CI possesses.

Years CI has practiced as a PT.

Years CI has instructed students.

### **SUPERVISION & FEEDBACK**

What was the supervision model during your internship?

- 1 CI to 1 Student
- 1 CI to 2 students
- 1 CI to 3 or more students
- 2 CIs to 1 student
- other - If you choose other, please indicate the supervision model used.

Was this supervision model a positive learning experience?

Strongly Disagree   Disagree   Neutral   Agree   Strongly Agree

Comments:

Did you mentor other PT students during your internship? (yes / no)

Rate the clinical instructor (CI) during this experience.

Strongly Disagree (1)   Disagree (2)   Neutral (3)   Agree (4)   Strongly Agree (5)

- The CI and I established an effective rapport.
- The CI provided adequate and timely feedback.
- The feedback provided was constructive.
- The CI communication was clear and sufficient.
- The CI offered encouragement.
- The CI facilitated my learning.
- The CI was open to suggestions to facilitate my learning.
- The CI encouraged problem solving and questions.
- The CI encouraged evidence-based practice.
- The level of supervision was appropriate for my needs.
- The CI gave me autonomy to make decisions.
- The CI facilitated collaboration with the patient health care team (pt, family members, other health care professionals).
- The CI provided responsibilities that were within your scope of knowledge and skills.
- The CI provided a fair assessment of your skills.

Please comment on the criteria listed above that was rated at 3 or lower.

Please provide comments on what your CI did well.

Please provide comments on what your CI could improve upon to facilitate student learning.



### PT CPI Web Instructions for a Student

Login to PT CPI Web at <https://cpi2.amsapps.com>

1. Your username is your email address provided to the school you are working with.
2. If you have previously created a password in PT CPI Web, please use that password to login. If you do not have a password or forgot your password, please follow these steps to create your password:
  - i. Go to the CPI Web address (<https://cpi2.amsapps.com>).
  - ii. Click on the link "I forgot or do not have a password".
  - iii. Enter your User Name in the box provided.
  - iv. Click on the Continue button.
  - v. Check your email account inbox for further instructions on how to set/update your password.

**PLEASE NOTE:** Make sure to close out of any internet browsers containing CPI Web prior to accessing the link in your email as this may result in an error when trying to set/reset your password. The link to change/create your password that is included in this message will expire 24 hours after the message has been created. If you try to access the link after 24 hours, you will receive a notification that the temporary authorization link is invalid. If this should occur, you will need to click on the 'I forgot or do not have a password' link located on the login page for CPI Web to receive a new password reset link.

**Update Information – This needs to be done at least once per year (If your information is up-to-date, please go to Editing the CPI)**

1. Click on the 'My Info' tab to update your information. You must update the APTA Data Release Statements found in the Data Authorization section.
2. When you are finished editing, hit the 'Update' button.

**Verify APTA PT Training – This can only be done if you are assigned to a CI on an Open evaluation (If you've previously done this, please go to Editing the CPI)**

1. Click on the name of your clinical site in the 'My Evaluations' section on your home page or click on the Edit link found in the Actions column in the Evaluations tab.
2. You are prompted to verify if you have completed the APTA PT CPI Training. If you have completed the training, please click the 'I have completed the APTA PT CPI online training and assessment.' button.
  - a. If you have not completed the training, please follow the directions on the page to take the APTA PT CPI Training.
  - b. If the email address you took the training with is different than your username, you will be prompted to enter the email address registered with APTA.
  - c. If you are having issues verifying you've completed the training, please contact PT CPI Web Support at [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com). Please provide your name, email address used to take the training, and the date you completed the training so that we can manually verify your training completion.

### Editing the CPI

1. Once you have verified you have completed the APTA PT CPI Training, you will see all 18 sections of the CPI.
  - a. You can edit one criterion at a time by clicking on the 'Edit Now' link on the right.
  - b. You can edit all criteria at the same time by clicking on the 'Edit All' column header link.
2. Click on 'View Sample Behaviors', 'View Introduction', and 'View Instructions' to view the details of how to fill out the CPI.
3. Mouse over any underlined word to view an APTA glossary definition. This is available for the Performance Dimensions and the Anchor Points on the APTA Rating scale.
4. Add comments to the comment box and select the rating for the student on the slider scale.
5. When you are done editing a section, click on the 'Section Sign Off' checkbox and hit the 'Save' button. Hitting Save will save the work edited on all criteria. Be sure to save your work!! If you leave the page without saving, your comments could be lost!!

### Signing off on the CPI

1. Once all sections are marked as 'Completed', please sign-off on your CPI. In order to sign-off, you would need to click on the Evaluations tab and then on the 'Sign-off' link found in the Actions column. Once this has been done, you would need to scroll to the bottom of the page, select the checkbox associated with the signature, and then click on the 'Save' button.
2. Once you sign off on your CPI, you are unable to make any further edits! Your CI will be able to view your CPI only if they have also signed off on their own CPI.

### Viewing your CPI with your CI and Signing-Off on your CI's CPI

1. Click on the Evaluations tab.
2. Click on 'View' link in the Actions column.
3. Use the filters to see the comments from both the student and the CI at the same time.
4. In the Evaluations tab, you will also see a link to 'Sign-off' on your CI's CPI indicating you've discussed the performance with your CI. Please follow the Sign-off procedures listed in the previous section to complete the sign-off on your CI's CPI.

### Additional Features/Tips:

#### Adding Post-Assessment Comments to the CPI:

1. Once you sign-off on the CPI, you cannot go back in to make further edits. After your meeting and review with the CI, if you needed to enter in additional comments about the CPI, you would be able to add post-assessment comments to the CPI by clicking on the 'View' link in the Evaluations tab and then adding in the comments in the appropriate box near the bottom of the page. Post-assessments can only be made by the CI or student once they have signed-off on their own evaluation as well as signed-off on each other's evaluations.

If you have any questions, comments or run into any issues using PT CPI Web, please contact Support at [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com).

### PT CPI Web Instructions for a CI

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  - i. Go to the CPI Web address (<https://cpi2.amsapps.com>).
  - ii. Click on the link "I forgot or do not have a password".
  - iii. Enter your User Name in the box provided.
  - iv. Click on the Continue button.
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**Update Information – This needs to be done at least once per year (If your information is up-to-date, please go to Editing the CPI)**

1. Click on the 'My Info' tab to update your information. You must update the APTA Data Release Statements found in the Data Authorization section. Also, please make sure that your credentials and certifications are accurately listed.
2. When you are finished editing, hit the 'Update' button.

**Verify APTA PT Training – This can only be done if you are assigned to evaluate a student on an Open evaluation (If you've previously done this, please go to Editing the CPI)**

1. Click on your student's name in the 'My Evaluations' section on your home page or click on the Edit link found in the Actions column in the Evaluations tab.
2. You are prompted to verify if you have completed the APTA PT CPI Training. If you have completed the training, please click the 'I have completed the APTA PT CPI online training and assessment.' button.
  - a. If you have not completed the training, please follow the directions on the page to take the APTA PT CPI Training.
  - b. If the email address you took the training with is different than your username, you will be prompted to enter the email address registered with APTA.
  - c. If you are having issues verifying you've completed the training, please contact PT CPI Web Support at [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com). Please provide your name, email address used to take the training, and the date you completed the training so that we can manually verify your training completion.



Last Updated 01/21/14

#### Editing the CPI

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  - a. You can edit one criterion at a time by clicking on the 'Edit Now' link on the right.
  - b. You can edit all criteria at the same time by clicking on the 'Edit All' column header link.
2. Click on 'View Sample Behaviors', 'View Introduction', and 'View Instructions' to view the details of how to fill out the CPI.
3. Mouse over any underlined word to view an APTA glossary definition. This is available for the Performance Dimensions and the Anchor Points on the APTA Rating scale.
4. Add comments to the comment box and select the rating for the student on the slider scale.
5. When you are done editing a section, click on the 'Section Sign Off' checkbox and hit the 'Save' button. Hitting Save will save the work edited on all criteria. Be sure to save your work!! If you leave the page without saving, your comments could be lost!!

#### Signing off on the CPI

1. Once all sections are marked as 'Completed', please sign-off on your CPI. In order to sign-off, you would need to click on the Evaluations tab and then on the 'Sign-off' link found in the Actions column. Once this has been done, you would need to scroll to the bottom of the page, select the checkbox associated with the signature, and then click on the 'Save' button.
2. Once you sign off on your CPI, you are unable to make any further edits! Your student will be able to view your CPI only if they have also signed off on their own CPI.

#### Viewing your CPI with your Student and Signing-Off on your student's CPI

1. Click on the Evaluations tab.
2. Click on 'View' link in the Actions column.
3. Use the filters to see the comments from both the student and the CI at the same time.
4. In the Evaluations tab, you will also see a link to 'Sign-off' on your student's CPI indicating you've discussed the performance with your student. Please follow the Sign-off procedures listed in the previous section to complete the sign-off on your student's CPI.

#### Additional Features/Tips:

##### Creating a Critical Incident Report using CPI Web (only to be used as needed)

1. To create a Critical Incident Report, click the link that says '[Critical Incident]'.
2. Record the details of the incident clearly and concisely without reflecting any biases into the Behavior, Antecedent, Consequence, and Comments text boxes.
3. Once you are finished recording the incident, click on the 'Submit Critical Incident' button. When a Critical Incident report is properly submitted, the following text will appear on the screen in bold green lettering, 'You have successfully filed a Critical Incident Report.' If you do not see this text displayed on the screen, please click on the 'Submit Critical Incident' button again.
4. Once submitted, a Critical Incident Report notification will be emailed to the CCCE, ACCE and student.
5. Any completed Critical Incident Reports can be found in the Critical Incidents tab where it can be viewed and additional comments can be entered.

**Submitting a Significant Concern - This MUST be accompanied by a Critical Incident Report using CPI Web**

1. Select the Significant Concern checkbox.
2. A pop-up box will appear with the following text. 'You have indicated a Significant Concern for this criterion. A Significant Concern must be accompanied with a Critical Incident report. Click "OK" to document and submit a Critical Incident report. Click "Cancel" to uncheck the Significant Concern for this criterion.'
3. If you click on the 'OK' button, the Critical Incident Report text boxes will automatically appear. Please follow the steps listed above to create and submit the Critical Incident Report. **PLEASE NOTE: If the Critical Incident Report is not submitted, the Significant Concern will not be submitted. Once a Significant Concern and accompanying Critical Incident Report are submitted, these CANNOT be reversed!**
4. If you click on the 'Cancel' button, the Significant Concern will not be submitted.

**Adding Post-Assessment Comments to the CPI:**

1. Once you sign-off on the CPI, you cannot go back in to make further edits. After your meeting and review with the student, if you needed to enter in additional comments about the CPI, you would be able to add post-assessment comments to the CPI by clicking on the 'View' link in the Evaluations tab and then adding in the comments in the appropriate box near the bottom of the page. Post-assessments can only be made by the CI or student once they have signed-off on their own evaluation as well as signed-off on each other's evaluations.

**Here are some things to note when there are multiple CIs assigned to evaluate one student in CPI Web:**

1. Only one CPI is created. All of the CIs would work on the CI portion of the CPI and the student would work on one self evaluation.
2. Each CI would have a separate comment box for all of the criteria. They would be able to see what the other CI had written, but they are unable to edit the other CI's comments.
3. There is only one rating scale for each criterion for the CIs. This is a shared scale amongst the CIs listed on the evaluation meaning that one CI can edit the rating that was selected by the other CI.
4. The minimum requirements to mark the section sign-off box for each criterion are that at least one CI comment box must be completed for the criterion and there must be a rating selected for the criterion. For example, if one CI commented on the CPI and the other CI agreed with what the other CI had written, the other CI wouldn't be required to enter in any comments on the CPI.
5. Once all of the section sign-offs have been checked and the evaluation is listed as Completed, either CI would be able to Sign-off that the evaluation is completed by clicking on the Sign-off link found in the Actions column in the Evaluations tab.

**PLEASE NOTE: Once the evaluation part has been signed-off on, it will lock out any other CIs from being able to edit that evaluation part.**

If you have any questions, comments or run into any issues using PT CPI Web, please contact Support at [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com).

### Student Completion of CSIF Quick Start Guide

Login to APTA CPI Web at <https://cpi2.amsapps.com>

1. Your username is your email address that was provided to your school/university.
2. If you have previously created a password in PT/PTA CPI Web, please use that password to login. If you do not have a password or forgot your password, please follow these steps to create your password:
  - i. Go to the CPI Web address (<https://cpi2.amsapps.com>).
  - ii. Click on the link "I forgot or do not have a password".
  - iii. Enter your User Name in the box provided.
  - iv. Click on the Continue button.
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3. If you do not recall your username and password, please contact CPI Web Support at: [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com)

**BEFORE YOU FILL OUT THE CSIF, CONTACT THE CCCE TO VERIFY WHAT INFORMATION, IF ANY, NEEDS UPDATING!!!**

Filling out and completing the CSIF:

1. In your 'My CSIFs' dashboard on the CPI Web home page, click on the name of your clinical site located under the 'CSIFs for Student Name' column.

**PLEASE NOTE: You will only have access to complete the CSIF for a clinical site when you are assigned on an evaluation that has been opened by your ACCE/DCE.**

2. At the top of your page, click on the '2016 CSIF Web Surveys' tab.
3. On the 'Current Site Surveys' page, click on the 'Select a Site' drop-down menu and choose your clinical site.
4. To begin working on the CSIF, click on the 'Start New Site Survey' button. If the CSIF has already been started by the CCCE and you do not see the 'Start New Site Survey' button, continue to Step 5.
5. You will see a screen with an overview of all the topic categories and their associated sections. Click on one of the red topic names to access the section(s) that need completion or editing.
6. On the last column on the right, click on 'Edit Now' to enter information associated with a particular section.
7. To complete the CSIF, you will need to type information into the appropriate fields, and select check boxes, radio buttons/circles and options from a drop-down menu.

**PLEASE NOTE: Any field that contains a green asterisk (\*) next to it is considered a 'Key Field.' Please refer to the 'CSIF Student Hint Sheet' that is located in your 'CSIF Web Help' dashboard on your CPI Web home page for a list of all of the information needed to complete the 'Key Fields.'**



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8. When you are finished editing a particular section, look for the 'Section Sign Off' message. Click the check box that says: 'This section has been completed.'

**PLEASE NOTE:** If you do not click on the 'This section has been completed' check box for each section, those sections will be considered still 'In Progress.'

9. When you are finished editing a section, you must click on the 'Save' button to keep your work for that section.
10. Once you click on the 'Save' button for a specific section, all of your work will be saved and the *Last Update* column will show the Date and Time that the information was last updated.
11. On the top of the page, click on another topic tab (ex. Site Information, Teaching Faculty, etc) to continue completing the CSIF.
12. Once you have completed and saved the entire CSIF, click on the 'CPI Web' logo on the top left of the screen and then click on your 'Home' tab.
13. In your 'My CSIFs' dashboard on the home page in CPI Web, click on the 'Submit' link located under the 'Submit CSIF for CCCE Review' column.
14. An email notification will then be automatically sent to you, your ACCE/DCE, and CCCE, informing all parties that you have finished your site's CSIF and your CCCE's review/verification is required.
15. After you have clicked on the 'Submit' link, a 'Re-Submit' link will appear along with the date and time of your previous submission. If you need to make changes to your site's CSIF, click on the name of your clinical site located in the 'CSIFs for Student Name' column on your 'My CSIFs' dashboard and follow the steps to edit the CSIF from above.
16. After you have successfully made your edits to the CSIF, please click on the 'CPI Web' logo on the top left of the screen and then click on your 'Home' tab.
17. Click on the 'Re-Submit' link located in the 'Submit CSIF for CCCE Review' column. Another email notification will be sent out to all parties informing everyone that you have finished your site's CSIF and your CCCE's review/verification is required.
18. In your 'Sites' tab in CPI Web, the 'CSIF Completion Status' column will display the appropriate CSIF status (**Unstarted, Started, Key Fields Complete and Full Complete**) based on the level that the CSIF is completed for all of the sites that are affiliated with your academic program.
19. In the 'CSIF Completion Status' column, a 'Pending Verification' message would only appear when the CSIF has been edited by a student and the CCCE still needs to review the edits that were made. Once the edits are reviewed by the CCCE, the 'Pending Verification' icon will disappear.

After you have completed and submitted your site's CSIF, log out of the system by clicking on the 'Exit' button located in the upper right hand corner of the screen.

If you have any questions, comments or run into any issues using APTA CPI Web, please contact Support at [ptcpiwebsupport@liaison-intl.com](mailto:ptcpiwebsupport@liaison-intl.com).



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