Clinical Education Handbook
For Student/Learners
Class of 2016

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Physical Therapist Assistant Program

Clinical Education is an integral part of the academic preparation of the entry-level Physical Therapist Assistant (PTA). It requires the dedication and cooperation of many parties including the academic faculty, the clinical instructors, the clinical coordinators and other clinicians who interact with the student/learners in their quest to learn how to do "what they do" with such ease on a day to day basis. Each student/learner will have the opportunity to work with a clinical instructor in a variety of clinical settings after passing competency tests and practical examinations. The clinical education courses provide clinical affiliations in area clinical sites to provide patient experience in the clinical setting to foster skill development.

One of the strengths of the profession of physical therapy is the diversity that exists among the types of settings in which physical therapy services are delivered. The PTA program faculty members will make every effort to ensure that student/learners have a variety of experiences through the three clinical education courses within the PTA program curriculum.

Each of the clinical education courses has a course handbook with specific objectives. Successful completion of the PTA program includes successful completion of the clinical education courses and classroom courses within the PTA program. Clinical education courses are somewhat different in that they take place off site from Mercer County Community College. The following policies have been drafted to assist the student/learner to understand who is responsible for what.

This handbook has been developed to help serve as a resource for student/learners for information regarding the Clinical Education component of the Physical Therapist Assistant Program at Mercer County Community College in Trenton, NJ. The information contained within this handbook is in addition to the Student/Learner Handbook that has been provided. All information, policies, and procedures found in the Student/Learner Handbook also pertain to the clinical education component of the curriculum.

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PTA 224 PTA Clinical Education I (3 cr)

Course Description: Supervised full-time clinical experience allows students to apply and practice skills learned in classes; to observe the clinic environment and PT/PTA interactions; develop professional deportment and communication; refine measurement and time management skills; and learn about patient chart information. Students are expected to write a case study. Experiences are shared with classmates and faculty in PTA Seminar I (PTA 226). Pre-requisite(s): PTA 106, PTA 112. Co-requisite(s): PTA 226.

PTA 235 PTA Clinical Education II (4 cr)

Course Description: Supervised full-time clinical experience allows students to apply and practice skills learned in classes; to observe the clinic environment and PT/PTA interactions; develop professional deportment and communication; refine measurement and time management skills; and learn about patient chart information. Students are expected to conduct an “in-service” presentation to colleagues at the clinical site. Pre-requisite(s): PTA 210, PTA 211, PTA 224, PTA 226. Co-requisite(s): PTA 236.

PTA 240 PTA Clinical Education III (5 cr)

Course Description: Supervised full-time clinical experience allows students to practice all of the techniques and procedures taught in the program, performing all of the activities normally expected of a physical therapist assistant. Students are expected to conduct an “in-service” presentation to colleagues at the clinical site and to write a case study. Pre-requisite(s): PTA 213, PTA 235. Co-requisite(s): PTA 241.
Mercer County Community College (MCCC)
Physical Therapist Assistant Program

Policy & Procedure Regarding Student/Learner Files

Once someone has identified him or herself as a PTA Science major and had official copies of transcripts forwarded to MCCC’s Admissions office, those transcripts are evaluated by the PTA program coordinator and a copy of the evaluation is maintained in alphabetical order under the learner’s last name in the PTA program office.

If that individual is accepted into the professional phase of the PTA program the transcript is removed and a file is made which will then include a copy of the Petition and transcripts. This file will then be the learner’s official file and repository for information generated while he or she is a student/learner enrolled in the Professional Phase of the PTA program.

These files may contain several different types of information including:

<table>
<thead>
<tr>
<th>Evaluative Information</th>
<th>Verification Information</th>
<th>Personal Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transcript evaluations</td>
<td>Proof of Malpractice Insurance</td>
<td>Physician Evaluation/Exam</td>
</tr>
<tr>
<td>The original petition</td>
<td>Proof of CPR for Health Care Providers</td>
<td>Proof of Immunity to Rubella</td>
</tr>
<tr>
<td>FERPA waiver</td>
<td>Proof of First Aid Certification</td>
<td>Proof of Immunity to Rubeola</td>
</tr>
<tr>
<td>Photography Consent form</td>
<td>Criminal Background Check Notice &amp; Criminal Background Check Application</td>
<td>PPD (Mantoux) testing</td>
</tr>
<tr>
<td>Student/Learner Handbook Receipt form</td>
<td>Proof of personal medical insurance coverage</td>
<td>Declination of Hep B if no immunity</td>
</tr>
<tr>
<td>Clinical Education Handbook form</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Results of Competency Tests</td>
<td></td>
<td></td>
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<tr>
<td>Results of Practical Exams</td>
<td></td>
<td></td>
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<tr>
<td>Results of Clinical Education evaluations</td>
<td></td>
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</tr>
</tbody>
</table>
Due to the highly sensitive nature of this information, these files will be maintained in the office of the program coordinator in a locked file cabinet. The ACCE and the Program Coordinator both have keys to the file cabinet and to the Program office. However, the following policies apply to the contents of these files:

- The information contained in these files is considered CONFIDENTIAL and not to be shared with anyone with the exception of the student/learner whose name is on that file.
  - The only exceptions to this would be:
    - In the instance where a potential employer has asked for a recommendation and the student/learner has granted the release of this type of information via the FERPA form within the file
    - When the ACCE needs to provide expiration dates for CPR certification and First Aid certification to clinical sites.
- Graded practical exams may be reviewed with the learner with a full time faculty member but the documents remain the property of the PTA program and cannot be copied.
- Clinical evaluations may be reviewed with the learner with the ACCE but the documents remain the property of the PTA program and cannot be copied.

Following graduation from the PTA program, these files are moved to another locked file cabinet in the PTA program office for an additional year before being stored for 7 years in the PTA program lab in a locked file and then moved to the PTA program archive for storage. Any questions regarding these policies or procedures should be directed to the PTA program coordinator.

Bjb 11/12
Clinical Education

One of the strengths of the profession of physical therapy is the diversity that exists among the types of settings in which physical therapy services are delivered, and to whom. Clinical education is an integral part of the academic preparation of physical therapist assistants. It would be impossible for an associate degree program in physical therapy to provide student/learners with quality clinical education experiences in ALL of the specialty areas of practice. However, the PTA program faculty will make every effort to ensure that student/learners have a variety of experiences through the three clinical education courses within the PTA program curriculum.

There are a total of 3 clinical education courses within the PTA program curriculum. Each of these courses has its own course handbook with specific objectives, just like all of the other courses within the PTA program curriculum.

Successful completion of the program includes successful completion of the clinical courses and didactic courses. Clinical education courses are somewhat different in that they take place off site from Mercer County Community College. The following policies have been drafted to assist the student/learner to help guide you through the differences and to understand who is responsible for what.

Responsibilities of the PTA program Faculty member (ACCE)

- locating physical therapy facilities for student/learner affiliations that offer the student/learner the opportunity to participate in the delivery of quality physical therapy services.

- maintaining contracts with clinical facilities to ensure that students/learners will have the opportunity to affiliate with quality physical therapy facilities

- contacting and/or visiting physical therapy facilities to maintain an open line of communication with regard to student/learner performance, program progress, the role of the PTA in clinical practice and setting up clinical affiliation schedules.

- developing a clinical performance instrument to be completed by the clinical faculty as a means of reporting to the PTA faculty with regard to the course objectives for the clinical education course.

- grading students/learners for the clinical education courses.

Clinical Education Course Grading:

- Clinical education courses are graded by PTA program faculty members who are responsible for determining that course objectives have been met by the student/learner.

- Holly Beinert is the Academic Coordinator of Clinical Education (ACCE) for the PTA program. She assigns clinical rotations for student/learners based on the individual’s interests, experiences, commute, and the sites available to meet the needs of the student/learner. It is the sole responsibility of the ACCE from the college, in this case, Holly Beinert, to communicate directly with the clinical instructor(s) who will be working with the student/learner during the clinical course. She is also responsible for scheduling either a visit or telephone conference with the sites so that the clinical instructor, student/learner and someone from the PTA program (either herself or Ms. Behrens) have a chance to speak to each other regarding the
progress of the student/learner. Each student/learner will be visited during at least one of their clinical affiliations. For those who are not visited, a telephone conference will be set up with the Clinical Instructor approximately halfway through the clinical education course.

- After each clinical site visit, a form is completed that indicates the content of the discussions with the student/learner, the clinical instructor, and possibly the Center Coordinator of Clinical Education (CCCE). The form details any further actions that might need to be taken or concerns that were raised during the visit. This completed form is placed in the student/learner’s file maintained by the PTA program.

- Student/Learners are encouraged to contact the ACCE (Holly) at any time during the clinical education course to express concerns and questions. Those student/learners who are not scheduled for a site visit halfway through the course are encouraged to contact the ACCE (Holly) to discuss the clinical education experience, professional behavior, progress toward clinical education goals, safety, and competence level of the student/learner.

- This activity is viewed as a powerful learning experience where the student/learner has the ability to self-evaluate and discuss self-assessment in a non-defensive environment. Essentially, the on-going communication provides all parties the opportunity to make sure that “they are all on the same page” in terms of student/learner progress.

### Course Grading

Grade ranges are as follows:

<table>
<thead>
<tr>
<th>Grade</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>93-100</td>
</tr>
<tr>
<td>A-</td>
<td>90-92</td>
</tr>
<tr>
<td>B+</td>
<td>87-89</td>
</tr>
<tr>
<td>B</td>
<td>83-86</td>
</tr>
<tr>
<td>B-</td>
<td>80-82</td>
</tr>
<tr>
<td>C</td>
<td>70-76</td>
</tr>
<tr>
<td>C+</td>
<td>77-79</td>
</tr>
<tr>
<td>D</td>
<td>60-69</td>
</tr>
<tr>
<td>F</td>
<td>0-59</td>
</tr>
</tbody>
</table>

Grades below 77 are not considered passing grades for PTA program courses, and are therefore considered unacceptable. **All PTA program courses must be completed with a grade of “C+” or higher.** All PTA program courses may be attempted only twice. **A cumulative GPA of 2.5 is required for graduation.**

### Responsibilities of the PTA student/learner

- to provide hard copies of all health records requirements (including proof of medical insurance coverage, CPR certification, First Aid certification, a physical examination form completed and signed by a doctor, lab results, declination of Hepatitis B if applicable, medical malpractice insurance, criminal background check application and proof of payment) directly to the ACCE as requested, by the first day of the fall semester, to ensure that all clinical sites receive their required confirmations of compliance

- to contact the clinical facility to which they have been assigned prior to the first day of each of the clinical affiliations to determine for themselves:
  - directions to the facility
  - attire requirements
  - hours of the facility and when they are expected to report to the facility for their affiliation there
  - the name of the Clinical Instructor (CI) at that facility

- to arrange transportation to and from the clinical facility at the student/learner’s expense
to provide the appropriate attire for the clinical education courses as designated by the clinical facility

to purchase and wear a name tag from either Life Uniform in Mercer Mall or Belle Uniform who come on campus to MCCC. The nametag must indicate:

  Student/learner Name
  "MCCC PTA Student"

to purchase and wear a lab coat with an “MCCC Physical Therapy” patch on the left shoulder in all competency testing situations & in-service presentations. (The patch can be purchased from Belle Uniform who come on campus to MCCC in June. Belle Uniform has the lab coat that has been specified and they will also attach the patch to the sleeve at no additional charge.)

to complete and return the clinical education evaluation instruments at the conclusion of each clinical education course along with any additional forms that may have been requested by the Academic Coordinator of Clinical Education (ACCE)

Academic Requirements for Clinical Education Courses (PTA 224, PTA 235, PTA 240)

To be eligible to participate in a clinical education course, student/learners must be deemed safe and competent by successfully passing all competency tests associated with lab courses and successfully demonstrating all of the Critical Safety Indicators that have been identified for each course. Student/learners must also:

  • Have passed all prerequisite courses
  • Be currently passing all corequisite courses
  • Be currently passing all other PTA prefixed courses to which he or she is enrolled with a minimum grade of 77 prior to commencing each clinical education course.

BJB, HB 05/12, PTAP 06/14, PTAP 01/15

Academic Failure of a Clinical Education Course

In the event that a student/learner does not achieve the academic requirement of a C+ or higher during a clinical education course, he/she may plan on re-entering the program for the next semester in which that clinical education course is regularly scheduled. Clinical Education I (PTA 224) is regularly scheduled each fall semester. Clinical Education II (PTA 235) is regularly scheduled each spring semester. Clinical Education III (PTA 240) is regularly scheduled each summer semester.

  • Please refer to numbers 18-25 of the Practical Examination Policies in the Student/Learner Handbook
  • Please refer to the “Repeating PTA Professional Phase Courses” Policy in the Student/Learner Handbook

BJB, HB 05/12

Policy & Procedures for Clinical Education Placements

Responsibility Delineation:

PTA Program assure that PTA student/learners have a variety of clinical experiences
<table>
<thead>
<tr>
<th><strong>Student/learner</strong></th>
<th><strong>PTA Program</strong></th>
<th><strong>Clinical Site</strong></th>
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</thead>
<tbody>
<tr>
<td>provide the PTA program with a completed placement form by Tuesday, May 27, 2014. This ensures that the ACCE has the required information to provide an appropriate clinical placement in a timely manner.</td>
<td>update the placement form information to maintain its accuracy contact, visit, assess and contract with acceptable area facilities where physical therapy services are delivered to arrange clinical affiliations for PTA students</td>
<td>provide the student/learner with direct patient care activities as identified in the objectives for the clinical education course once patient safety issues have been satisfied</td>
</tr>
<tr>
<td>Student/learner</td>
<td>PTA Program</td>
<td>Clinical Site</td>
</tr>
<tr>
<td>maintain current accurate information regarding the clinical sites and the types of services that are provided</td>
<td>maintain student/learner up to date access to clinical site information for the purpose of learning more about the facility prior to starting a clinical affiliation course</td>
<td>discuss and provide a written copy of the goals and objectives of the clinical education courses with the clinical education facilities in advance of the arrival of a student/learner for a clinical education course</td>
</tr>
<tr>
<td>Student/learner</td>
<td></td>
<td>Clinical Site</td>
</tr>
<tr>
<td>familiarize themselves with the information kept on file in the PTA Program clinical education files</td>
<td>contact the assigned clinical site prior to the first day of the clinical education course. Determine the details of the facility with the clinical instructor such as: starting times, ending times, attire requirements, directions, parking, etc.</td>
<td>provide written (clinical assessment forms at mid course, and at the end of the course) and verbal feedback (as appropriate) regarding student performance and progress</td>
</tr>
<tr>
<td>Student/learner</td>
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<td>PTA Program</td>
</tr>
<tr>
<td>contact the assigned clinical site prior to the first day of the clinical education course. Determine the details of the facility with the clinical instructor such as: starting times, ending times, attire requirements, directions, parking, etc.</td>
<td>all costs incurred for housing, transportation, uniform (if required), name tags, meals, parking, tolls or any specific medical testing or immunizations that may be required by the facility</td>
<td>visit each student/learner for a midterm visit during a clinical education course at least once during the professional phase of the PTA program</td>
</tr>
<tr>
<td>Student/learner</td>
<td></td>
<td>Student/learner</td>
</tr>
<tr>
<td>develop personal goals for each clinical education course and discuss those goals with the clinical instructor at the beginning, middle and end of each clinical education course</td>
<td>contact the ACCE during the first week of the clinical affiliation to discuss any concerns and integration within the site, and at any time thereafter to share concerns or issues</td>
<td>contact the assigned clinical site prior to the first day of the clinical education course. Determine the details of the facility with the clinical instructor such as: starting times, ending times, attire requirements, directions, parking, etc.</td>
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<td>PTA Program</td>
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<td>visit each student/learner for a midterm visit during a clinical education course at least once during the professional phase of the PTA program</td>
<td>act as the advocate for the student/learner in the event that a conflict arises in a clinical facility</td>
<td>discuss and provide a written copy of the goals and objectives of the clinical education courses with the clinical education facilities in advance of the arrival of a student/learner for a clinical education course</td>
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**toward meeting the goals of the clinical education course, and the goals that the student/learner has discussed with the clinical instructor**

PTA Program: contact clinical sites in written form at least once annually to maintain accurate information regarding the site, and to inform the site of any changes that might have been made in the PTA program during the prior 12 months.

Clinical Site: foster an environment that encourages learning and positive role modeling for the physical therapy profession

PTA Program: grading of the clinical experience for PTA student/learners *(as previously described)*

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**Procedure for Obtaining Clinical Slots**

1. Letters are mailed to all active clinical sites in the first quarter requesting affiliation slots for the following academic year.

2. When a completed form is received by the ACCE accepting a student/learner for clinical affiliation, the status of the written agreement with that clinical site is reviewed.

3. Students/learners are assigned to a clinical site for the affiliation six (6) weeks prior to the start of the affiliation.
   
   a. The site file located in MS 157, the ACCE’s office, is again reviewed prior to assigning the student/learner to confirm that the written agreement is valid.

4. Students/learners complete the “Physical Therapist Assistant Student Evaluation: Clinical Experience and Clinical Instruction” form for each of their clinical affiliations. These instruments are reviewed by the ACCE to help in determining the quality of the clinical site for future student affiliations. Students are visited at least once during the PTA program. The ACCE meets with the CI, and when possible with the CCCE, to discuss the clinical affiliation, and the relationship between the college and the clinical site.

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**Policies Regarding Clinical Education Site Placement Assignments**

Every *attempt* will be made to ensure that Clinical Education site assignments will not be:

- More than an hour from where the learner lives unless:
  - it’s a site that both the Academic Coordinator of Clinical Education (ACCE) and the learner have previously agreed to because the uniqueness of the experience is of interest to the learner while meeting clinical education goals
  - the learner has specifically requested to be assigned to that facility or
  - the learner has indicated on the Clinical Education Placement Form that he or she has housing availability (that the learner has made separate arrangements for on their own at their own expense) in specific counties of New Jersey or Pennsylvania that are greater than an hour from their primary residence
• However:
  o the learner must keep the ACCE abreast of address changes in writing as soon as they occur to offset unanticipated scheduling problems
  o the learners may need to demonstrate flexibility with this when they themselves are traveling from outside of Mercer County to attend the MCCC PTA program

Conflict of Interest
Learners will not be placed in facilities that would constitute a conflict of interest, as these would not represent an optimum learning environment for PTA program learners and hence the goals of the PTA program's clinical education component may not be attained. The PTA program considers the following situations to represent conflicts of interest:
  o Clinical facilities where the learner has been employed in the physical therapy department in any capacity
  o Clinical facilities where the learner has been or is currently employed
  o Clinical facilities where a significant other or family member related to the learner is employed or has a financial interest
  o Clinical facilities where the learner has a signed contract for future employment upon completion of the PTA program

Disclosure of Potential Conflict of Interest
Learners will have a formal opportunity to provide information pertaining to potential conflicts of interest to the ACCE by filling out the Clinical Education Placement Form. However, situations may change after the Clinical Education Placement Form has been provided to the ACCE. Therefore, at first knowledge that a situation could potentially be considered a conflict of interest, the learner shall disclose to the ACCE the precise nature of the interest or involvement in writing.

Preferred PTA Clinical Faculty
Mercer County Community College PTA students learn that many of the attributes that they have admired in their clinical instructors are skills that can be mentored. They also learn that there is a real place in the clinical environment for PTA role models. At the PTA forum, clinical instructors often encourage PTA students to think about giving back to the profession as clinical instructors themselves, reflecting back on the preferred list of attributes that is included in the clinical education handbook, which follows:

Preferred PTA clinical faculty members will give evidence of/or demonstrate:
• PT or PTA degree with at least one year of clinical experience in the practice setting which the person serves as the clinical faculty or significant comparable experience.
• Effective interpersonal and communication skills with students by clearly articulating expectations, providing and receiving constructive feedback, and active listening.
• Professionalism; practicing in a professional, ethical and legal manner.
• Competency; demonstrating knowledge, skills, and safety required for effective delivery of care.
• Organizational and time management skills (e.g. setting priorities and planning learning experiences for students.)
• Enthusiasm for the role of clinical faculty in the program.
• Ability to evaluate a student’s performance, especially as it related to safe and unsafe practice, ethical and legal behaviors, and the achievement of specific clinical performance objectives.
• Supervision skills commensurate with the learner’s needs and the patient’s acuity (e.g. illness, impairment, disability)

**Patient Confidentiality**

During the academic preparation to become a physical therapist assistant, there are instances when student/learners will be expected to collect data regarding a patient that is being treated in the physical therapy department. This data must be used for educational purposes only. Under NO circumstances, should this data be photocopied, or identified with a particular patient or individual by the use of proper names.

**Sample acceptable data for collection:**

- diagnosis
- prescribed medications
- age, gender
- overall medical condition of the patient
- previous medical history
- physical therapy plan of care (POC)
- record of PT visits
- physical therapy documentation

**Student/Learner Expenses**

As a student/learner in the PTA program, you are entitled to know approximately what costs are associated with the curriculum in addition to the tuition to the college. Costs are subject to change after the publication of this document; however, this should provide student/learners with a reasonable expectation for the amounts involved *(where known).*

**Medical**

You, the student/learners are responsible for all costs incurred while having a physical with your family physician for the purpose of completing the necessary health information worksheet. You, the student/learner are also responsible for attaining and maintaining your own health insurance policy. Clinical Sites may also have their own additional requirements (such as drug testing and separate background investigations). It is the responsibility of the student to fulfill those requirements within the given timeframe and to incur all costs associated with those requirements.

Due to the Patient Protection and Affordable Care Act (PPACA), health coverage requirements have changed significantly. As of July 2013, community colleges are no longer required to provide health insurance to full time students.

Anyone who was relying on the health insurance provided by Mercer will now be asked to secure their own healthcare coverage. You are being directed to the New Jersey Web site [http://www.state.nj.us/dobi/division_insurance/ihcseh/shop_ihc.htm](http://www.state.nj.us/dobi/division_insurance/ihcseh/shop_ihc.htm). This appears to be NJ’s insurance exchange site from the NJ Department of Banking and Insurance, which will enable you to shop directly for insurance plans, find an insurer, policy rate information and a list of other programs which provide health insurance coverage.

This site will allow you to shop various individual markets and purchase a plan based on individual demographics, and also a specific time line as opposed to a year offered most group plans. The site also provides information on Medicaid options to cover people making under $14,400 a year and also explains parameters for students to stay on their parents’ health plans up to the age of 26.
Transportation Expenses
Student/learners are responsible for their own transportation costs to and from all scheduled classes and clinical affiliations. This includes any other expenses incurred for food, parking, tolls etc., while attending PTA program classes.

Tuition and Fees
Tuition and fees are established by the MCCC College Board of Trustees. Different rates apply to residents of Mercer County, other resident of New Jersey, out-of-state residents, and non-U.S. citizens. Tuition is charged based upon a credit (or credit equivalent) hour basis. The college has entered into an agreement with Bucks County College so that those individuals who reside in Bucks county PA, will be considered “out of county” and be charged accordingly for PTA prefixed courses. This also applies for those individuals who live in counties within NJ where their own county community college does not have a PTA program. The college reserves the right to change tuition or fees at any time by action of the Board of Trustees. In addition to tuition and fees, student/learners are responsible for their purchasing their books and supplies for classes. This information can be found on the PTA Program website at: http://www.mccc.edu/~behrensb/StudentExpensesforthePTAProgram.htm

Lab Coats
Lab Coats are required for competency testing and Clinical Education courses. The lab coat must have a patch on the Left shoulder that indicates Mercer County Community College Physical Therapy, and student/learners must also wear a name tag that indicates their name, and that they are an MCCC PTA Student. These items are available through Belle Uniform who will be on campus in the summer so that these items can be fitted and ordered. Together, these items cost approximately $40.00.

Transportation
In addition to previously mentioned criteria for clinical placements, the student/learner is expected to be responsible for:
• reliable transportation to and from the clinical site
• all expenses incurred with regard to transportation to and from the clinical site
• all expense incurred with regard to parking if necessary for the clinical site
• all liability for incidents involved with transportation to and from the clinical site
Please note that all efforts are made to minimize each students’ travel distance, while also ensuring a variety of quality experiences.

Clinical Education Hours
Students/learners are expected to complete the required number of clinical education hours indicated for each clinical education course. The specific schedule for those hours per week that compromise the attendance in the clinic will be dependent upon the hours of operation of the clinical facility and the clinical instructor availability during the weeks of the clinical education course. Daily hours can be discussed with the clinical facility and they rely heavily upon the requirements of that clinical facility.

Students/learners are expected to be in their assigned clinical area at the clinical facility prepared to engage in clinical education activities a minimum of 10 minutes before the start of their “shift.” Failure to meet this requirement constitutes lateness. Chronic lateness will affect the student/learner’s grade for the course and may result in disciplinary action.
Absences:
Any time that the student/learner is absent from clinical education must be made up with permission of the Clinical Instructor and the Academic Coordinator of Clinical Education. Students/learners must call (texting is not an appropriate way to contact the clinical site or the ACCE and is unacceptable) the clinical site if they will be absent or late on the day assigned, prior to the start of their “shift.”

Holidays:
All holidays observed by the college will be considered holidays for students/learners. Clinical sites that observe holidays that coincide with scheduled clinical days will also be regarded as holidays by those students/learners assigned to that facility.

Weather-related School Closings:
When college classes are cancelled due to inclement weather, students/learners will not be required to attend clinical education. However, students who are able to attend their clinical affiliation may do so. Students/learners must check the MCCC website (www.mccc.edu) and/or register their telephone number with MAlert for cancellations.

Americans with Disabilities Act

On July 26, 1990, the President of the United States signed the Americans with Disabilities Act (ADA). The ADA is intended to remove barriers against the more than 43 million people with disabilities in the United States. If a learner has a documented learning disability, psychological disability, physical disability, or other hidden disability that requires an accommodation, it is the responsibility of that individual to make an appointment to meet with the Course Instructor to provide documentation indicating the accommodation that supports that request that is being made. This meeting must occur prior to the due date for any course examinations or assignments to discuss what accommodations might be necessary. It is the responsibility of the student/learner to provide written documentation for the need.

A list of Essential Functions for PTA program student/learners and graduates is available to all student/learners by request, from PTA program faculty members. Any student/learner in this class who has special needs because of a disability is entitled to receive accommodations. Eligible students at Mercer County Community College are assured services under the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973. If you believe you are eligible for services, please contact Arlene Stinson, the Director of Academic Support Services. Ms. Stinson’s office is LB217, and she can be reached at (609) 570-3525. stinsona@mccc.edu
Student/learner Injuries during Clinical Education Courses

In the event that a student/learner is injured while participating in a clinical education course the following steps must be followed to assure that expenses for any insurance claim are handled appropriately.

1. Advise the clinical instructor and course instructor immediately of the injury (Holly Beinert ACCE)
2. Prepare an **Injury Report** and an **Insurance Claim Form**. Copies of both of these forms can be obtained from either the nursing office on the first floor of the MS building, or from Holly Beinert in MS 157. Submit completed copies of the forms to the ACCE (Holly) and maintain the originals for your records.
3. Attach a copy of the incident report to the insurance claim form and follow the instructions on the form to file a claim. Student/learners are responsible for filing all claims and for any follow up necessary, directly with the insurance company.

Safety in on-campus and off-campus educational experiences

1. Mercer County Community College has a student body, faculty, administrative staff and personnel, who all commute to either the West Windsor or James Kerney (Trenton) campuses of the college. There are no provisions for dormitory facilities at either campus.

2. Whether student/learners are attending a class on one of the campuses or at an alternate location, every student/learner is individually responsible for his or her own transportation, and motor vehicle insurance coverage.

3. PTA program faculty members will not assume any additional risk by transporting student/learners to an off-campus activity. If a PTA student/learner requires minor medical assistance e.g. for a cut or abrasion, the PTA Lab MS 352 has a First Aid Kit, which contains bandages and first aid cream.

4. If a student/learner requires immediate medical assistance during a PTA program course on one of the MCCC campuses, then either a PTA program faculty member or designee will **call security at 570-3503** or by picking up one of the “red” telephones located in the middle of the long hallways of the academic buildings. Security will dispatch an EMT to the scene.

5. Mercer has a security Hot Line which can be reached by dialing 609-570-3200 from any telephone or just 3200 from any telephone on campus that is part of the Mercer extension system.
REQUIREMENTS FOR COMPLETING MANDATORY HEALTH RECORDS

A black binder titled “Forms, Policies & Health Records Binder” was provided to each student/learner during the Professional Phase of the PTA Program Orientation on Monday, May 19, 2014. This binder was reviewed in detail by the ACCE. All health records requirements are due to Holly on the first day of the fall semester. Detailed instructions and forms can be found in the binder.

Medical Care

1. All student/learners are financially responsible for medical treatment if illness or injury occurs while enrolled in the PTA program.

2. All student/learners are covered under a group policy for medical expenses arising from injuries on campus or in the clinical setting. This is automatically purchased for you from the general student fee. It provides secondary coverage and is only designed to supplement personal coverage. To take advantage of the college insurance for accidents causing injury, the following procedure must be followed:
   a. Advise your instructor immediately of the incident and ensure that a report is prepared. Obtain a copy of this report for your records.
   b. Obtain an insurance claim form from the Science & Health Professions Division Office (MS-126).
   c. Complete and sign the form and provide a copy to the Division Office.
   d. Attach a copy of the incident report to the insurance form and follow the instructions on the form to file a claim.

CONDUCT AND BEHAVIORAL EXPECTATIONS

Conduct During Clinical Affiliations

1. Activities begin promptly at the time specified by the clinical instructor.

2. Student/learners are required to wear name tags in the clinical site at all times and in addition, they must carry an MCCC ID badge with picture, at all times. On occasion, student/learners may be asked to identify themselves as a student and the MCCC picture ID will serve that purpose.

3. Certain clinical facilities require that badges be worn. Badges will be given to student/learners at the start of clinical rotations. Failure to return them at the end of the rotation may result in an incomplete grade for the course.

4. Student/learners understand that each patient has a right to decline treatment by a physical therapist assistant student, with no risks or repercussions to the patient. Student/learners are to treat all patients with respect, regardless of their decision to participate or decline participation in clinical education.

5. Student/learners are not permitted to visit any client in hospital settings while in uniform nor should they go to any area of the hospital, other than their assigned area, unless they have special permission from the clinical instructor.
6. Telephones in hospitals are not for personal use. **Student/learners do not make or receive telephone calls or text messages while in the clinic.** Emergency calls only can be returned during lunch breaks or at the end of the day with the permission of the clinical instructor. Cell phones are to be used only in designated areas.

7. **Chewing gum is not permitted and please** check with individual facility policies regarding areas where smoking is permitted. All clinical facilities are considered “smoke free” unless indicated otherwise by a clinical instructor.

8. Remember to keep voices low when going into a clinical site. Do not discuss patients or patient care in elevators, corridors or other public areas; this is a violation of patient rights.

9. Student/learners are not allowed to photocopy or otherwise duplicate patient information – this is a violation of patient confidentiality.

10. Student/learners may not act as a witness for any consent form. The student/learner may not transact any business for clients or patients. The Business Office of the facility or hospital must handle this.

11. Student/learners are **never** permitted to deliver or receive medications for patients from the clinical unit if in a hospital setting.

12. Student/learners are not permitted to accept or offer gifts from or to patients. This is both unprofessional and unethical.

13. All breakage of equipment must be reported to the clinical instructor in the clinical facility.

14. In the event of accident or injury during a clinical affiliation, the student/learner must report to the appropriate office at the facility and complete an Incident Report.
   a. Consult the section on Accident and Health Insurance for details.
   b. Any fees involved are the responsibility of the student/learner.

15. Clinical evaluations are performed approximately at midpoint during every clinical affiliation. A clinical failure occurs when a majority of evaluations in any one objective is graded as unsatisfactory.
   a. **However; the ACCE reserves the right to immediately dismiss a student/learner from the clinical area if his/her behavior is deemed unsafe. This dismissal may result in a clinical failure if the ACCE and or Clinical Instructor believe it is warranted.**

7. Any time lost due to illness may require a doctor’s note clearing the student/learner to return to the clinical environment. If the clinical site requires a doctor’s note for return to the clinic, this note must be presented to the clinical instructor upon returning to the clinic and a copy must be handed to the ACCE upon return to the MCCC campus with the evaluation materials.

   *Remember, at all times that you are representing the college, the MCCC PTA Program and the profession of physical therapy. Your behavior affects more than just YOU!*  
   *The use of the clinical site is a privilege.*
Communication Expectations and Skills

1. As potential members of the profession of physical therapy, student/learners are expected to convey an attitude of respect for each other and they are to conduct themselves in a manner conducive to communication.

2. Physical therapist assistants will be expected to work under the direct supervision of a physical therapist and are responsible for communicating effectively with the physical therapist to assure the safety and well-being of their patients.

3. A significant portion of each of the PTA program courses, specifically the PTA Seminar courses focus on communication styles and methods of self-assessment for personal growth and development. PTA Seminar courses are courses that compliment each of the Clinical Education courses within the PTA curriculum. Student/learners discuss their observations, fears, interests and newly found knowledge during class sessions.

4. Assignments are given to student/learners that draw upon the experiences that they are having in the clinical environment. The seminar courses provide a “safe” environment (without the presence of a clinical instructor or patient) for student/learners to share with each other. All communication within this and other PTA program courses is prefaced with the expectation that it will be constructive and professional. Student/learners may raise their concerns and seek assistance from their classmates in how to handle something that has come up during the clinical experience.

Guidelines for Appearance in the Clinical Setting

Each learner in the Physical Therapist Assistant program is required to purchase a lab coat for use during competency testing and practical exams while on campus. However; in the clinical environment each site will have its own requirements regarding what is appropriate. These guidelines must be considered when there are no other guidelines provided by the clinical site or when the class goes off campus for an activity.

1. Clothes must not be provocative.
2. Pant or slack length must be to the ankle, not above or excessively below, which would be dangerous.
3. Denim jeans, sweatpants or stirrup pants are unacceptable.
4. Shirts must be long enough to cover the abdomen and necklines must not be revealing.
5. Jewelry should be kept to a minimum. (no hoop earrings that could be caught in patient clothing)
6. Cologne, perfume, after shave lotions, etc. should not be used due to allergies and patient sensitivities. Cosmetics should be kept to a minimum for the same reasons.
7. Hair must be kept clean, neat and away from the face. (long hair must be kept up and secured)
8. Finger nails must be kept short*, neat, and clean. (*not extending beyond the end of the fingertips), (clear nail polish or no nail polish only!)
9. Proper undergarments must be worn.
10. Name tags and required facility Identification must be worn while in the facility. Failure to do so may result in dismissal from the clinical affiliation at the discretion of the clinical coordinator and clinical instructor.
Faculty members are authorized to deny any student/learner the privilege of participation in clinical affiliations, competency tests, lab activities or classroom lectures when the student/learner is:
   1) Unprepared (which would make him or her potentially dangerous to others),
   2) presents a health hazard to clients or fellow classmates, or
   3) when the student/learner’s performance falls below a competent level with regard to patient safety
   4) or, when the student/learner does not meet agency or facility health standards.

In such situations, participation in the experience will be discontinued until there is evidence that the student/learner’s progress meets minimal criteria for safe clinical performance. This may require medical documentation from the student/learner’s health care provider if indicated. Student/learners who are identified as not meeting clinical objectives with have an action plan for performance improvement developed by their clinical instructor.
Criteria for PASS, INCOMPLETE, and FAIL
Clinical Education Courses (PTA 224, 235, & 240)

Criteria for PASS
1. Perfect attendance is mandatory, and student/learners will abide by the facility's schedule, making every possible attempt to arrive at least 15 minutes prior to when he or she is expected to treat the first patient of the day. If this arrival time cannot be met, the student/learner is expected to notify both the CI and the ACCE of any change in arrival for clinical whenever it might occur. Any deviation in the schedule will need to be addressed and negotiated between the student/learner and the CI in advance.
2. Student/learner Self Performance Evaluations must be completed prior to both the midterm and final meetings with the Clinical Instructor.
3. It is the responsibility of the student/learner to make sure that the Clinical Performance Instrument (CPI) is completed by the Clinical Instructor and returned to the ACCE at Mercer.
4. Skills completed will vary based on the affiliation, and where the student/learner is within the curriculum. A list of acceptable skills to be addressed will be given to the student/learner and the Clinical Instructor prior to each affiliation.
5. Special assignments may be made at the discretion of the ACCE for each rotation and are due prior to being assigned a grade for that course. These may include, but are not limited to, case studies, journal entries, research projects, or in-service presentations. Clinical Instructors may also require special projects of a student/learner, which must be completed in the clinic. These may include in-service presentations, reading assignments, or other assignments that have been discussed and agreed to by the student/learner, the clinical instructor and the ACCE and are considered reasonable expectations.

Criteria for a Grade of INCOMPLETE
If time is missed during the clinical affiliation which inhibits the student/learner's ability to successfully complete the objectives for that clinical education course due to medical reasons or personal emergencies, then the student/learner will receive a grade of Incomplete for the course and may be able to complete the course during the next semester depending on the availability and cooperation of clinical sites. This will delay the graduation date by one semester or more depending upon the individual circumstances of the student learner.

HB 05/12

Criteria for a FAILING Grade
A student/learner will receive a grade of C for a clinical education course if:

- He or she is removed from the clinical setting for violating the rules and regulations of the clinical facility for disclosing confidential information, engaging in conduct that disrupts the activities of the facility, or threatens the safety of the facility personnel or patients
- He or she engages in unprofessional or unethical behavior in accordance with professional guidelines or Code of Ethics as defined by the profession
- He or she fails to meet the necessary academic requirements to pass the course as stated in the course handbook
- He or she is found to be involved in criminal activity within the clinical site or hospital
- He or she uses alcohol, drugs or other toxic or foreign agents, which tend to limit or adversely affect the student/learner's duties and responsibilities
- He or she engages in any behavior which violates a hospital/clinical site regulation and/or resulting in denial by the hospital/clinical site of clinical privileges
- He or she takes any action which knowingly endangers the health or well being of the student/learner, a fellow student/learner, patient or hospital personnel or visitor
- He or she vandalizes or abuses clinical equipment

If a student/learner is removed from a clinical education site, he or she may be dismissed from the PTA education program.
Clinical Education Disciplinary Policy

Although it is presumed that all medical laboratory technology, nursing, physical therapist assistant, and radiography students/learners exercise maturity and sound judgment in the process of becoming productive members of the health care community, there are occasions when it becomes necessary to address matters of conduct and discipline. In the event that disciplinary action becomes necessary, the program faculty will exercise fairness, utilizing progressive discipline when possible.

The type of disciplinary action taken will depend on the seriousness and nature of the offense, and the student/learner’s history of problems.

**Disciplinary action may include one or more of the following:**
1. Verbal counseling when the infraction is relatively minor or a first offense.
2. Written warning which may become part of the student’s permanent file when verbal counseling fails to achieve the desired change in behavior.
3. Removal from the clinical site when previous disciplinary actions fail to produce desired changes in behavior, or conduct presents a danger to self and others.

**Remember,** the aim is to promote those behaviors, which best serve the needs of patients, the health care institution and the community.

THE FOLLOWING ARE CONSIDERED JUST CAUSE FOR DISMISSAL FROM CLINICAL EDUCATION:

- Unprofessional or unethical behavior on the part of the student in accordance with professional guidelines or Code of Ethics as defined by the profession
- Failure on the part of the student/learner to meet any necessary academic requirements
- Criminal activity within the clinical site or hospital
- Use of alcohol, drugs or other toxic or foreign agents, which tend to limit or adversely affect the student/learner’s duties and responsibilities
- Any behavior which violated a hospital/clinical site regulation and/or resulting in denial by the hospital/clinical site of clinical privileges
- Action which knowingly endangers the health or well being of the student/learner, a fellow student/learner, patient or hospital personnel or visitor
- Vandalism or abuse of clinical equipment

When a student/learner is removed from a clinical education site, he or she may be dismissed from the education program.

Due Process and Grievance Procedure

Please refer to the college’s student handbook for an explanation of student due process procedures. The procedures applicable to campus activities are also applicable to medical laboratory technology, nursing, physical therapist assistant, and radiography program clinical education.
Clinical Education Disclosure Form

One of the tasks of the clinical education component of the PTA curriculum is to provide student/learners with the opportunity to work in a clinical setting with a diagnosed patient population. Through contractual arrangement, facilities have agreed to allow MCCC PTA student/learners to work directly with their patients under the supervision of a clinical instructor who is employed by the clinical facility. This type of agreement relies heavily on the trust between the clinical facility and the PTA program’s academic preparation of the student/learner to be able to successfully integrate him or herself into the clinical environment.

Faculty and clinical instructors are committed to student/learners’ successful completion of the clinical education component of the curriculum. In the event that a student/learner must re-take a clinical education course some decisions need to be made.

1. What remediation needs to take place for the student/learner to be more successful in the clinical setting?
2. Whether or not to disclose the reasons that the student/learner was not successful in the first attempt with the clinical education course.
3. Which clinical sites would provide an opportunity for a student/learner to repeat a clinical education course?

Every student/learner has the right to privacy with regard to his or her academic and clinical performance. This information is not disclosed to anyone without the expressed consent of the student/learner. When a student/learner needs to re-take a clinical education course it is the opinion of the PTA faculty that this information would be very helpful to disclose. Once the information is disclosed to the clinical instructor, a remediation plan can be developed by the PTA program faculty and implemented. This plan would be designed to assist the student/learner to become more successful as he or she re-takes the clinical education course.

Please indicate whether or not you agree to let the PTA program faculty members disclose this information on your behalf and develop a remediation plan for you. Failure to grant this permission will make you ineligible for the development of any remediation when you re-take this clinical education course.

☐ I agree to have the PTA program faculty disclose that I am re-taking this clinical education course, and the reasons that I need to re-take this course. I understand that the purpose of this disclosure is to help me be more successful.

_________________________________  __________________________
Signature                      Date                          Name

☐ I do not want the PTA program faculty to disclose any information about my re-taking this clinical education course. I understand that this makes me ineligible for the development of a remediation plan for this course.

_________________________________  __________________________
Signature                      Date                          Name
Disciplinary Action Form

Program of Study: Medical Laboratory Technology, Nursing, Physical Therapist Assistant, Radiography

Student Name: ________________________________________________

Faculty Member: ______________________________________________

Meeting Date: _________________________________________________

Nature of offense: ______________________________________________

_________________________________________________________________

********************************************************************************************

Written Warning:

This offense was originally discussed with you on ______________. Recommended changes in behaviors or actions have not been demonstrated. This copy serves as your written notice that the desired effect has not yet been achieved. Failure to produce the agreed upon change(s) within ________ will result in your removal from the clinical education site.

Student Name: ________________________________________________

Faculty Member: ______________________________________________

Notice Date: _________________________________________________

A copy of this page is to be retained by both the student and the Program Coordinator or their designee.
Mercer County Community College  
Physical Therapist Assistant Program

ANECDOTAL RECORD

Student’s Name: ___________________ Date: ___________________

Evaluator/Observer: ___________________

Setting (place, persons involved, atmosphere, etc):

Student Action or Behavior:

Evaluator Interpretation:

Student’s Signature: ___________________  Evaluator’s Signature: ___________________

Student’s Comments:
CRITICAL INCIDENT REPORT

**Directions**: Record each entry clearly and concisely without reflecting any biases.

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<tr>
<th>Antecedents</th>
<th>Behaviors</th>
<th>Consequences</th>
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<td>Evaluator Initials:</td>
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Student’s Signature:

Evaluator’s Signature:
Student Injury Report

INJURED
Name:______________________ Social Security Number:______________________
Address:___________________ Phone:____________________________________
City:_______________________ State:__________ Zip:_____________________
Date Injured:_______________ Time:__________ Place:____________________

INJURY
Describe the injury:________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Referred to:______________________________________________________________
By Whom:______________________________________________________________
Date:___________________________ Time:_______________________________
Student Signature:_________________________ Date:____________________
MCCC Staff Signature:_________________________ Date:____________________

WAIVER:
I,___________________________________________ decline treatment
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Student Signature:_________________________ Date:____________________
MCCC Staff Signature:_________________________ Date:____________________
Mercer County Community College  
Physical Therapist Assistant Program  

Probation from Clinical Education  

Notification of Safety Related Clinical Probation  

Based upon both written and verbal information received by MCCC faculty, you have been placed on Clinical Probation. This decision was not made without considerable thought and concern for your ability to successfully complete the PTA program curriculum. Probation will last for a time period agreed to between yourself, your clinical instructor, the academic coordinator of clinical education, and the PTA program coordinator.

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<th>Start Date:</th>
<th>Completion Date:</th>
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Successful completion of the probation indicates that the student/learner has performed in a safe and appropriate manner throughout the probationary period. At that point, the student/learner may continue in the clinical education course as described in the clinical education course handbook.

Unsuccessful completion of the probationary period may result in a student/learner’s inability to progress within the academic courses of the PTA program curriculum. This decision will be based upon individual student/learner records, and in accordance with the PTA program student handbook.

Your signature represents that you understand the information that has been explained to you.

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<th>Student Name:</th>
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<td>Student Signature:</td>
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Signatures of the clinical instructor, academic coordinator of clinical education (ACCE) and the PTA program coordinator indicate that they too understand the gravity (severity) of this decision, and that this has been explained to you.

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<th>CI Name:</th>
<th>Date:</th>
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<td>CI Signature:</td>
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Signature:  

|  
| Date:  
Holly Beinert, PT, MPT, ACCE beinerth@mccc.edu 609-570-3478 |

Signature:  

|  
| Date:  
Barbara J. Behrens, PTA, MS, PTA Program Coordinator behrensb@mccc.edu 609-570-3385 |
## CONTACT INFORMATION

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<tr>
<th>Role</th>
<th>Name</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td><strong>PTA Program Coordinator</strong></td>
<td>Barbara J. Behrens PTA, MS</td>
<td>609-570-3385</td>
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<td>NJ License # 40 QB 00015400</td>
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<td><a href="mailto:Behrensb@mccc.edu">Behrensb@mccc.edu</a></td>
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<tr>
<td><strong>Academic Coordinator of Clinical Education</strong></td>
<td>Holly Beinert PT, DPT</td>
<td>609-570-3478</td>
</tr>
<tr>
<td></td>
<td>NJ License # 40QA01114200</td>
<td></td>
</tr>
<tr>
<td></td>
<td><a href="mailto:beinerth@mccc.edu">beinerth@mccc.edu</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MS 157</td>
<td></td>
</tr>
<tr>
<td><strong>Division Dean (acting – temporary)</strong></td>
<td>Dr. Linda Scherr</td>
<td>609-570-3325</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:scherrl@mccc.edu">scherrl@mccc.edu</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MS 131</td>
<td></td>
</tr>
<tr>
<td><strong>Executive Assistant Division of Science &amp; Health Professions</strong></td>
<td>Barbara Pieslak</td>
<td>609-570-3383</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:pieslakb@mccc.edu">pieslakb@mccc.edu</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>MS 126</td>
<td></td>
</tr>
<tr>
<td><strong>Fax:</strong> 609-570-3831</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>mailing address:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Therapist Assistant Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mercer County Community College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P.O. Box 17202</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trenton, NJ 08690</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Shipping Address:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Therapist Assistant Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mercer County Community College</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1200 Old Trenton Rd.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Windsor, NJ 08550-3407</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
These forms are blanks copies for you to keep for your records. The forms that you need to sign and hand in to Holly are in the Black “Forms, Policies & Health Records” Binder
Mercer County Community College  
Physical Therapist Assistant Program

Notice Regarding Criminal Background Checks

The events of September 11, 2001 have caused many organizations to review their screening processes in order to strengthen institutional security. Of particular concern is the screening of health care professionals.

As a consequence, anyone who will have patient care responsibilities may be subject to criminal background checks by prospective employers, state licensing and certification boards. Included among those who are subject to background checks are students-in-training.

Please be advised that the hospitals and outpatient centers to which the Physical Therapist Assistant Program is affiliated may require background checks of its student/learners. An unfavorable report could bar a student/learner from clinical attendance at one or more of our affiliates. If this occurs, it is unlikely that the college will be able to identify a suitable alternative clinical placement. These student/learners may continue taking the lecture and laboratory courses, but will not be able to obtain a satisfactory grade in courses where clinical education is a required component.

Student/learners who choose to continue with registration for each semester’s PTA-designated courses do so with the understanding that a criminal record could prevent successful completion of the educational program and, indeed, licensure as a physical therapist assistant.

Acknowledgment:

I, ____________________________, have read and received a copy of this notice.

(Print name)

__________________ (Student/learner Signature)  ____________ (Date)

11/04
I, the undersigned, have received a copy of the Clinical Education Student Handbook. My signature acknowledges that this information has been explained to me and that I have been given the opportunity to ask questions about the content of the handbook. I understand that I will be held accountable for the expectations of students within this handbook and the PTA program handbook as stated or implied within them. My signature is provided voluntarily.

There were a total of 44 pages. I have retained my copy of all pages. I will keep this Clinical Education Student Handbook as my guide throughout the PTA Program.

__________________________________  __________________________  ____________
Student/learner name                  signature                        date
The individual presenting this form has been accepted into the PTA program at Mercer County Community College. PTA program students are required to meet the same health requirements mandated by the NJ Department of Health and JCAHO as employees of any health care facility. Thus, some requirements are in addition to those usually performed as part of a physical examination.

NAME: ___________________________ PROGRAM: Physical Therapist Assistant
MCCC PERSONAL IDENTIFICATION NUMBER: ___________________

IMMUNIZATIONS

<table>
<thead>
<tr>
<th>Immunization</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polio (if known)</td>
<td></td>
</tr>
<tr>
<td>Tetanus/ Diphtheria booster</td>
<td></td>
</tr>
<tr>
<td>(Must be within 10 yrs)</td>
<td></td>
</tr>
<tr>
<td>Dose 1 Date:</td>
<td></td>
</tr>
<tr>
<td>Dose 2 Date:</td>
<td></td>
</tr>
<tr>
<td>Dose 3 Date:</td>
<td></td>
</tr>
</tbody>
</table>

**Hepatitis B Series**

| Dose 1 Date:                | Screening/Titer Date*:
| Immune /Non immune          |                       |
| Dose 2 Date:                |                       |
| Dose 3 Date:                |                       |

NOTE: ONCE SERIES IS COMPLETED, TITER* MUST BE DRAWN AND RESULTS SUBMITTED. IF CLIENT IS NON-IMMUNE, SERIES MUST BE REPEATED.*Quantitative test results required

LABORATORIES

<table>
<thead>
<tr>
<th>Test</th>
<th>Date</th>
<th>Results</th>
<th>Circle One</th>
</tr>
</thead>
<tbody>
<tr>
<td>CBC</td>
<td></td>
<td>Within Normal Limits</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Urinalysis</td>
<td></td>
<td>Within Normal Limits</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Rubella Antibody Detection (HAI)**</td>
<td></td>
<td>Immune</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Rubeola Antibody Detection**</td>
<td></td>
<td>Immune</td>
<td>Yes / No</td>
</tr>
<tr>
<td>Varicella Antibody Titer**</td>
<td></td>
<td>Immune</td>
<td>Yes / No</td>
</tr>
</tbody>
</table>

NOTE: The rubella, rubeola and varicella screening tests must be performed regardless of client’s history.

- if non-immune to rubella and rubeola, then MMR must be given.
- if non-immune to varicella, vaccine is recommended.

**IGG titers required

ALL LABORATORY REPORTS MUST BE SUBMITTED.

TWO STEP MANTOUX (PPD)

<table>
<thead>
<tr>
<th>Step 1 Admin Date:</th>
<th>Step 1 Results:</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>#1 STEP RESULTS:</td>
</tr>
<tr>
<td>#2</td>
<td>#2 STEP RESULTS:</td>
</tr>
</tbody>
</table>

NOTE: IF POSITIVE OR CLIENT RECEIVED BCG, A CHEST X-RAY MUST BE TAKEN AT THIS TIME UNLESS ONE WAS PERFORMED WITHIN THE PAST TWO MONTHS. THE RADIOLOGY REPORT MUST BE SUBMITTED.

The tine or multiple puncture tests are not sufficient
PHYSICAL EXAMINATION

Pulse: _____  Blood Pressure: ______/_______ Height: ______  Weight: ______

Hearing:  Normal  Abnormal  Corrected
Vision:  Normal  Abnormal  Color Blind  Corrected with Glasses

ARE THERE ANY ABNORMALITIES IN THE FOLLOWING?

<table>
<thead>
<tr>
<th></th>
<th>No</th>
<th>Yes</th>
<th>If yes, please explain</th>
</tr>
</thead>
<tbody>
<tr>
<td>EENT</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Cardiovascular</td>
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<tr>
<td>Pulmonary</td>
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<td>Gastrointestinal</td>
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<td>Hernia</td>
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<td>Endocrine</td>
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<td>Musculoskeletal</td>
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<td>Neurological</td>
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<tr>
<td>Genitourinary</td>
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<tr>
<td>Emotional</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Physical Handicap</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

PHYSICIAN’S STATEMENT

Upon review of the physical exam and lab results, I certify that this student is medically able to perform all clinical activities without restrictions.

MD/NP Signature: ___________________________  Date: ___________

Print Name: ___________________________  License # ___________

Address:

Telephone # ___________________________

6/08 PTAP
As part of the requirements for clinical participation through Mercer County Community College, I authorize an investigation of my personal information. The investigation might include, but is not limited to criminal history records (from state, federal and other agencies). I understand that these records may be used for the participation of clinical into the aforementioned school’s nursing or any of its health professions programs. I authorize without reservation the full release of these records and for American DataBank and/or its agents contacted by American DataBank to obtain information.

In addition, I release and discharge American DataBank, and all of its agents and associates, any expenses, losses, damages, liabilities, or any other charges or complaints for the investigative process. I also authorize the full release of the information described above, without any reservation, throughout any duration of my enrollment at Mercer County Community College. I also certify that all information provided is correct on the application to the best of my knowledge. Any false statements provided will be considered just cause for denial of acceptance.

Upon Request, American DataBank will supply a copy of my report and my rights under the Fair Credit Reporting Act. Requests may be directed to: American DataBank, 820 Sixteenth St. 8th Fl., Denver, CO 80202 or by contacting us at 1-800-200-0853.

Please remember to go online at www.mercercollegecx.com and input your information.

< Please Print >

Applicant’s Name: _______________________________________________________________
  First                                                  M.I.                                           Last

Signature: _______________________________ Date: _____mm/____dd/_____ yy

Date of Birth: _____mm/____dd/______ yy (this is used for only criminal and driving records retrieval.)

Social Security Number: ___________________________ - ___________________________ - ___________________________

Driver’s License Number: _______________________________ State: _______

Current Address: ___________________________________________________ Phone Number: ________________
  Street Address
  _______________________________________________________________ Length of Residency: _____Yr
  ___________________________ State Zip

Have you ever been convicted of a crime: Misdemeanor: Yes ________ No__________ or a Felony: Yes_______No_______

Please fax this form to: 1-303-573-1779

(Confidential)

American DataBank
820 Sixteenth St., 8th Fl., Denver, CO 80202 Tel: 800-200-0853
Fax: 1-303-573-1779
I understand that as a student in a Health Profession Program at Mercer County Community College, I may experience exposure to blood or other potentially infectious materials and may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been encouraged to be vaccinated with Hepatitis B vaccine as part of the admission physical examination procedure. I have been given information regarding transmission, symptoms, risk, etc. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future, I decide to have the vaccination, I may do so at any time and must inform the health coordinator of the Health Profession program of which I am enrolled of this change.

_______________________________________________  ______________________
Student Signature                                 Date

_______________________________________________  ______________________
Witness’ Signature                                Date
HEPATITIS B INFORMATION

DEFINITION
Hepatitis is a viral infection of the liver. There are several types of infectious hepatitis: A, B, Non-A, Non-B, C, Delta and E. Hepatitis B presents the greatest risk to healthcare workers.

TRANSMISSION
Hepatitis B is transmitted by sexual contact, sharing needles and through contaminated blood and blood products. Hepatitis B is NOT transmitted through casual contact.

SYMPTOMS
Many people who are infected with the Hepatitis B virus never have any symptoms. Hepatitis is often an acute illness characterized by flu-like symptoms including fatigue, mild fever, muscle and joint aches, loss of appetite, nausea, vomiting, diarrhea, abdominal pain and jaundice. Severe infections may be fatal. Chronic carriers of Hepatitis B may develop cirrhosis or liver cancer.

OCCUPATIONAL RISKS
Everyone who has contact with potentially infected blood or body fluids is at risk. The Hepatitis B antigen is found in blood, saliva, urine, semen and vaginal secretions. Healthcare workers are at 20 times greater risk of contracting the virus that is the general public. Every year approximately 18,000 healthcare workers contract Hepatitis B. According to the proposed OSHA regulation on occupational exposure to infectious blood borne diseases, exposure average of one time her month is considered to be “at risk.”

VACCINE
A Hepatitis B vaccine is available that is safe and effective in the prevention of Hepatitis B infection. The Engerix-B vaccine contains NO HUMAN COMPONENTS – it is 100% synthetic. The vaccine is administered in three doses at 0, 1, and 6 months. Adverse reactions include local reactions such as soreness, redness and swelling at the injection site. The vaccine is contraindicated in individuals who are hypersensitive to yeast.

A signed “Notice of Declination” must be included with the PE form if you choose not to have the Hepatitis B Vaccine and you are not immune.
Mercer County Community College  
Physical Therapist Assistant Program

Health Records Requirements Acknowledgement

By signing this document, I, the undersigned, fully understand that my participation in PTA 224 (PTA Clinical Education I) in the fall of 2015 is **provisional** based upon the following. I must provide a hard copy of all of the items on the list of health records requirements on this form, which must be completed according to the instructions provided in the Clinical Education Binder, to the Academic Coordinator of Clinical Education by August 24, 2015.

My signature acknowledges that this information has been explained to me and that I have had the opportunity to ask questions about it prior to signing this form. I understand that I will be held accountable for the expectations of the health records requirements and all preparatory handouts and assignments prior to the clinical education component of the Professional Phase of the PTA program. My signature is provided voluntarily.

<table>
<thead>
<tr>
<th>Document</th>
<th>Location</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student/Learner Handbook Form</td>
<td>Student/Learner Handbook</td>
<td>Tuesday, 5/26/15</td>
</tr>
<tr>
<td>Clinical Education Handbook Form</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Privacy Waiver</td>
<td>Student/Learner Handbook</td>
<td></td>
</tr>
<tr>
<td>Photo Consent Form</td>
<td>Student/Learner Handbook</td>
<td></td>
</tr>
<tr>
<td>Policy Regarding Open Lab Time in MS 352: The PTAP Lab</td>
<td>Student/Learner Handbook</td>
<td></td>
</tr>
<tr>
<td>Suspected Student/Learner Substance Abuse Policy</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Notice of Criminal Background Check</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Health Records Requirements Acknowledgement</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Informed Consent Form</td>
<td>Policy, Forms &amp; Health Records Folder</td>
<td></td>
</tr>
<tr>
<td>Student/Learner History Questionnaire</td>
<td>Policy, Forms &amp; Health Records Folder</td>
<td></td>
</tr>
<tr>
<td>Clinical Placement Form</td>
<td>Provided during summer PTAP orientation meeting</td>
<td></td>
</tr>
<tr>
<td>Proof of Medical Insurance Coverage</td>
<td></td>
<td>Monday, 8/31/15</td>
</tr>
<tr>
<td>CPR &amp; First Aid Cards</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Exam, Lab Results, and Declination of Hep B (if applicable)</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Certificate of Medical Malpractice Insurance Coverage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Criminal Background Check: confirmation of payment and application submission</td>
<td>Clinical Education Handbook</td>
<td></td>
</tr>
<tr>
<td>Student Profile Form</td>
<td>Provided during Clinical Education I meeting (fall)</td>
<td>Within 1 week of Clinical Education I meeting in the fall</td>
</tr>
<tr>
<td>Contact Summary Form</td>
<td>Provided during Clinical Education I meeting (fall)</td>
<td>Hard copy prior to fall Practical Exam Day or via email/fax no later than day 2 of Clinical Education I</td>
</tr>
</tbody>
</table>

Participation in PTA 224 (PTA Clinical Education I) is also dependent on other factors outlined in the Student/Learner Handbook and Clinical Education Handbook, such as successful completion of all courses currently being taken, maintaining a 77 or higher, and registration of and payment for the course by the assigned deadline. I have read and understand the requirements set within this document. **I understand I will not be participating in PTA 224 (PTA Clinical Education I) unless the above requirements have been met.**

___________________________  ____________________________  ______________
Student/Learner Name  Student/Learner Signature  Date

BJB, HB 10/13
Mercer County Community College  
Physical Therapist Assistant Program

Suspected Student/Learner Substance Abuse Policy

Everyone’s personal safety is of the utmost importance and in the forefront of our thoughts. The purpose of this policy is to ensure the safety of all persons involved with the physical therapist assistant program, including but not limited to, student/learners, patients, clinical instructors and faculty.

- Academic and clinical faculty members of MCCC’s PTA program, have the right to require a drug test of a student/learner if the faculty member, clinical faculty or clinical instructor personally observes impairments in behavior as compared to the normal behavior of that particular student/learner that in the opinion of the faculty member could place others at risk of potential injury. (“Faculty member” refers to individuals identified above.)

- The identified student/learner will not be permitted to return to the clinical site or to continue in the physical therapist assistant program until he or she has received a clean and clear drug and alcohol test and has provided written copies of those results to both the college and clinical site if applicable.

- Any time lost due to this incident must be made up and will not be considered an excused absence. A plan for making up the lost time must be submitted to both the instructor for the course and Clinical Instructor if applicable and be agreed to by all parties. Signed copies of the plan will be part of the student/learner file maintained in the PTA program office.

- The cost of any required tests will be incurred solely by the student/learner.

This policy has been provided to each clinical site and faculty member within the PTA program and each student/learner prior to the placement of a student/learner from the PTA program into a clinical site.

I have received a copy of the Suspected Student/Learner Substance Abuse Policy. By signing below I acknowledge that I have read, understand, agree with and have had an opportunity to ask questions about this policy.

__________________________________  ________________________  ________
Printed Name                      Signature                      Date

BJB 3/13