



## OVERVIEW

Clinical education, a.k.a. internships, plays a huge role in physical therapy education. In fact, approximately 40% of a student's time in the PT program is spent in internships! The primary goal of the Pacific University School of Physical Therapy is to graduate well-rounded and highly competent clinicians ready to assume duties in any of the standard areas of physical therapy practice. Our curriculum is organized so that classroom learning is periodically intermixed with clinical learning. Beginning with the second semester of the first year and continuing thereafter, progressively longer time periods are spent in the clinic. Thus, by the end of the three year program, 39 weeks are devoted to full-time clinical internships.

The School of Physical Therapy has internship agreements with over 300 different clinical facilities. These include hospitals, skilled nursing facilities, school districts, and private clinics. These facilities offer internships in acute care, outpatient orthopedics, neurological rehabilitation, geriatrics, and pediatrics. Within these broad areas, numerous specialties and subspecialties exist. Where there are valid reasons for expanding into previously unexplored areas, we make every attempt to do so.

Although the majority of our clinical internship sites are in Oregon, students also go to many other states for internships, including Idaho, Utah, Wyoming, Alaska, Washington, Hawaii, California, Arizona, Montana, Colorado, Nevada, and New Mexico. Students may also participate in international internships. New clinical sites are continuously added in order to provide variety and quality to the interns' clinical experiences and students are afforded the opportunity to nominate sites for consideration.

## CLINICAL SITE EVALUATION

Many different factors are considered in selecting and maintaining clinical sites. These include location, the type of physical therapy service provided, qualifications of the clinical instructors, the facility's overall philosophy on clinical education, and resources available to the intern and clinical instructors. We strongly support and encourage clinical facilities to use the APTA Clinical Education Guidelines and Self-Assessments for clinical sites, Center Coordinators of Clinical Education (CCCE's) and clinical instructors (CIs). Although one year

of clinical experience is required in order to become a CI, we embrace the idea that individuals should be evaluated on their abilities to perform the requisite responsibilities, as opposed to merely the number of years of experience. Clinical instructors should demonstrate enthusiasm and willingness to work with interns; they should also have the ability to plan, conduct, and evaluate a clinical education experience based on sound educational principles. The School of Physical Therapy encourages all internship sites to have at least one clinical instructor who has gone through the APTA Clinical Instructor Education and Credentialing Program.

Another primary criterion used is that the facility is willing and able to accept interns on a regular basis. This contributes to the success of the program in a number of ways. First, the clinical facility knows the curriculum and the academic faculty well; therefore, the clinicians are more able to set appropriate expectations for a given level of intern because they are familiar with intern capabilities. Secondly, the ACCE knows the strengths and limitations of the sites and is better able to match an intern with particular interests and abilities to a certain site.

When deciding whether to initiate a clinical education agreement with a clinical site, preference for new sites is given to those types of facilities that are in short supply, such as pediatrics and neurological rehabilitation. Exposure to under-served areas, geographically, culturally, or otherwise, is another important consideration. Finally, the School of Physical Therapy will not knowingly contract with clinical sites where physicians, medical doctors, osteopathic physicians, podiatric physicians, dentists, physician assistants, chiropractic physicians, naturopathic physicians, or nurse practitioners have a financial interest in the physical therapy facility to which they refer patients. Pacific respects and adheres to the APTA's opposition of "referral for profit and physician ownership of physical therapy services," taking the position that such arrangements pose an inherent conflict of interest, impeding both the autonomous practice of the physical therapist and the fiduciary relationship between the therapist and patient. (APTA White Paper: Position on Physician-Owned Physical Therapy Services (POPTS), January 2005)."

Students are welcome to nominate sites for consideration for addition to our list of clinical facilities. Nominated sites will be evaluated according to the criteria and considerations described above. It often takes months to complete necessary accreditation documentation and contract negotiations, and an intern will not be sent to a facility for an internship prior to the finalization of all necessary paperwork.

The selection and evaluation of sites is primarily the responsibility of the ACCE and Assistant ACCE. However, the entire faculty and the student interns provide valuable input into this process. In general, new sites are considered “on trial” until the first few interns have utilized them. The evaluation process is ongoing to ensure that interns are afforded high quality clinical education and that they are not utilized just to provide patient care. This involves direct site visits, phone conferences with clinical faculty, and consultation with interns. In addition, specific information is solicited from these sources and shared with School faculty several times per year to assist in curriculum evaluation and modification. The clinic sites and clinical instructors generally meet the evaluative criteria very well. They are enthusiastic about Pacific interns and committed to their roles in clinical education. Once a clinical site is established, it is School policy to visit each site at least once every three to five years.

### **SUPPORT AND DEVELOPMENT OF CLINICAL SITES**

Pacific University helps to support and develop our clinical education facilities in several ways. Yearly continuing education workshops on clinical education topics are hosted by Pacific, in coordination with other Oregon programs, to provide valuable information to clinical instructors. These workshops also provide both formal and informal opportunities for clinical instructors and academic faculty to communicate with one another. Recent workshops topics have included the APTA Clinical Instructor Credentialing Program, the new APTA standards for clinical education, managing the challenging intern, and medical ethics.

In addition, Pacific University is a member of the Northwest Intermountain Consortium (NIC), an organization whose primary purpose is to support and promote high quality physical therapy clinical education. Current members include University of Montana, University of Colorado Health Sciences Center, Eastern Washington University, University of Washington, Idaho State University, University of Utah, Regis University, University of Puget Sound, University of New Mexico, A.T. Still University, and Pacific University. Yearly clinical education conferences are sponsored by NIC.

## STUDENT REQUIREMENTS

### ***CPR CERTIFICATION***

All students are required to have current certification in *CPR for Health Care Providers* which includes adult, child, and infant CPR and AED instruction prior to participating in clinical internships. CPR courses must be taken from instructors certified by either the American Heart Association or the American Red Cross. Online courses are **not** acceptable.

### ***HEALTH-RELATED ISSUES***

All students are required to have completed immunization requirements prior to admission to the University. The immunizations required to for admission are: MMR (2 doses); Td within last 2 years or Tdap if Td is older than 2 years; Tb test within one year of entering the university, 3 doses of Hep B PLUS a titer showing immunity; 2 doses of varicella vaccine OR if you have a history of varicella, a titer to indicate immunity; 2 doses of Hep A if traveling within program. Documentation must be provided for the above immunizations.

Each entering first year student completes the University Health Form, which is returned to the Student Health Center (SHC). The Administrative Assistant will then verify the student has completed this requirement, by checking the online database. **Students are responsible for keeping copies of their immunizations for their own files.** Copies may be obtained from SHC if needed. Any updates done during the year must be provided to the SHC so the database can be kept accurate. Other immunizations may be required by clinic sites and these requirements must be met prior to the start of an internship. Failure to comply with the immunization requirements could result in a late start of an internship. Per the HIPAA Omnibus Ruling all student immunizations records are protected under FERPA once the school receives this information.

Students also must maintain their own health insurance coverage during the course of the physical therapy program. Students will assume full financial responsibility for any required medical care received during clinical internships.

It is possible that students may be exposed to a variety of potential health risks while on clinical internships. Students should make an effort to be informed about the specific type of hazard involved with a particular setting so as to minimize their personal risk.

### ***CRIMINAL BACKGROUND CHECKS***

Students are required to undergo a criminal background check before the beginning of the physical therapy program. Many internship sites require this information, and some sites may

require the student to undergo an additional check prior to initiation of a particular internship. Students assume full financial responsibility for background checks. **Students are responsible for keeping a copy of their criminal background check.**

***DRUG TESTING***

Students may be subject to mandatory drug testing prior to starting a clinical internship if this is a standard hiring procedure of the facility to which they are assigned. Such testing usually consists of urinalysis and/or blood screen. If a site requests testing, students need to comply and assume full financial responsibility for obtaining whatever is required.

***LIABILITY INSURANCE***

The following coverage is maintained by Pacific University, Oregon covering their staff and students:

<u>Coverage</u>	<u>Limits of Liability</u>
Professional Liability	\$1,000,000 per occurrence
Including staff and students	\$3,000,000 per year
General Liability	\$1,000,000 per occurrence
Premises	\$2,000,000 per year
Auto Non-Owned & Hired Liability	\$1,000,000 Combined
Excess Liability	\$6,000,000 per year
Workers Compensation	Statutory, Not including students

**STUDENTS MAY CHOOSE TO PURCHASE ADDITIONAL LIABILITY INSURANCE**

## PROCESS OF INTERNSHIP ASSIGNMENTS

The main focus of the process of assigning students to clinical facilities is to provide the students with exposure to as many different types of facilities as possible while allowing them to develop skills in areas of special interest to them. The first four-week rotation, which occurs in May of the first academic year, is assigned in the fall of the first year. In May of the first year, students make choices for the six-week internship and the first ten-week internship, which begin in January of the second year and August of the third year, respectively. The selection process for the final two third year internships (ten weeks and nine weeks) occurs in May of the second year. **Of the four final internships, students are required to do internships in at least three different general areas of physical therapy practice (acute care, neurological rehabilitation, outpatient orthopedics, pediatrics, and geriatrics). Additionally, one of the five internships completed during the program must be in an inpatient setting and at least one internship must be done out of the Portland metropolitan area.**

The process of selection of clinical sites for students is highly personalized, as students are given the opportunity to provide input regarding their clinical placements. Students are encouraged to regard the clinical internships as a unique opportunity to expand their education and perhaps try some aspects of physical therapy of which they are unsure. Similarly, some students are discouraged from choosing sites if it is felt that their learning styles or needs are incompatible with that of the site.

Students have several sources of information available to them as they prepare to make their internship selections. First, students will meet with the ACCE or Assistant ACCE prior to each round of internship selections to discuss internship sites and student preferences. Also, each facility has filled out a Clinical Site Information Form, which contains a large amount of specific information about the practice setting(s) available at each site. These are kept up-to-date and available to students by the Administrative Assistant to the ACCE. Additionally, students are encouraged to read the evaluation forms filled out by previous students and to contact other students directly to discuss clinical sites.

Most of our clinical internship sites take students for internships from other physical therapy schools as well as Pacific University students, and many sites only take one or two students per year. In requesting internship spots from facilities, we follow the Uniform Mailing Dates advocated by the Clinical Education Special Interest Group of the APTA. Under this

voluntary guideline, all physical therapy schools mail out requests for clinical slots in early March; Center Coordinators of Clinical Education in turn are supposed to return their commitment forms by the middle of April. Students are provided with the list of clinical placements in mid to late April.

All clinical educators are directed to our Facility Clinical Education Manual regularly during the internship assignment and preparation process to aid them in determining when they would like to take students. Thus, CCCEs can best match the objectives of a given internship with the experiences afforded by their own resources. Information regarding the expectations of students during internships is sent again, along with student profiles outlining the student's individual goals, just prior to each internship to ensure proper readiness and planning. As we firmly believe that the students must be ultimately responsible for their own education, they are thoroughly briefed on expectations prior to each internship.

### **CLINICAL EDUCATION SCHEDULE**

#### First year, Summer Term (4 weeks)

DPT570 Clinical Internship I (4 weeks)

#### Second year, Spring Semester

DPT 642 Clinical Internship II (6 weeks)

#### Third year, Fall Semester

DPT723 Clinical Internship III (10 Weeks)

#### Third year, Spring Semester

DPT 724 Clinical Internship IV (10 weeks)

DPT 725 Clinical Internship V (9 weeks)

## INTERNSHIP POLICY

1. Students are responsible for all living and transportation costs incurred during clinical assignments, including but not limited to rent, airfare, rental car, food, and uniforms. Students may request additional financial aid to help cover the cost of internships, however, the School of Physical Therapy is not responsible for any internship costs, expected or unexpected.
2. The faculty of the School of Physical Therapy reserves the right to make final decisions regarding clinical placements.
3. Students **MUST** do at least one out-of-town internship. “Out-of-town” is defined as **≥ 40 miles from downtown Portland**. There are two primary reasons for this expectation. First of all, it enables students to experience the diversity of ways in which physical therapy is practiced in different geographical areas. Secondly, there simply are not enough internships in the Portland area for all students to do all of their internships locally. *Ensuring that every student fulfills the requirement to do internships in three different settings in their final four internships, as well as one inpatient internship, will likely necessitate that a student go out of the Portland area for more than one internship.*
4. **Students are not, under any circumstances, allowed to directly request internships from the internship sites.** This is done solely by the ACCE or Assistant ACCE. This policy exists to try to improve clarity surrounding the internship assignment process, and most importantly, it exists because the clinical internship sites have requested that students do not contact them directly to request internship positions. However, students may make contact with a site to gather information needed for nominating a new site (email address, phone number, CCCE name, etc.).
5. It is possible for a student to do an internship where she or he has previous clinical experience. The policy regarding clinical affiliations at sites where a student has previous clinical experience is as follows: (Note: Many hospital-based clinical education sites provide multiple types of physical therapy services. An acute care internship, outpatient orthopedic internship, and neurological rehabilitation internship may all be available from one hospital. For the purposes of this policy, “site” indicates the particular

hospital or company. “Department” indicates the area in the site where the internship will be performed if the site offers more than one type of internship.)

- a. A student may do an internship at a site where she/he has worked in a paid position if an internship is available in a different department from where she/he worked and with a clinical instructor with whom the student does not have a previous working relationship. If this situation is desired, the student must inform the ACCE. The ACCE will then contact the clinic to determine if an appropriate clinical instructor is available. *Example: Mary worked for Valley Hospital as an aide in the outpatient orthopedic department. Mary CAN do an internship at Valley Hospital in acute care. Mary CANNOT do an internship at Valley Hospital in outpatient orthopedics.*
- b. A student may do an internship at a site at which she/he volunteered prior to admission to physical therapy school or interned as an undergraduate student if the internship is supervised by a different clinical instructor than the individual who previously supervised the intern/volunteer. If this situation is desired, the student must inform the ACCE. The ACCE will then contact the clinic to determine if an appropriate clinical instructor is available. *Example: Mary got volunteer hours at Valley Hospital outpatient orthopedics under the supervision of Cathy. Mary CAN do an internship in outpatient orthopedics under the supervision of Fred, or in any other department at Valley Hospital. Mary CANNOT do an outpatient orthopedic internship under Cathy’s supervision.*
- c. A student may do more than one internship at a given site as long as the second internship is in a different department and with a different clinical instructor. If this situation is desired, the student must inform the ACCE. The ACCE will then contact the clinic to verify that an appropriate situation is available. Students should be aware that some clinical sites may REQUIRE that the student be at the same site in the same department for two back to back affiliations; a requirement of this type by the site precludes the restrictions stated in #3. *Example: Mary does an outpatient orthopedic internship at Valley Hospital. Mary may do an acute/rehab/pediatrics /geriatrics internship later in her/his academic career at Valley Hospital as long as the internship is with a different clinical instructor.*

6. After the clinical assignment committee meets to make assignments, students have one week to make changes to the list; after this time, a final list is posted. Students will be allowed to make changes to their clinical assignments after the final list has been posted under the following conditions:
  - a. A new internship site becomes available.  
OR
  - b. A student's originally assigned internship site cancels.  
OR
  - c. A student nominates an internship site and a new contract is established.

***No changes are allowed later than twelve weeks before the affiliation is scheduled to start, except in the case of a site cancellation.***

In cases of extreme personal hardship, students may request an exception to any aspect of the internship policy, including the statements on changing internship assignments and doing at least one out-of-town internship, by making a written appeal to the ACCE. Written requests for a change in internship assignment should clearly outline the reason(s) for the request and will be considered on a case-by-case basis by a committee comprised of the Director, the ACCE, the Assistant ACCE, and one member of the PT faculty selected by the petitioner. *The faculty ultimately reserves the right to assign students to best meet the needs of all parties concerned.*

## **PROFESSIONAL BEHAVIORS**

Professional behavior is vital to the success of each student physical therapist, the School of Physical Therapy, and the Physical Therapy profession. The process of becoming an effective physical therapist involves attaining competency not only in professional knowledge and skill, but behavior as well. These requisite behaviors, attributes, or characteristics may not be explicitly part of any given profession's core of knowledge and technical skills, but they are nevertheless essential for success in that profession. The abilities which define expected behavior within a given profession serve as the foundation for ability-based learning.

The term "Generic Abilities" and behavioral criteria specific to the practice of physical therapy were first classified by the faculty of the UW-Madison Physical Therapy School, and have been validated and accepted by clinicians as defining physical therapy professional

behavior. The faculty of the School of Physical Therapy at Pacific has chosen to adopt these originally defined abilities, with some minor modifications, as *Professional Behaviors*. The quality of professional behavior expected of Pacific University graduates is exemplified by the ten Physical Therapy-specific professional behaviors and the three levels of associated behavioral criteria. Satisfactory progress is demonstrated by exhibiting *beginning* level criteria by the end of the first year of the program, *developing* level criteria by the end of the second year and *entry level* criteria in the third year (please refer to table of [Professional Behaviors](#) (insert link)). *These behavioral guidelines apply both to the classroom and to the clinical setting.* Specific to the clinical setting, each student is expected to demonstrate appropriate professional behaviors and commitment to learning throughout the clinical education experience. This includes, but is not limited to, being punctual and prepared for every work day, respecting his/her clinical instructor, and being committed to a positive learning experience. To facilitate development of competency in the ten Professional Behaviors, faculty (classroom faculty and clinical instructors) provide formal and informal feedback to all students. Specific professional behavior is assessed during practical examinations, laboratory experiences, and presentations as well.

Additionally, students are encouraged to recognize the importance of self-assessment in their development as students and professional physical therapists. Reflecting on past experiences is an extremely valuable method of assessing one's own performance and planning more useful strategies for the future. To help foster this reflection, students and clinical instructors are expected to utilize the APTA's Clinical Performance Instrument (CPI) for mid-term and final assessments. We also expect each student to seek feedback from fellow students, clinical educators, and faculty. If a student demonstrates behaviors inconsistent with the Professional Behaviors, the following response will occur:

1. The student will be provided feedback regarding perceived inappropriate behavior(s) and relevant expectations of the instructor/faculty.
2. If a change to more appropriate behavior(s) does not occur, the student will be subject to appropriate consequences as determined by the faculty ranging from remediation to dismissal from the program.

## **PROFESSIONAL DRESS**

Interns are expected to abide by the dress code established by each clinical facility. In general, attire should be appropriate for the setting as well as the activity in which an intern is involved. It is also important that patients, families, visitors and colleagues be able to easily identify students as Physical Therapist Interns. Each intern is provided with a name tag before embarking on the first clinical rotation and is expected to wear this name tag during all clinical work.