UNIVERSITY OF
SOUTH CAROLINA
Arnold School of Public Health

Clinical Education Guide

Doctor of Physical Therapy Program
Exercise Science Department
Arnold School of Public Health
University of South Carolina

August 2026

Periodic updates to this Guide are available by pointing your browser to USC DPT's program website under Policies and Procedures. The latest update of this Guide occurred in August of 2024.

(https://sc.edu/study/colleges_schools/public_health/documents/dpt_clinical_ed_guide.pdf)

Additional resources can be found on the USC DPT Clinical Education Exxat Resource page.

(https://public.exxat.com/D001/University%20of%20South%20Carolina)

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2.0 Guiding Documents

2.1 Code of Conduct

Students enrolled in any course must abide by the University Of South Carolina Honor Code. Students should make themselves familiar with this code.

The Honor Code specifically states, "It is the responsibility of every student at the University of South Carolina at Columbia to adhere steadfastly to truthfulness and to avoid dishonesty, fraud, or deceit of any type in connection with any academic program. Any student who violates this Honor Code or who knowingly assists another to violate this Honor Code shall be subject to discipline".

Students must also abide by the University Of South Carolina Code of Conduct, and the Carolinian Creed, which states:

The community of scholars at the University of South Carolina is dedicated to personal and academic excellence.

Choosing to join the community obligates each member to a code of civilized behavior.

As a Carolinian…

I will practice
personal and academic integrity;

I will respect
the dignity of all persons;

I will respect
the rights and property of others;

I will discourage
bigotry, while striving to learn from
differences in people, ideas and opinions;

I will demonstrate
concern for others, their feelings, and their need for
conditions which support their work and development.

Allegiance to these ideals requires each Carolinian
to refrain from and discourage behaviors which threaten
the freedom and respect every individual deserves.

2.2 Program Mission, Vision, and Philosophy

The most current Mission, Vision and Philosophy for the University of South Carolina Doctoral Physical Therapy Program may be found midway down the Physical Therapy page.

2.3 Essential Functions

The Physical Therapy Program at the University of South Carolina has defined the Essential Functions of physical therapy, which serve in part as the technical standards for the admission, retention, and graduation of students in its program.

(https://www.sc.edu/study/colleges_schools/public_health/internal/documents/essential_functions2014.pdf)

Students must meet the Essential Functions of the Program. The university is not permitted to ask if a student has a disability and answering such a question is not required for a student to participate in a clinical education experience. However, if you desire to voluntarily disclose your status as an individual with a disability, you may do so. If you choose to disclose your status as an individual with a disability, and you desire to receive an accommodation to enable your participation in any physical therapy clinical education experience, you have the right to request a reasonable accommodation. Ultimately, each clinical education site will determine whether an accommodation request is reasonable for that specific clinical setting.

2.4 Program of Study

The most current Programs of Study for the University of South Carolina Doctoral Physical Therapy Program may be found here:

(https://sc.edu/study/colleges_schools/public_health/study/areas_of_study/physical_therapy/pt_current_students/index.php)

3.0 Clinical Education Program

The mission of the clinical education program is to train students to become evidence-based physical therapy practitioners. The clinical education coursework is progressive in nature in regard to complexity and the expected level of independence students will display in professional behaviors and patient management. Four full-time clinical experiences of 8-12 weeks with progressively higher performance expectations occur throughout the curriculum with the first full-time experience occurring in the 3rd semester of study. Clinical Education Experiences (CEEs) are sequenced to match the preparatory academic coursework. All students are placed in full-time, integrated CEEs in outpatient orthopedic and inpatient settings in the first and second years, respectively. Two terminal full-time CEEs occur in year three of the program of study, with one CEE in a neurological / rehabilitation setting and the final Capstone experience tailored toward students' professional goals. Graduates of this program are encouraged to further their

professional development through specialization in practice, participation in residency training, PhD training and any other appropriate methods of study.

CEEs are the cumulative activity designed to reinforce and practice skills learned in the classroom and laboratory settings. As such, CEEs and clinical instruction are considered vital components of the student's learning experience. CIs are considered as faculty of the physical therapy program (see USC DPT Policy and Procedures manual, section 2.1) and are respected and valued for their clinical skills. After successful completion of the USC DPT clinical education program students should be prepared for contemporary, entry-level physical therapy practice.

3.1 Clinical Education Agreements

A clinical education experience agreement between the school and facility must be signed and current for a student to be placed in a clinical experience in the facility. The agreement between the University of South Carolina and the clinical facility defines the roles and responsibilities of each agency. A copy of the agreement is filed in the office of the Physical Therapy Program and is attached to the site file on Exxat for student review. An original agreement is kept in the University legal office and a second original agreement is returned to the facility.

The Exxat Clinical Education Management System prepares a report that captures agreements expiring in the next 6 months. Those agreements are reviewed and the appropriate procedure to update or renew the agreement will be followed.

The University of South Carolina may use the clinical facility's agreement, but the University's office of legal counsel must approve the agreement.

3.2 Clinical Facility Selection

Clinical sites for the USC DPT program are chosen according to the following criteria:

- Professionals in the facility want to clinically train students.
- The facility is in the school's geographic region for the first three clinical education experiences, with a few exceptions. Sites in other regions are more commonly utilized for final clinical education experiences for the final capstone clinical education experience.
- The clinical facility engages in ethical and legal practices.
- The clinical facility employs an adequate number of clinical instructors (physical therapists) to provide appropriate supervision of the student. Supervision must be provided at a level that meets legal directives for that setting.
- The facility has an adequate number and variety of patients available to the student, in order to meet the requirements of specific clinical education experiences.

- A written clinical education experience agreement has been signed and approved by USC and the facility.
- The facility has a designated Site Coordinator of Clinical Education (SCCE) responsible for coordinating assignments and activities of the students.
- Clinical instructors will perform mid-term and final evaluations on a timely basis.
- Clinical instructors will continually communicate with students regarding their clinical performance (strengths, weaknesses, good behaviors, poor behaviors, inappropriate behaviors) and will communicate with the DCE on an as needed basis.
- Feedback will be willingly shared between the CIs, SCCE, and DCE regarding performance in their respective roles.
- Primary clinical instructors will have a minimum of one year of clinical experience.
- The clinical instructor or other identified personnel will orient the student to the facility by
    - Performing a facility tour,
    - Discussing documentation and scheduling procedures,
    - Showing the locations of the MSDS, fire extinguishers, emergency evacuation routes, and personal protective equipment,
    - Discussing the exposure control plan of the facility, and
    - Reviewing dress code, punctuality, and attendance requirements.

Other criteria that may aid in the selection of clinical sites but are not absolute requirements are as follows.

- The philosophy of the clinical site regarding patient care and clinical education is compatible with that of the academic program.
- The clinical education site provides other learning experiences (administrative, educational, research) in addition to the primary training activity of evaluating and treating patients.
- The student will be designated an area for personal belongings and charting.
- The clinical site is receptive to alternative models of clinical instruction (e.g., 2 students per clinical instructor, 1 student with split supervision by different clinical instructors).
- A credentialed clinical instructor is on site.
- Clinical instructor or SCCE provides student with guidelines and expectations regarding documentation and charging in that facility.

3.3 Faculty Roles and Responsibilities

Didactic and clinical education are integrated into one academic experience to develop the student into a physical therapist practitioner. Those individuals engaged in providing the clinical

education components of the curriculum are generally referred to as either Site Coordinator of Clinical Education (SCCEs) or Clinical Instructors (CIs). While the educational institution/Program does not usually employ these individuals, they do agree to certain standards of behavior through contractual agreements for their services. The primary CI for DPT students must be a physical therapist; however, this does not preclude a DPT student from engaging in short-term specialized experiences (e.g., cardiac rehabilitation, sports medicine, wound care) under the supervision of other professionals, where permitted by law. CIs and SCCEs at the facility are considered faculty of the University of South Carolina DPT program. Therefore, academic, including professional development, information is shared between faculty located on the University of South Carolina campus and in the clinical facilities providing clinical education.

3.3.1 Responsibilities of the Director of Clinical Education

The Director of Clinical Education (DCE):

- Plans, implements, and refines the academic clinical education component in collaboration with the academic faculty, clinical instructors, and students.
- Communicates and coordinates the spread of information between the affiliated clinical education sites and the academic institution.
- Maintains updated clinical education files on each facility including clinical education agreements and Student Evaluations of the Clinical Education Experience.
- Maintains student clinical education documentation, including compliance documents, learning activity files, and including CIET evaluations, the Student Clinical Information form, Contact Sheets, student projects, and Clinical Instructor/ Student Weekly Constructive Feedback form, and Patient Logs.
- Maintains individual and separate files on necessary student health information.
- Coordinates the preparation, placement, and supervision of students in clinical experiences.
- Communicates with clinical education faculty and students before, during, and after clinical education experiences.
- Provides counseling and remedial interventions on an as needed basis.
- Advises students regarding processes and support resources throughout progression of clinical education program.
- Recruits and develops new clinical sites on an as needed basis.
- Assists clinical faculty development.
- Assigns final grade for Clinical Education Experiences.

- Performs site visits to develop relationships and evaluate clinical sites and instruction.

3.3.2 Responsibilities of the Site Coordinator of Clinical Education

The Site Coordinator of Clinical Education (SCCE) will:

- Administer the facility's clinical education program.
- Coordinate assignments and activities of students at the clinical education site.
- Selects qualified Clinical Instructor (CI) for student assignment and informs the DPT program of the CI's name.
- Distributes information about the curriculum, evaluation materials, clinical education experience objectives, and specific student profiles to the appropriate CI.
- Communicates with Director of Clinical Education (DCE), CI, and student.
- Educates and develops CIs' skills as needed.
- Assists the CI in developing alternative or remedial instruction for students as needed.
- Assists the CI in evaluating the student as needed.
- Reports to the DCE any student who is at risk of failing the clinical education experience.

3.3.3 Responsibilities of the Clinical Instructor

The Clinical Instructor (CI):

- Has a minimum of 1 year of clinical experience.
- Must be a licensed physical therapist in the state of practice.
- Provides effective clinical instruction to the student.
- Uses best efforts to facilitate safe practice by the student physical therapist.
- Demonstrates clinical competence and legal and ethical practice.
- Reviews the Student Clinical Information Form prior to the student's arrival for the CEE.
- Discusses clinical education objectives, the student's personal objectives, and methods of supervising and communicating with the student during the first day(s) of the clinical education experience.

- Discusses and modifies objectives, supervision, and communication with the student throughout the clinical education experience as needed.
- Communicates daily with the student to provide feedback as needed to assist the student in meeting personal and clinical education experience objectives.
- Completes and reviews *Clinical Instructor / Student Constructive Feedback Form* on a weekly basis.
- Completes the training and appropriately completes a mid-term/final evaluation of the student's performance using the Clinical Internship Evaluation Tool (CIET).
- Communicates with the SCCE or DCE as needed.
- Reports to the SCCE and DCE any student who is at risk of failing the clinical education experience.
- Facilitates evidence-based learning in the student.

3.4 Student Rights and Responsibilities

The following sections outline expectations and requirement for students before and during clinical education experiences. This includes, but is not limited to, items pertaining to university, program, and clinical site requisites to ensure compliance with policy, legal, and accreditation standards. While students may be subject to certain contractual obligations as part of the clinical education agreement between the university and the facility at which they are placed, students are not considered employees of any facility in their capacity as a clinical student.

3.4.1 Pre-Clinical Requirements

Students must meet the qualifications to participate in clinical education experiences, including successful completion of didactic coursework that precedes CEEs in the student's program of study. Students must pass all courses identified as "PHYT" courses with a grade "B" or better. All non-PHYT courses must be passed with a grade of "C" or better. The student must also pass a comprehensive examination before enrollment will be permitted in the final terminal full-time clinical education experience.

Maintenance of Student Records:
Each student should review and sign an Authorization for Release of Records and Information form for the release and exchange of necessary health and academic information between the facility and the academic institution. A copy of this form may be found on Exxat.

Sensitive student information required to participate in clinical education experiences, including criminal background checks, drug screens, and health records, will be maintained on the Exxat platform. Exxat encrypts the data at rest and in transit both from the University of South Carolina DPT program and

to the designated clinical facility. All computers of the clinical education office which upload data to the Exxat platform are also password protected. All of this data will be deleted from the Exxat platform 10 years after students' graduation date. In instances when a clinical site requires a longer retention period, records will be downloaded from Exxat before deletion, and maintained on an encrypted university server for the requisite time period.

Clinical Education Experience Program Agreement:
Each student should review and sign this agreement. This details information and rules the student should know prior to going to the clinical education experience. It includes many of the items in this section and a confidentiality agreement. A copy of this form may be found on the Exxat platform.

American Physical Therapy Association Membership:
Student membership in the APTA is recommended. Information on APTA membership is available upon request or can be obtained from the APTA website at http://www.apta.org/.

Malpractice Insurance:
Malpractice insurance in the amount of Two Million/Four Million dollars of coverage per incidence/occurrence is required for the duration of each clinical experience and is provided by the University of South Carolina doctoral physical therapy program. Additional personal student professional liability coverage may be obtained through private vendors.

Workman's Compensation Insurance:
Workman's compensation insurance is required for the duration of each clinical education experience and is provided by the USC DPT Program.

Health Insurance Coverage:
Health insurance coverage is required by the University of South Carolina Graduate School. Additionally, most clinical facilities require a statement of health insurance coverage. You must maintain non-expired health insurance card verification in your clinical education file with the DCE.

The University will provide and charge you with the University's health insurance plan if you do not provide proof of other satisfactory health insurance coverage. More information regarding the University's health insurance policy can be found at https://sc.edu/about/offices_and_divisions/student_health_services/insurance-payments/required-health-insurance/index.php.

Requests for new clinical education sites:
Requests for new clinical sites must be submitted to the DCE before or during January of the year preceding the clinical education experience. Requests should be made by completing the *Request for New Clinical Site* form which can be found on Exxat and in this Guide. If the DCE and the clinical site agree to a contractual relationship, the student initiating the request will be given the first option to intern at the site should the facility offer an appropriate clinical education experience.

Clinical Agreement Review:
The student is required to review the Clinical Agreement for each facility to which they are assigned. All provisions of the agreement requiring an obligation on the part of the student should be carefully reviewed. The student is required to read and sign the *Contract Review Sheet*. **If the agreement requires training or immunizations not routinely conducted by the USC program, the student must satisfy these requirements before they can attend this clinical education experience. Unless otherwise notified by USC DPT, students should expect to bear the costs of any immunization, health testing, trainings etc. that are routine within the USC DPT program or that may be required by a clinical facility for a specific CEE.** Clinical Agreements are available on Exxat in the Sites Documents section of Site Details for a specific clinical education site.

3.4.2 Student Health & Safety

Health Examination:
Many clinical facilities require a health or physical exam. Students will be required to obtain this exam if assigned to a facility with this requirement. Students who have self-disclosed any disability or history of injury will also be required to obtain a physical health examination with clearance from a medical professional prior to participation in clinical education experiences for the safety of the student and/or patients. Failure to obtain a required health examination will prevent the student from attending the required clinical education experience and may delay progression of the student in their program of study.

Immunization Requirements/TB Testing:
Proof of immunity is required for measles (rubeola), German measles (rubella), mumps, chickenpox (varicella), pertussis, tetanus and Hepatitis B. Immunity for MMR and varicella are established by a positive titer or proof of vaccination. Immunity or vaccine non-responder status must be shown for Hepatitis B through appropriate vaccination history and positive titer testing. If the titer is negative, additional booster doses of the appropriate vaccine will be administered, with subsequent titer testing. USC DPT follows recommendations by the Center for Disease Control (CDC) for vaccination status, and internal policies are subject to change as the CDC updates recommendations for healthcare providers.

Annual tuberculosis screening is required each fall semester for all students enrolled in the USC DPT program. Occasionally, a clinical education facility may have more extensive immunization requirements. The clinical education team will communicate with students regarding additional requirements, but it will the responsibility of the student to complete and comply with all requirements in a timely manner.

Influenza vaccinations are generally required for fall and winter clinical education experiences. Requirements for Covid-19 vaccination vary by facility. It is the responsibility of the student to communicate with the DCE regarding any plan or desire to seek any accommodation or exemption for

any immunization requirements, however accommodations/exemptions are granted at the discretion of individual clinical sites. It is the student's responsibility to inform the DCE in writing if they plan to seek a medical or religious exemption and to initiate that process well in advance of the start of any CEE. Students who do not receive a sought exemption from a clinical partner are subject to change in clinical site or potentially delay in program progression.

CPR Training and Certification:
Safe practice in the clinical environment is the responsibility of the student and the CI. It is the student's responsibility to inform the CI when they have not performed a specific task. The student should articulate a plan for the performance of novel tasks and the CI may give feedback as they deem necessary.

All USC DPT students are required to complete and maintain CPR training and certification that will remain valid through the entirety of each CEE prior the start of the CEE. Many clinical sites only accept the American Heart Association's (AHA) Basic Life Support (BLS) course. As such, students maintain CPR certification through AHA to ensure compliance with all clinical site requirements.

If a clinical placement site has a requirement for CPR training that is different than the student's certification/training, the student must meet the additional requirement ahead of the start of that CEE. All students should maintain a current BLS for healthcare providers certification without expiration or renewal occurring during any CEE.

Annual Health/Safety Training:
Blood borne pathogen, standard precautions, fire safety and tuberculosis training are required annually. This training is available on Blackboard within the DPT Clinical Education organization.

Back safety training is required at orientation.

The student is required to inquire and have knowledge about the isolation procedures required in the affiliate facility.

HIPAA Requirements:
Students must complete annual HIPAA training by reviewing the appropriate document on the DPT Clinical Education course in Blackboard and passing the appropriate test/quiz.

Additionally, the student must ascertain and adhere to the HIPAA policies and procedures specific to the clinical site where they intern.

3.4.3 Background Checks

Prior to matriculation, USC DPT Program will notify all admitted students of the requirement that they must have an approved background check prior to participation in clinical education. At orientation, the DCE instructs new students when to obtain the criminal background check. Prior to starting a clinical education experience with a contracted/affiliated hospital or healthcare facility, students may be required to undergo additional background checks to enhance patient safety and

protection. Students should be prepared for to complete a background check at the direction of program personnel. Flags on background check/drug screen can have adverse implications for clinical placement and program progression.

The USC DPT program requires admitted students to undergo a background check in the first semester of the program. A private company approved by the University of South Carolina to perform background checks will conduct these checks. The student has the responsibility to initiate the procedures to obtain the background check. The background check may include, but not be limited to, one or more of the following checks:

a) Criminal Record Check for all locations of residence for previous seven years from addresses disclosed as part of the application process;
b) Statewide Sexual Offender and/or Sexual Predator Registry – A database search for individuals registered as sex offenders and/or sexual predators in the selected state or jurisdiction for all locations of residence for the previous seven years;
c) Health and Human Services (HHS), Office of the Inspector General (OIG), General Services Administration (GSA) List, Persons or entities listed as excluded from participation in Medicaid, Medicare, and Federal Health Care Programs. Debarment actions on the HHS/OIG/GSA lists;
d) Office of Foreign Assets Control (OFAC) Terrorist Search, specially designated nationals, and blocked persons as determined by OFAC;
e) Social Security Report, Names, addresses, and employment associated with a social security number. The background check vendor will provide an electronic report directly to the DPT DCE or DCE Assistant.

Information from the background check may be used by the DCE to advise students regarding their participation in clinical education and/or continuance status in the USC DPT program, but only after consultation with the student and appropriate faculty and/or University officials.

<u>Process for Background Checks</u>:
The office of the DCE initiates a criminal background check request through the USC authorized third-party vendor. The clinical education team will notify students that the background check process has been initiated. The vendor emails an invitation link to student. Students access the vendor's website via the link and follow instructions to request the criminal background check. Students should initiate the background check process via the e-mailed link within two weeks of receipt. Students authorize release of criminal background check information during this process.

With the student authorized release of information, the vendor provides a copy of criminal background check results directly to the DPT DCE or DCE Assistant. Any irregular finding from a student background check will be discussed with the student to allow the student to explain the results. The authorized individual representing the DPT program, either the DPT Program Director or DPT DCE, may consult legal counsel to discuss the findings of the background check. Certain findings in a background check could preclude participation in clinical education at certain training facilities and may also preclude licensure as a physical therapist in the state of South Carolina. If

it is likely that a student may pose a threat to the welfare of patients or that a student will be unable to complete the clinical education portion of the curriculum, the student may be denied continuance in the USC DPT Program.

Positive results on criminal background checks will be discussed with facility personnel as required by individual facility policies to determine if the nature of the offense will preclude the assigned student's participation in the clinical education experience.

Additional background checks will only be performed when a student self-reports a violation or when a clinical facility requires a more recent or more extensive background check. If a facility requires more extensive background checks, the student must follow the facility procedure if the student wishes to do a clinical experience in that facility. Prior to any individual clinical experience, each student will complete a form affirming the absence or presence of any criminal convictions since the last background check.

3.4.4 Alcohol and Drug Policy

Students are prohibited from reporting to any clinical education experience while under the influence of alcohol or any substance that may impair the ability to function in a clinical setting. Many facilities require drug screens. If a facility requires a drug screen, the student will submit to the drug screen after consenting to the drug screen process required by the facility. Most of these drug screens are conducted by a vendor approved by the University of South Carolina according to specific instructions provided by the training facility. The process varies considerably, however, and may even be performed directly by the training facility. While on clinical experiences, students are bound by all policies and procedures of the affiliate facility.

Drug Screening is performed only at the request of institutions that clinically educate our students. Results are forwarded to the institution.

In the event that a clinical education site requests a drug screen, the USC DPT Program will follow this procedure:

a) A private company approved by the University of South Carolina to perform drug screens will perform these screens.
b) The student has the responsibility to initiate the procedures to obtain the drug screen.
c) The drug screen will usually be a urine screen, but the type of screen that is performed will be individualized to the clinical site's request.
d) With the student authorized release of information, the drug screen vendor will provide a report directly to the DPT DCE or DCE Assistant.

Information from the drug screen may be used to advise the student regarding their continuance status in the USC DPT program, but only after consultation with the student and University officials.

Process for Drug Screens:
USC DPT program will notify a student of drug screens that are required by their clinical site prior to the clinical education experience in the affiliated health care facility. The office of the DPT DCE will initiate a drug screen request through the drug screen vendor. The clinical education team will notify students that the background check process has been initiated. The vendor will email an invitation link to student. Students access the vendor's website via the link and follow the instructions to request the drug screen. Students authorize release of drug screen results during this process.

The student completes the drug screen at an approved site. If the student does not complete the drug screen, the student will not be allowed to participate in the clinical experience as drug screens are only requested when the site requires a drug screen. With the student authorized release of information, the vendor provides a copy of the results directly to the DPT DCE or DCE Assistant. Any irregular finding from a student drug screen will be discussed with the student to allow the student to explain the results. The authorized individual representing the DPT program, either the DPT Program Director or DPT DCE will consult legal counsel to discuss the findings of the drug screen. Certain findings in a drug screen could preclude participation in clinical education at certain training facilities and may also preclude licensure as a physical therapist in the state of South Carolina. If it is likely that a student may pose a threat to the welfare of patients or that a student will be unable to complete the clinical education portion of the curriculum, the student may be denied continuance in the USC DPT Program.

Positive results on drug screens will be discussed with personnel at the clinical education facility, if allowed by the facility's policy, to determine if the nature of the positive screen will preclude the student's participation in the assigned clinical education experience. If a student has a positive result on a drug screen that is related to a prescribed medication, the student will need to provide prescription documentation to the third party vendor in order to reconcile results with university/facility guidelines.

3.4.5 Student Placements for CEEs

Prior to a clinical experience, students will rank order their preferences for available clinical sites. For PHYT 850/851/852, the DCE assigns students to a facility type that matches academic preparation. Greater than 90% of clinical education experiences occur in facilities that have successfully trained USC DPT students in previous years. Most of these placements are in the Carolinas, however students should have no expectation of completing any given CEE in the Columbia, SC region. Most students will complete at **minimum** two of their clinical experiences outside of the Columbia, SC region, as the number of placements in Columbia, SC that meet the needs for any specific clinical experience are limited.

All clinical placements are ultimately finalized at the DCE's discretion based on student preferences, student standing within the program, and faculty feedback on students' demonstration of professional behaviors and success during previous didactic/clinical experiences. Additionally, students who do not meet deadlines of the DPT Clinical Education Program, will be given last priority in the assignment of their clinical education site.

The DCE will work with students to plan and secure a final, full-time terminal clinical education experience that aligns with students' individual interests and goals as it related to specific areas of practice or geographic locations. The DCE welcomes requests for out-of-state sites for terminal full-time clinical education experiences, but these requests should be made no later than February of the year preceding the final clinical education experience. The DCE will assign a final clinical after May 1 of the year preceding the final clinical if the student has not contacted the DCE with their site preference. As with all placements, a contract must be in place with the final site. If the contract is not successfully negotiated, the student will be placed at another clinical site.

Clinical placements are a privilege granted by partnering facilities. Clinical partners are under no obligation to ever grant the USC DPT program or USC DPT students a CEE placement and they have the right to rescind that placement at any point in the process for any reason, including (but not limited to), unavailability of qualified clinical instructor, concerns over actual or potential unprofessional or unsafe student behaviors during a clinical experience, or inability to meet accommodations requested by students.

3.4.5.1 Special Circumstances

Students on academic probation due to unsuccessful completion of a clinical education experience will be required to remain within an approximate 2-hour travel radius of Columbia, SC for any scheduled repeat of that specific clinical education experience in order to allow for efficient and timely visits by the DCE or other program faculty as needed. Students on probation due to professional responsibility violations will be required to complete clinical education experiences within an approximate 2-hour travel radius of Columbia, SC in order to allow for efficient and timely site visits by the DCE or other program faculty, as needed. For students on academic or professional probation, specific site placements will be granted at the discretion of the DCE.

3.4.5.2 Clinical Hold Policy

Students who have not completed health screens and immunizations, mandatory training, other required documentation, attended meetings for clinical education, or any other clinical education requirement will be placed on clinical hold at the discretion of the DCE. This means the student will not be allowed to attend their clinical education experience until they have updated their required immunizations, required health training, tuberculosis skin testing, CPR training, and other required documentation as outlined in student responsibilities. Additionally, students who are on clinical hold will be given last priority when assigning clinical sites.

3.4.6 Travel/Living Costs

The student is expected to arrange travel and housing accommodations for each clinical education experience. Costs are the responsibility of the student. A few facilities provide housing free of charge. Low cost or free housing is sometimes available through Area Health Education Consortiums (AHEC) in different regions of each state.

3.4.7 Work Schedule/Attendance/Tardiness/Holidays

Student schedules during clinical education experiences will be as directed by the clinical instructor. Minimum hour requirements for specific clinical experiences are as directed by the specific course syllabus.

The student must be present for work daily; missed work time must be made up according to a plan acceptable to the clinical instructor and the DCE. The DCE should be notified by the student for all absences/tardiness for clinical experiences via email within 24 hours detailing the circumstances surrounding the absence/tardy. Absences exceeding 5% of the clinical education experience should be made up (i.e., absences exceeding 2 days for an 8 week CEE and absences exceeding 3 days for a 12-week CEE). Students should provide a detailed log of missed time or changes in the student's schedule in Exxat in the Learning Activities section (i.e., Time Off).

In special circumstance at the discretion of the DCE/ADCE and in communication with the CI, excused absences might be made up through a special project or assignment. This alternative should be considered a privilege and not a right by the student and is dependent on the student meeting all benchmarks set for that specific CEE.

A personal day off for special events (e.g., weddings and graduations) may be arranged with the SCCE and CI. The plan for this day off and the plan to make up the time should be communicated to the DCE/ADCE in an email. Vacations will not be approved. The DCE will work with students, CIs, and/or the SCCE to establish an acceptable plan for excused absences, including but not limited to family emergencies/deaths, military obligations, etc. In the case of illness, the facility may require a medical release to return to work.

Timeliness is expected for all clinical activities. Any delay in arriving to work should be reported to the clinical instructor prior to the beginning of the workday.

Student holidays are taken according to the facility's custom and not the University's calendar.

3.4.8 Appearance & Professional Conduct

The student will follow the dress code of the facility. **Nametags are required to be worn daily and include the student's name and identification as a student physical therapist from the University of South Carolina. These nametags comply with the Lewis Blackmon Act of South Carolina. http://www.scstatehouse.gov/sess116_2005-2006/bills/3832.htm** and

http://www.lewisblackman.net. A facility specific nametag/badge is also acceptable; however, this should also include identification as a student physical therapist.

Professional appearance includes being neat, clean, and professional for the current setting. **Dress or grooming that does not conform to the facility standard may result in the SCCE and the DCE removing the student from the clinical education experience.**

Students should introduce themselves as a student physical therapist, obtain patient consent to provide physical therapy care and state the patient's right to refuse student care to each patient.

Professional, legal, and ethical behavior is always expected during the clinical education experience. Inappropriate behavior may result in the CI, SCCE and the DCE removing the student from the clinical education experience.

3.5 Clinical Education Experiences

	Summer Year 1	Summer Year 2	Spring Year 3	Summer Year 3
Environment	Outpatient / ortho	Inpatient	Neuro/Rehab	Capstone
Experience Length	Moderate (8 weeks)	Moderate (8 weeks)	Long (12 weeks)	Long (12 weeks)
Number of Patients	Low	Progress from Low to Moderate	Slightly below full	Full patient load
Patient Complexity	Low	Low to Moderate	Low to High	Average to High
Supervision Level	High	High to Moderate	Moderate	Low

3.5.1 PHYT 850 – Clinical Education Experience I

This is the initial clinical education experience in the physical therapy curriculum and occurs in an outpatient/ambulatory setting, typically with an orthopedic focus.

Emphasis is on the development of the skills and behaviors outlined in the Clinical Internship Evaluation Tool and the APTA PT Guide to Practice. These skills and behaviors include ***Professional Behaviors*** of safety, professional ethics, initiative, and communication skills, as well as ***Patient Management*** components which include examination, evaluation, diagnosis/prognosis, and interventions. The ultimate goal of all the clinical experiences is to

develop an "entry-level performance" student PT at the end of the clinical training sequence. This course is the first of four clinical experiences and encompasses weeks 1-8 of the 40 week clinical training sequence of the USC DPT program.

This experience focuses on the initial development of patient examination, diagnosis, and prognosis, intervention, and outcome assessment skills in the management of the orthopedic patient. A high level of supervision and instruction is expected from the CI. The student is expected to progress beyond the level of a novice student physical therapy practitioner and should progress from a level of maximal assistance at the beginning of the clinical to moderate assistance at the end of the clinical. By the end of the clinical, the student should be managing patients with a familiar presentation, practicing at the level of a competent clinician for all components of *Patient Management* and capable of sharing a partial caseload. Students may still require supervision to manage patients with a complex presentation and may be below the level of a competent clinician in the current clinical setting for these patients. Students are expected to demonstrate and maintain the above *Professional Behaviors* most of the time throughout this clinical education experience.

3.5.2 PHYT 851 – Clinical Education Experience II

This is the second clinical education experience in the physical therapy curriculum. This clinical education experience should occur in an acute care or other inpatient setting.

Emphasis is on the development of the skills and behaviors outlined in the Clinical Internship Evaluation Tool and the APTA PT Guide to Practice. These skills and behaviors include ***Professional Behaviors*** of safety, professional ethics, initiative, and communication skills, as well as ***Patient Management*** components which include examination, evaluation, diagnosis/prognosis, and interventions. The ultimate goal of all the clinical experiences is to develop an "entry-level performance" student PT at the end of the clinical training sequence. This course is the second of four clinical experiences and encompasses weeks 9-16 of the 40 week clinical training sequence of the USC DPT program.

For this PHYT 851 clinical experience, a high to moderate level of supervision and instruction is expected from the clinical instructor. The student is expected to make a moderate number of errors early in the clinical and the patient load is expected to be progress from low to moderate. The student is expected to require high to moderate assistance at the beginning of the clinical in regard to patient management activities. By the end of the clinical, the student should be independently managing patients with a familiar presentation, practicing at the level of a competent clinician for all components of *Patient Management*, and capable of sharing a partial caseload of at least 50% of that of a typical new grad. Students may still require supervision to manage patients with a complex presentation and may be below the level of a competent clinician in the current clinical setting for these patients. Students are expected to demonstrate and maintain the above *Professional Behaviors* most of the time throughout this clinical education experience.

3.5.3 PHYT 852 – Clinical Education Experience III

This is the third clinical education experience in the physical therapy curriculum. This clinical education experience should occur in a either a rehabilitation setting or a setting with a case mix that provides the student with ample opportunity to manage neurological patients.

Emphasis is on the development of the skills and behaviors outlined in the Clinical Internship Evaluation Tool and the APTA PT Guide to Practice. These skills and behaviors include *Professional Behaviors* of safety, professional ethics, initiative, and communication skills, as well as *Patient Management* components which include examination, evaluation, diagnosis/prognosis, and interventions. The ultimate goal of all the clinical experiences is to develop an "entry-level performance" student PT at the end of the clinical training sequence. This course is the third of four clinical experiences and encompasses weeks 17-28 of the 40 week clinical training sequence of the USC DPT program.

For this PHYT 852 clinical experience, a moderate level of supervision and instruction is expected from the clinical instructor. The student is expected to make a moderate number of errors early in the clinical and the patient load is expected to be moderate. The student is expected to require moderate assistance at the beginning of the clinical in regard to patient management activities. By the end of the clinical, the student should be independently managing patients with a familiar presentation, practicing at the level of a competent clinician for all components of *Patient Management*, capable of sharing a partial caseload of at least 75% of that of a typical new grad. Students may still require supervision to manage patients with a complex presentation and may be below the level of a competent clinician in the current clinical setting for these patients. Students are expected to demonstrate and maintain the above *Professional Behaviors* at all times throughout this clinical education experience.

3.5.4 PHYT 853 – Clinical Education Experience IV

This is the fourth clinical education experience in the physical therapy curriculum. This clinical education experience is the final full time clinical.

Emphasis is on the development of the skills and behaviors outlined in the Clinical Internship Evaluation Tool and the APTA PT Guide to Practice. These skills and behaviors include *Professional Behaviors* of safety, professional ethics, initiative, and communication skills, as well as *Patient Management* components which include examination, evaluation, diagnosis/prognosis, and interventions. The ultimate goal of all the clinical experiences is to develop an "entry-level performance" student PT at the end of the clinical training sequence. This course is the last of four clinical experiences and encompasses weeks 29-40 of the 40 week clinical training sequence of the USC DPT program.

For this PHYT 853 clinical experience, a relatively low level of supervision and instruction is expected from the clinical instructor. The student is expected to make a moderate to low number of errors early in the clinical and the patient load is expected to be moderate to high. The student

is expected to require moderate to minimal assistance at the beginning of the clinical in regard to patient management activities. By the end of the clinical, the student should be independently managing patients with a familiar presentation, practicing at the level of a competent clinician for all components of *Patient Management*, capable of carrying a caseload equal to that of a typical new grad. Students may still require supervision to manage patients with a complex presentation and may be below the level of a competent clinician in the current clinical setting for these patients. Students are expected to demonstrate and maintain the above *Professional Behaviors* at all times throughout this clinical education experience.

3.5.5 Optional Clinical Education Experiences

Students may request an optional clinical experience. These experiences may be performed for variable amounts of time (e.g., fourteen half days during a semester or four 40-hour weeks between the third and fourth clinical experiences). This course will be taken as an independent study and grading of this clinical will be a letter grade based on achieving mutually agreed upon objectives between the student, the DCE, and the Clinical Instructor. These objectives will be established in an independent study contract. The intent of this optional clinical is to increase levels of confidence and skill in specific areas of clinical practice.

An overload form will be required to enroll in this course and the course will generally be equivalent to 1 credit hour. In semesters where total credit hours exceed 16 hours, the University may charge an additional fee. The immunization, and training and requirements to participate in an optional clinical experience are the same as the requirements to participate in any clinical education experience, but the *Student Clinical Information* form and *Generic Abilities* assessment are not required. Optional clinical experiences are a privilege granted by the DCE and the host site.

3.5.6 Repeat or Extension of a Clinical Education Course

If successful completion of a clinical is not attained during the normal time frame of the clinical, the student will be assigned a "C", "D" or "F" grade for the clinical performance. In certain cases of hardship, such as family death, maternity, paternity, illness, etc. an incomplete (I) may be assigned for the clinical. The "I" may also be assigned in "limited" cases, at the discretion of the DCE if the student is minimally below the passing mark on a minimal number of *Clinical Internship Evaluation Tool (CIET)* criteria and/or the clinical site did not provide an adequate number of opportunities to pass specific criteria.

The student will assume responsibility for formulating objectives for any extended or repeat clinical experience; these objectives must be approved by the DCE. A letter grade will be assigned at the end of the extended or repeat clinical based upon achievement of these objectives. All students completing a repeat clinical education experience will be subject to a Clinical Education Learning Agreement (see Section 3.5.1.2 *Early Identification of Deficient Academic Performance* in USC DPT Policy and Procedures Manual), outlining expectations from several key reference documents including, but not limited to, USC DPT Program Policies and

Procedures, Clinical Education Manual, course syllabus or other requirements, and the USC DPT Essential Functional Document. This document will serve to ensure students are aware of all program and course requirements/expectations and may include additional requirements or plans of action to help facilitate remediation prior to a course repeat. Repeat clinical education experiences Clinical Education Learning Agreements and/or successful completion of a clinical education experience.

Students must successfully complete all clinical experiences. Failure to complete a clinical experience may result in delayed graduation and restrictions placed on academic progression. Students. **Students can only repeat one clinical experience**.

3.6 Clinical Education Learning Activities

Course syllabi for each clinical education experience outline course requirements and required documentation for each learning experiences. Forms and other documentation can be found and submitted via Exxat under Learning Activities.

3.6.1 Patient Logs

Student will complete Patient Log summaries under Learning Activities in Exxat for two patients each week. Students are encouraged to log patient experiences that are unique and should provide enough information that they could expand on the patient experience if asked about it later, while complying with HIPAA requirements.

3.6.2 Clinical Education Projects and In-Services

Each clinical education experience has an associated evidenced-based project that should be completed by midterm. Details for the project associated with each clinical experience can be found in the course syllabi. While these projects should be student-driven, insight and feedback from the CI is encouraged and appropriate.

Students are required to give an in-service for the PHYT 851, 852, and 853 clinical education experiences, or as clinical facilities require them. The type, time, and length of the in-service should be coordinated with the clinical instructor. Each clinical education experience also has a specific project associated with the experience that must be completed. Specifics for these projects are outlined in the course syllabus and under Learning Activities in Exxat.

3.6.3 Interprofessional Collaboration

Healthcare often utilizes a team approach. Students will demonstrate intra- and inter-professional collaboration in the management of the whole patient through written and verbal communication with all members of the healthcare team, including the patient. For example, inpatient environments require regular communication with nursing to check medical status and to communicate finding of physical therapy screens and evaluations. Communication with physicians, physician extenders, therapy

personnel, case managers, prosthetists/orthotists and many others is expected. Students must complete the interprofessional collaboration log at the end of each clinical. This form can be found under Learning Activities in Exxat.

3.7 Student Assessment & Evaluation

Prior to each clinical education experience, students are expected to self-evaluate their performance in affective, cognitive, and psychomotor domains by completing the following:

- Student Clinical Information Form
- Professional Abilities Assessment

In the first days of each CEE, student and clinical instructor should review the student's self-assessed strengths and weaknesses, learning objectives and goals, plan for achieving goals, and other items on the Student Clinical Information Form.

The Professional Abilities Assessment form may also be referenced and utilized again in the event of demonstration of unprofessional or unfavorable behaviors by the student during the CEE. Students who demonstrate unprofessional or unfavorable behaviors during a CEE may be subject to the creation of a Clinical Education Learning Agreement (see Section 3.5.1.2 *Early Identification of Deficient Academic Performance* in USC DPT Policy and Procedures Manual), outlining expectations from several key reference documents including, but not limited to, USC DPT Program Policies and Procedures, Clinical Education Manual, course syllabus or other requirements, and the USC DPT Essential Functional Document. This document will serve to ensure students are aware of all program and course requirements/expectations and may include additional requirements or plans of action to help facilitate remediation and/or successful completion of a clinical education experience.

3.7.1 Student/CI Constructive Feedback Form

The DCE will monitor student progress throughout the clinical education experience via the Student/CI Feedback form. Student will weekly complete the Clinical Instructor/Student Constructive Feedback form and upload it to Exxat weekly, to include facilitated feedback for the student and CI and a specific, measurable objective for the following week. This objective should be student-driven based on feedback and input from the CI.

Students should submit 11 total Weekly Constructive Feedback forms for this clinical (final week not necessary). A form should be completed approximately once per week, no later than the following Monday of any given week. See Exxat for recommended submission dates. Do not wait and submit your forms all at once.

3.7.2 Clinical Internship Evaluation Tool (CIET):

The Clinical Internship Evaluation Tool (CIET) will be used to evaluate student performance. Instructions for rating performance are included in the required PT CPI training. The evaluation process should give the student knowledge of where they need to target their skill development. The USC DPT program's objectives and grading criteria are included in the course syllabus. **Students are expected to prepare for midterm and final evaluations by self-rating their performance prior to these evaluative meetings with the clinical instructor.**

The CIET was developed by the University of Pittsburgh's Department of Physical Therapy. The CIET has been established as a validated assessment tool for PT students during clinical education experiences and has been in use since 1998. The CIET was developed, it was recognized that in the present-day health care environment, graduates of an entry-level physical therapy program must be ready to "hit the ground running" by being able to skillfully manage patients in an efficient manner while achieving effective outcomes. For this tool to be an effective and reliable measure, students must be rated against the standard of a ***competent clinician*** who meets the above criteria.

A competent clinician is defined within the CIET as one who successfully manages patients in an efficient manner to achieve effective outcomes and has the capability of managing a full caseload of a new graduate. Note, this is definition applies to the specific setting within which a clinical education experience occurs.

This assessment is composed of two sections. The first section, *Professional Behaviors*, evaluates Safety, Professional Ethics, Initiative, and Communication Skills in the clinic. Safety behaviors address whether the student is following all health and safety precautions required at the current facility along with taking any other measures needed to maintain the patient's safety and as well as their own. Professional Ethics addresses the student's knowledge of, and compliance with, all rules, regulations, ethical standards, legal standards, and their professional appearance and conduct in the clinic during all interactions. Initiative addresses the student's ability to maximize all opportunities for learning during their clinical affiliation, begin to problem solve independently, seek out, accept, and implement constructive criticism, and develop teamwork and flexibility in the clinical setting. Communication Skills looks at both their ability to verbally communicate with patients, families, and other healthcare professionals along with their written skills with documentation, home programs, and other required paperwork.

Professional Behaviors (Categories: Safety, Professional Ethics, Inititation, Communication)		
Rating	**Definition**	**USC DPT Expectations**
Never	0%	
Rarely	25% (frequent cues needed)	
Sometimes	50% (intermittent cues needed)	
Most of the time	75% (occasional cues needed)	Expected for Clinical Education Experiences I (PHYT 850) and II (PHYT 851), progressing toward always
Always	100%	Expected for Clinical Education Experiences III (PHYT 852) and IV (PHYT 853)
Not observed	Some Communication opportunities may not be observed in all clinical experiences	

The second section, *Patient Management* evaluates the student's ability to efficiently manage a patient with an effective outcome. It is divided into four sections, Examination, Evaluation, Diagnosis/Prognosis, and Intervention. These elements of patient management are defined in the *APTA Guide to Physical Therapist Practice*. The examination includes all aspects of gathering data from the patient including obtaining a history, a systems review, and performing tests and measures. The evaluation is the analysis and synthesis of the data gathered in order to determine a diagnosis and plan of care for the patient. The student should demonstrate the development of critical thinking skills during the evaluation process of patient management, including determining patients' impairments and functional limitations. Diagnosis/Prognosis involves all aspects of developing a plan of care for patients including determining appropriate diagnoses for physical therapy management (not the medical diagnoses), determining the prognosis or outcome for episodes of physical therapy care, determining appropriate frequency and duration of care including criteria for discharge, and determining appropriate treatments. Intervention includes the student's ability to apply treatments, perform patient/family education, monitor patients' response to treatment and adapt accordingly, and recognize when outcomes have been reached. For all areas of patient management, the student should be using the best available evidence in their decision making. When evaluating the student's *Patient Management* skills, please keep in mind that the student should be compared to a 'competent clinician who skillfully manages patients in an efficient manner to achieve an effective outcome'. This form is designed for use with all patient types, and in any clinical setting, thus the student should be evaluated based on your clinic population and the expectation for productivity/efficiency in your specific clinic. In considering the student's scores for their Patient Management skills, please review the operational definitions which are presented as an additional resource.

Patient Management (Categories: Examination, Evaluation, Diagnosis/Prognosis, Intervention)		
Rating*	**Definition**	**USC DPT Expectations**
Well Below	Student requires Guidance from their clinical instructor to complete an item for all patients	Please contact the program if the student is at risk of being rated at this level when approaching final assessment
Below**	Student requires supervision and/or has difficulty with time management while completing the item for all patients. The student could continue to require Guidance for the patient with a more complex presentation while only needing Supervision with the patient with a familiar presentation.	Please contact the program if the student is at risk of being rated at this level when approaching final assessment
At That Level for Familiar Patients	Student is independently managing patients with a familiar presentation; they are at the level of a competent clinician with these patients when performing an item. Students require Supervision to manage patients with a complex presentation and they are below the level of a competent clinician for these patients.	Expected for CEE I (PHYT 850), CEE II (PHYT 851), and CEE III (PHYT 852)
At That Level for All Patients	Student is independently managing both patients with a familiar presentation and patients with a complex presentation. Student can carry an appropriate caseload for your clinic and achieve an effective outcome with patients. The student is at the level of a competent clinician in your setting.	At end of CEE IV (PHYT 853)
Above	Student is performing above the level of a competent clinician in your clinic. Clinical skills are highly effective and demonstrate the most current evidence in practice. The student can carry a higher-than-expected caseload. The student actively seeks out and develops independent learning opportunities. The student serves as a mentor to other students and provides resources to the clinical staff.	

Finally, students will be rated compared to a "Competent Clinician" using a global rating scale from 0 to 10 as it pertains to the percent caseload carried by the student. The bottom of the scale indicates a student *Well Below a Competent Clinician* and the top of the scale represents a student *Above a Competent Clinician*.

Global Rating Scale		
Rating	**Definition**	**USC DPT Expectations**
0-3	Well below expected performance	
4	On-track (caseload: capable of sharing a partial caseload of less than 50%	By the end of CEE I (PHYT 850)
5	On-track (caseload: capable of sharing a partial caseload of at least 50%, less than 75%)	By the end of CEE II (PHYT 851)
6	On-track (caseload: capable of sharing a partial caseload of at least 75%, less than 100%	By the end of CEE III (PHYT 852)
7	Capable of 100% caseload; skillfully manages patients in an efficient manner while achieving effective outcomes, unique to setting and population; practices at the level of a **Competent Clinician**	By the end of CEE IV (PHYT 853)
8-10	Exceptional performance and carrying 100% caseload while also completing tasks beyond that of a new graduant competent clinician	

3.7.2.1 CIET Completion Process

Students must complete the CIET mid-term/final self-evaluation by the end of week before midterm/final, respectively in order for the CI to access CIET student-evaluation link and training in Exxat in midterm/final weeks. For 8-week clinical education experiences students would complete their self-evaluations at the end of weeks 3 and 7; for 12-week clinical education experiences students would complete their self-evaluations at the end of weeks 5 and 11. CIs would then have approximately one week to complete the midterm/final evaluation of students' performances using the CIET via Exxat. The process for this will be as follows:

a) By the end of the week **prior** to midterm/final, the student should complete their self-assessment using the CIET under Learning Activities in Exxat.

   a. 8-week CEE: students complete self-evaluations at the end of weeks 3/7

   b. 12-week CEE: students complete self-evaluations at the end of weeks 5/11

b) Once the student submits their self-assessment it will be accessible for review by the DCE. This submission will also trigger Exxat to send a link via e-mail to the CI to complete the training/quiz if they have not previously done so.

c) Once verification of training by the CI is completed, the CI will be able to access the CIET to complete the midterm/final assessment of the student's performance during the CEE.

Midterm/final evaluations should be completed by the CI by the end of midterm/final weeks, respectively.

a. 8-week CEE: CIs complete student evaluations by the end of weeks 4/8

b. 12-week CEE: CIs complete student evaluations by the end of weeks 6/12

d) Students and CIs should set aside time for formal review of the student self-assessment and CI's evaluation of the student via the CIET at midterm and at the conclusion of the clinical education experience.

3.8 Evaluation of Clinical Sites and Clinical Instructors

Students will evaluate the clinical sites/instructors utilizing the PT Student Evaluation of Site and PT Student Evaluation of Clinical Instruction. Information from these forms may be shared with the facility through the SCCE or CI, therefore students are expected to keep subjective feedback constructive and professional.

Students are encouraged to share pertinent information with their clinical instructor immediately after the student receives their final evaluation for the clinical experience, having an open, constructive discussion with the CI.

Students will also provide the DCE with a brief "Informal Site Recommendation" at the end of each clinical experience.

Each of the above tools can be found in Exxat under Learning Activities (Forms/Evaluations Summary).

3.9 Evaluation of Director of Clinical Education

At the end of the clinical, the students and clinical instructors will evaluate the Director of Clinical Education using the APTA's DCE Performance Assessments tool. This will be an external form send by a third party representative of USC DPT. Information gained from these evaluations will be anonymous to the DCE.

3.10 Evaluation of USC DPT Curriculum

At the end of the clinical, the student and CI will evaluate USC DPT's curriculum using the Clinical Instructor and Student Curriculum Review forms, respectively. This critical evaluation should be based on student readiness and preparation for the preceding clinical education experience in relation to the didactic and clinical preparation received prior to that clinical education experience.

3.11 Problems During a Clinical Education Experience

If the student perceives a clinical problem has occurred during a clinical experience (e.g., supervision, academic preparation), the student should immediately discuss the problem with the CI. If the situation is not improved the student should next notify the SCCE of the facility for

assistance in resolving the problem. If that does not resolve the problem, notify the DCE immediately. Due to the nature of some problems faced by students, it may be appropriate to contact the DCE immediately to discuss alternative strategies for resolving the problem or to arrange an onsite visit or telephone conversation.

If a clinical problem arises from the clinical instructor's perspective, the clinical instructor should immediately discuss the problem with the student. If the situation is not improved, the clinical instructor should next notify the SCCE of the facility for assistance in resolving the problem. If that does not solve the problem, notify the DCE immediately. Due to the nature of some problems faced by clinical instructors, it may be appropriate to contact the DCE immediately to discuss alternative strategies for resolving the problem or to arrange an onsite visit or telephone conversation.

3.12 Withdrawal from a Clinical Education Experience

If a student withdraws from any clinical education experience for a personal/medical reason, documentation of such must be provided to the Director of Clinical Education and the Program Director, including but not limited to the Clinical Education Incident Report form which should include an explanation of the withdrawal. If the student withdraws a clinical education experience or the program on an approved leave of absence, the student will have the opportunity to re-enroll the following academic year in the semester that the student did not successfully complete, or in the case of terminal clinical education experiences in the next available semester during which an appropriate clinical education experience can be secured. In the case of a medical leave of absence/medical withdrawal, the student must provide a letter of medical clearance to the Director of Clinical Education, the Program Director, and the Registrar before re-enrollment. (see Section 3.5.5 *Leave of Absence* in USC DPT Policy and Procedures Manual)

4.0 Emergency

In any personal emergency, the student should take steps to care for the emergent situation and to notify their CI and the DCE as soon as possible. In all medical emergencies the student should get appropriate emergency care. Emergencies occurring during and because of the student's clinical experience are likely covered by the Worker's Compensation Insurance purchased by the program. All students are also required to have health insurance which should assist in non-work injuries.

4.1 Exposure Incidents During CEE

In the case of a blood borne pathogen incident, the USC Exposure Control Plan applies to all USC DPT students during a clinical experience.

1. If stuck with dirty needle or contaminated with human body fluids, immediately and thoroughly wash the area with soap and water or flush the eyes and or mouth with water.
2. Once you have thoroughly washed or flushed the area, get medical care.

a) If in Columbia, SC and you are in a non-hospital setting, report to Student Health between hours of 8AM and 4 PM. Outside of these hours report to the Prisma Health - Richland ED

b) If in Columbia, SC and you are in a hospital setting report to that hospital's Emergency Department.

2. c) If outside of the Columbia, SC area report to the nearest hospital ED.

Also report to Matthew Geary, DCE at 803-777-0478 or 843-514-3798. The DCE will request an email describing the incident.

The care that should be provided will investigate how the exposure occurred provide prophylactic and follow-up care

4.2 Injury During CEE / Workers Compensation

For other work/clinical related injury or incident that requires medical care, students should use best judgement as it related to the best course of action in seeking medical care. This includes (but is not limited to) seeking care from a primary care provider, hospital emergency department, urgent care facility, or emergency medical services.

It is important that if students are injured during the course of a CEE, they immediately report the injury or illness to the DCE/ADCE and CompEndium Services so that medical treatment may be authorized, and a Workers' Compensation claim filed.

To review procedures for work related injuries, see the following link:
https://sc.edu/about/offices_and_divisions/human_resources/docs/wc_procedures.pdf

Steps to take if an injury occurs

1. For non-life-threatening injuries or illnesses, in which medical treatment may be necessary, the DCE/ADCE and injured clinical student together will immediately call CompEndium Services (available 24/7) at 877-709-2667 to report the injury. If the DCE/ADCE is not available, the program director of program administrator may assist the injured clinical student with this process.

   Note: In case of a life-threatening injury or illness, dial 911 or go to the nearest emergency room and contact the DCE/ADCE and CompEndium as soon as possible.

2. CompEndium will assist in processing and scheduling the clinical student's work-related injury for treatment and claims handling with the university's insurance provider.

3. CompEndium will direct the injured clinical student to a medical provider for treatment. They will also issue a treating authorization number to the medical provider, which will authorize treatment of the injured clinical student.

4. The injured clinical student will complete the Employee Injury Report Form (81-B) (https://sc.edu/about/offices_and_divisions/human_resources/docs/hr81b.pdf) and the DCE/ADCE will complete the Supervisor Report of Injury Form (81-C) (https://sc.edu/about/offices_and_divisions/human_resources/docs/hr81c.pdf). These completed forms are required to be faxed to CompEndium at 877-710-2667 and emailed to the Central Benefits Office at workerscomp@mailbox.sc.edu.

5.0 Communication

The student is responsible for monitoring emails sent to their university email address from the clinical education team and third-party entities that may send communications related to clinical education, including (but not limited to) clinical partners, SCCEs, and Castlebranch (i.e., background checks, drug screens). The expectation is for students to monitor their email for these correspondences and generally respond within 24 hours.

5.1 Student Communication with Clinical Sites Prior to Start

The clinical education team will contact clinical facilities approximately 3 months prior to the start of a scheduled clinical education experience to confirm placement offerings. The students should contact the clinical facilities (SCCE or CI) after placements are confirmed with questions regarding dress, grooming, arrival time, parking, working hours, and facility expectations at this time. If the student does not receive necessary information from the facility, they should coordinate efforts to obtain information through the DCE. Much of the information regarding the facility is present in the clinical site's profile in Exxat.

5.2 Communication with DCE/ADCE During a CEE

Communication occurs primarily via forms, email, and telephone. Both the student and CI should complete a W*eek One Contact Sheet* at the end of the first week to indicate if 1) the student is adjusting favorably to the clinical environment and 2) the student and clinical instructor are communicating well. During each week of the clinical education experience the student and CI should complete the *Clinical Instructor / Student Feedback* form to develop student learning objectives and to foster ongoing communication. All completed forms should be uploaded to Exxat.

In the event of student or CI concerns regarding the clinical experience, the student and CI are encouraged to candidly discuss concerns with each other. The DCE should be contacted if the student, clinical instructor and SCCE cannot resolve these concerns or if any party wishes to involve the DCE early in the process. Students are encouraged to reach out to the DCE/ADCE at any time with any concerns regarding their clinical instruction, clinical site, or clinical education experience, however early communication can be key to solving problems or avoiding escalation

of issues. Students are expected to remain professional in all communications with all stakeholders as issues are resolved

The DCE will visit the site as necessary to assist the SCCE, CI, and student in resolving clinical education problems.

5.3 Requests for Accommodations

Reasonable accommodations are available for students with a documented disability. All accommodations must be approved through the Office of Student Disability Services. If you have a disability and may need accommodations to fully participate in this class, contact the Student Disability Resource Center: 777-6142, TDD 777-6744, email sadrc@mailbox.sc.edu, or see the following link:

https://sc.edu/about/offices_and_divisions/student_disability_resource_center/register_with_us/index.php

5.4 Reporting of Inappropriate or Unprofessional Behaviors

Concerns regarding unethical or unprofessional behavior can be reported via the USC DPT Individual Referral Form.

Stakeholders may use USC DPT's Individual Referral Form to bring to the attention of the Program Director any behaviors by a faculty (including clinical faculty), staff member, or student that are inappropriate or unprofessional. (If you have a concern regarding the Program Director, please contact the Chairperson of the Department of Exercise Science 803-777-7680). This referral may be made anonymously or when possible, the individual completing the form should identify themselves so that action taken may be reported.

https://redcap.research.sc.edu/surveys/?s=PY4HJ4MLTYNNCCLX

5.5 Reporting Discrimination, Harassment, Sexual Misconduct, and/or Related Retaliation

The University of South Carolina is committed to providing an environment free from discrimination, harassment, and sexual misconduct, and related retaliation. This commitment helps realize the university's primary mission and aligns with institutional values.

To review the full policy on Discrimination, Harassment, and Sexual Misconduct see the following link:

https://sc.edu/policies/ppm/cr100.pdf

If you or someone you know has been the victim/survivor of discrimination, harassment, or sexual misconduct at the University of South Carolina, you can report it to the Office of Civil Rights and

Title IX. Please know this is not a complaint and does not automatically initiate an investigation or notify the alleged person but can connect those impacted with staff to discuss options. To report to USC's Office of Civil Rights and Title IX see the following link:

https://cm.maxient.com/reporting.php?UnivofSouthCarolina