

# CLINICAL EDUCATION PROGRAM POLICIES

The clinical education component of the Doctor of Physical Therapy Program is the key integrative aspect for physical therapy practice! This is an exciting opportunity to seek learning in a variety of practice settings. Students need both accumulated hours as well as those hours spread over time in order to integrate coursework into clinical practice and to achieve a breadth and depth of applied knowledge. *Take advantage of these opportunities to learn as much as you can!*

## **NONDISCRIMINATION:**

The University of Utah is fully committed to affirmative action and to the principle of nondiscrimination and equal opportunity in all programs, activities, and employment practices and decisions are made without discrimination, harassment or prejudicial treatment because of race/ethnicity, color, religion, national origin, sex, sexual orientation, gender identity/expression, age, disability, or protected veteran's status. The University seeks to provide equal access to its programs, services and activities for people with disabilities. Reasonable prior notice is needed to arrange accommodations. Evidence of practices not consistent with these policies should be reported to the Office of Equal Opportunity and Affirmative Action, (801) 581-8365 (V/TDD). Upon request, this information is available in alternative formats, such as cassette, Braille, or large print.

## **EQUAL OPPORTUNITY FOR INDIVIDUALS WITH DISABILITIES:**

The University of Utah seeks to provide equal access to its programs, services and activities for people with disabilities. If you will need accommodations in the class, reasonable prior notice needs to be given to the Center for Disability Services, 162 Olpin Union Building, 581-5020 (V/TDD). CDS will work with you and the instructor to make arrangements for accommodations. All information in this course can be made available in alternative format with prior notification to the [Center for Disability Services](http://disability.utah.edu) (<http://disability.utah.edu>).

## **CLINICAL EXPERIENCES (PART-TIME):**

Students have the opportunity to complete 1 or more part-time clinical experiences. Each experience is 1CR and an accumulation of a minimum of 45 direct contact hours across the semester. The first experience is required as part of the students' first fall semester; all subsequent experiences are optional.

The purposes of the first (required) part time clinical experience are to begin acculturation into the profession of PT, practice and integrate knowledge, skills, and professional behaviors learned in the academic setting into the clinical setting, broaden clinical exposure, prepare for full-time clinical internships the following summer, and provide the student the opportunity to develop an appreciation for clinical experiences and for the instructors who provide learning opportunities. During the first part time experience, students typically spend one half day per week (4 hours) for 11-14 weeks during a semester. While the number of hours of experience is critical, students need both the accumulation of hours as well as these hours spread over time in order to integrate coursework into clinical practice and to achieve a breadth and depth of applied knowledge. Therefore students are discouraged from completing all clinical hours over the course of 1 full time week (e.g. over Fall break period)

The purposes of subsequent optional part-time clinical experiences are to broaden the student's clinical exposure and prepare students for options of full-time internships during subsequent terms, provide the student the opportunity to practice and integrate knowledge, skills and professional behaviors learned in the academic setting into the clinical setting, provide the DPT students with exposure to advanced or specialized areas of physical therapy practice within the program, and/or, provide the student the opportunity to develop an appreciation for clinical experiences and for the instructors who provide advanced learning opportunities. Depending on the purpose of each experience, students may spread their over the course of the semester (e.g., integrating & practicing skills learned in the classroom), or chunk hours into a confined period of time (e.g., during Spring or Fall break to gain exposure to different practice setting), or a combination of the two.

Student Responsibilities: Learn and review, as necessary, classroom and laboratory material; apply classroom material and laboratory practice in the clinic; identify questions and needs as they occur in the clinic; meet objectives for professional conduct (Professionalism Core Values & Professional Behaviors); meet course requirements; meet departmental policies and procedures; independently assess his/her own performance; assess the clinical education experience; and, provide feedback to the clinical instructor.

Clinical Instructor Responsibilities: Plan experiences for the student based on the school's and student's objectives; demonstrate effective use of skills identified as objectives for the student as well as facilitate these same skills in the student; assess student

performance and provide feedback to the student on an ongoing basis and complete a midterm and final assessment of the student's professional behaviors (if requested by the program); contact the school if he/she has any issues or concerns at any time regarding student performance

## **FULL-TIME CLINICAL INTERNSHIPS:**

Students are expected to complete their clinical internships according to the Department schedule. The standard University schedule is modified in order to accommodate the clinical internships. Remedial or repeated internships may be scheduled outside published internship dates. Due to the number of students out on clinical internships during the summer and the availability of clinical sites, summer internship dates may be flexed to accommodate a clinical site. These cases will be arranged as needed and in collaboration with the student. General dates are as follows:

|           |   |
|-----------|---|
| PHTH 7810 | 10-week internship scheduled to begin 2-3 weeks following the start of PHTH 7840                      |
| PHTH 7840 | 10-week internship scheduled to begin on the Monday following completion of Spring semester.          |
| PHTH 7860 | 8-week internship scheduled to begin on the Monday following the New Year holiday.                    |
| PHTH 7880 | 8-week internship scheduled to begin on the Monday immediately following the completion of PHTH 7860. |

***UNDER NO CIRCUMSTANCES should a student or family member contact a clinical site with the intent to explore the possibilities of completing an internship at that site! If this occurs, the student will lose the opportunity to complete the internship at that site! The DCE or Assistant to the DCE handles all communication with sites.***

## **INTERNSHIP SETTING REQUIREMENTS:**

Students complete a total of 36 weeks of full-time clinical internships under the mentorship of an experienced clinician. Internships are coordinated with the DCE while taking student desire, student need for a particular experience, and availability of clinical sites into account. Since students are being prepared as a "general practitioner of physical therapy," each must fulfill a fulltime internship requirement within each of the following clinical settings:

- inpatient acute care (or other setting with at least a 50% inpatient acute care component),
- outpatient orthopedic or general ambulatory care practice,
- neurological rehabilitation (may be pediatric or adult; inpatient or outpatient), and
- geriatrics\* or optional\* based on student preference and learning needs.  
\*an optional site can only be chosen **if** the student can account for significant geriatric experiences within other previous or planned internships.

## **ACADEMIC GOOD STANDING:**

All students must be in good academic standing within the physical therapy program, successfully completing all prior coursework and clinical experiences/internships.

## **OUT OF STATE INTERNSHIPS:**

Students are encouraged to complete at least one of their internships outside the State of Utah. Due to the number of students completing internships and availability of some clinical specialty sites, there may not be enough in-state sites to fulfill a student's needs. In these cases, students would then be placed in an internship outside the State of Utah.

## **ESTABLISHING NEW CLINICAL SITES:**

Students are often interested in setting up new clinical sites in areas where they have family and housing would be affordable. The decision to establish a formal relationship with a clinical facility is carefully considered based on the following:

- The desire of the clinical staff at the facility to have students
- The belief the student will participate in a high quality experience
- The type(s) of learning experiences available to students
- The likelihood the facility will be utilized on a regular basis for future UUPT students
- The internship needs of the Program
- The cost to the Program to maintain the site

New clinical sites are established ***ONLY WHEN:***

- The DCE sees a need for additional sites in a specific area of practice
- The site offers unique opportunities not available at already contracted sites
- The current sites are unable to offer student placement due to changes in staffing patterns limiting the number of students, or for other reasons affecting the clinical education at the site

***UNDER NO CIRCUMSTANCES should a student or family member contact a potential new clinical site with the intent to explore the possibilities of completing an internship or experience at that site! If this occurs, the student will lose the opportunity to complete the experience or internship at that site! The DCE or Assistant to the DCE handles all communication with sites regarding any clinical placement.***

### **INTERNSHIPS AT SITES PROVIDING FINANCIAL INCENTIVES:**

A student will NOT be placed at a clinical site funding a portion or all of the student's education in the Program and/or has hired the student to begin employment upon completion of the physical therapy Program. The funding and/or employment presents a conflict of interest for all parties involved and also presents a bias towards evaluating student performance. A student is REQUIRED to disclose to the Program any such arrangements made with clinical sites and/or employers. This policy will not prohibit students from accepting offers of employment at facilities where they are currently completing an internship or have previously completed an internship.

### **INTERNSHIPS AT FORMER EMPLOYMENT SITES:**

A student will NOT be placed at a clinical site where the student has worked or volunteered (more than 40 hours) in the physical therapy department within the last 3 years. A student will also NOT be placed at a facility where the student has been, or is currently being treated as, a patient in the physical therapy department. The Program believes it may be more difficult for a student to establish themselves as a student professional in these settings since former colleagues and therapists may continue to interact with the student within previously established roles and may present a bias toward evaluating the student's performance.

### **RETURNING TO A PREVIOUS INTERNSHIP / EXPERIENCE FACILITY:**

Students may not return to complete an internship at a facility where s/he has previously completed a full time internship. Students may however complete more than one internship within the same larger medical center system when each internship is completed within a different department or specialty setting (acute care, inpatient rehabilitation, burn center, cancer center, pain center, etc.). Students may return to complete an internship at a facility where s/he has previously completed a part time clinical experience only if it is in the student's best educational interest.

### **CONTRACT OR CLINICAL TRAINING AGREEMENTS WITH INTERNSHIP FACILITIES:**

A written legal agreement/contract MUST be in effect with signatures from both the University of Utah and the clinical facility prior to placing a student in a site for an internship. The University has a standard agreement but will also review specific agreements preferred by some facilities. Students may locate copies of the agreements with clinical sites in the *PT Clinical Education Information* online site. Students are required to read the established agreement prior to their clinical internship to familiarize themselves with any specific site requirements. A copy of the standard University of Utah clinical training agreement can be found on Canvas.

### **EXPENSES for Clinical Education:**

The unique nature of clinical education does require students to allocate additional funds beyond tuition and fees to cover this requirement within the curriculum. Examples of additional costs may include, but are not limited to, parking, travel, relocation and/or housing expenses (for out of area internships).

### **REGISTRATION AND TUITION:**

The student MUST register for all clinical experiences and internships. The student is responsible to acquire all necessary information and register prior to all University deadlines. Students should pay close attention to the University calendar and deadlines, as the standard University schedule is modified in order to accommodate the clinical internships. Registration is

required in order to maintain a full time student status for the purposes of professional liability insurance and for financial aid. Until registered, the student will not be able to participate in either student internships or part time experiences.

| CLINICAL EXPERIENCES (PART TIME)  |                         |              |             |
|-----------------------------------|-------------------------|--------------|-------------|
| Course                            | Course Title            | Credit Hours | Course Fees |
| PHTH 6800 <i>Required</i>         | Clinical Experience I   | 1            | \$10        |
| PHTH 6820 <i>Optional</i>         | Clinical Experience II  | 1            | \$10        |
| PHTH 6830 <i>Optional</i>         | Clinical Experience III | 1            | \$10        |
| PHTH 6850 <i>Optional</i>         | Clinical Experience IV  | 1            | \$10        |
| PHTH 7960 <i>Optional</i>         | Independent Study       | 1-5          | \$10        |
| CLINICAL INTERNSHIPS (FULL TIME)* |                         |              |             |
| Course                            | Course Title            | Credit Hours | Course Fees |
| PHTH 7810                         | Clinical Internship I   | 9            | \$150       |
| PHTH 7840                         | Clinical Internship II  | 9            | \$150       |
| PHTH 7860                         | Clinical Internship III | 6            | \$150       |
| PHTH 7880                         | Clinical Internship IV  | 6            | \$0         |

\*Please NOTE: Differential tuition is applied to Fall & Spring Semester Clinical Internships or Experiences (not Summer)

## RELOCATION:

Students should anticipate in some cases internships might require geographical separation from family, significant others, friends, and pets. Please be aware this may happen during holidays, or other significant events in a student's life.

## CANCELLING AN INTERNSHIP:

*An internship will not be changed once it is confirmed with a clinical site!* If significant extenuating circumstances arise, the student may have the option to cancel the internship. Extenuating circumstances may include student illness or injury, family issues impacting the student's ability to participate, an alteration in the student's ability to progress within the program, or a problem at the clinical site (identified by the CCCE or DCE). **Cancelling an internship would result in the student completing the internship at a later time in the curriculum – typically following the final internship and therefore delaying graduation.** Students should discuss the situation with the DCE as soon as possible if they feel a need to cancel or change an internship due to extenuating circumstances. Under no circumstances should a student directly contact a clinical site to negotiate a change or cancel a planned clinical internship.

**CAUTION:** A student should wait to plan significant life events (e.g., weddings, baby, family reunions/vacations) until internship dates have been confirmed with the site. That being said, the risk always exists that a site may cancel or change the internship at the last minute resulting in rescheduling the internship at an alternate time.

If the CCCE identifies a problem (lack of staff, closing of the clinic, change in management, need for a new contract, etc.) requiring a change or cancellation of an internship, it is the responsibility of the CCCE to inform the DCE as soon as possible. When an internship is cancelled, the DCE will plan alternative options with the student. If the site cancels an internship, the program will do its best (depending on site availability) to place the student at an alternate site during the regularly scheduled internship semester.

Students may not "swap" or exchange clinical internships.

## STUDENT ILLNESS, INJURY, OR EMERGENCIES WHILE ON EXPERIENCES & INTERNSHIPS:

Students are not considered employees of the clinical site. If the student is injured during an internship, the facility shall provide emergency medical care to the student in case of need, but shall not bear the cost of such care (as per contract). As such, students are required to carry valid health insurance during enrollment in the Program. The policies of the facility will be followed when the filing of an incident report is necessary. In a non-emergent situation, the student may seek medical attention at the healthcare provider of his/her choice. The student is responsible for all costs of medical care received.

### Illness & Medical Appointments:

Any time missed due to illness or emergency must be reported to the CI and DCE and must be made up. Time off for

appointments for medical and dental care – either for the student or the student’s dependents, should be discussed with the CI prior to making the appointment. The student is expected to schedule appointments outside of clinical time or so time away from the clinical setting is least disruptive to the functioning of the facility.

## **ABSENCES OR “TIME OFF” DURING CLINICAL EXPERIENCES & INTERNSHIPS:**

The program does not allow the student any “time off” during clinical education courses other than for professional development opportunities described below. Time off for any reason must be discussed with the CI and coordinated with the DCE. The CI may contact the DCE to discuss options. When a student misses a day from an internship, the CI and the student will schedule the make-up time, and the student must notify the DCE within three working days: the date of the absence, the reason for the absence, and the date of the make-up time. Any planned absence must be approved by the DCE. In all cases, the student will notify the facility prior to the start of the workday or as soon as the student knows of the pending absence, and will speak directly to the CI or CCCE regarding the absence. Failure to comply with this policy may result in a delay in the scheduled completion of the student's internships.

Travel to a distant internship site (between Internship III & IV ONLY when Internship III & IV are scheduled back-to-back):

If a student requires additional time (other than the 2-day weekend) to travel to a distant internship site, then plans will be made in advance (prior to the beginning of Internship III) for the student to delay the start of Internship IV. The student must plan well in advance with the DCE and the CCCE for Internship IV for alternate internship start-end dates.

Job Interviews - **NOT an Excused Absence:**

**Time off from a clinical internship for the purpose of a job interview is NOT an excused absence.** Interviews should be scheduled at times other than scheduled internship days or hours. If this is not possible, then the student is required to make up all time missed.

Participation in Opportunities for Professional Development: **CONDITIONAL**

### **1. Professional Conference - TWO (2) Days Excused Absence**

Students may be excused a maximum of TWO (2) days without penalty from clinical experiences or internships in order to participate in opportunities for professional development such as state, national, or international professional conferences, student conclaves, research symposia, and professional political action events. These opportunities will be considered excused absences. Students are required to obtain prior written approval from the DCE and clinical faculty during the time of their absence. Such absences, however, do not lessen the student’s responsibility to meet the expectations of the experience or internship. If the student is not meeting the expectations of the internship, the request to attend the event may be denied. If the student attends an event and does not meet expectations of the experience/internship after the event, the student will be required to make up any missed time, extend the internship to allow for additional time to meet competencies, or fail the internship.

### **2. Midvale Pro Bono Clinic – Summer Participation during Internship I or II – TWO ½-day Internship Hour Credit**

Students may be excused from their summer clinical internship hours a maximum of TWO ½-days to compensate for active participation in providing patient care services at the Student Run Pro Bono Clinic in Midvale. Students are required plan ahead to obtain prior written approval from the DCE and clinical faculty. If the student is not meeting the expectations of the internship, the request for internship hour credit may be denied. If the student participates in the Pro Bono Clinic, takes time off from the internship and ultimately does not meet expectations of the experience/internship after the event, the student will be required to make up any missed time, extend the internship to allow for additional time to meet competencies, or fail the internship.

## **HOLIDAYS:**

Often holidays such as New Year’s, Easter, Memorial Day, Independence Day, (Pioneer Day in UT), and others occur during the course of an internship or experience. Students will follow the same holiday schedule as their Clinical Instructor; therefore, students may be in clinic on the holiday and may be separated from family / friends on that day. Closure of the University does not excuse the student from participating in the scheduled clinical internship.

## **CLINIC HOURS:**

In many cases, student clinical hours may be approximately 8:00am-5:00pm Monday through Friday. The student is expected to follow their clinical instructor’s clinic schedule and therefore the schedule may take a variety of formats. Students may not dictate their scheduled clinical hours!! Some common formats are: four 10-hour days; 7 days “on”(10-hour days) / 7 days “off” (students on this schedule will need to work additional days in order to accumulate the requisite internship days/hours); longer days on M,

W, F and shorter days on T, TH; and, a combination of five 8-hour days or four 10-hours days spread out throughout the week. Other variations are possible including weekend hours, start times earlier than 8:00am and leaving time later than 5:00pm. Students are expected to comply with any schedule variation. Students should notify the DCE well in advance of the clinical internship with any special needs that would not allow them to comply with an atypical schedule.

Tardiness will not be tolerated. If a student is late, the CI should discuss the issue with the student when it first occurs and give a verbal warning. If it occurs a second time, tardiness should be documented in the Clinical Performance Instrument, Criteria #2 Professional Behavior (see sample behavior 'b') with a verbal warning to the student. If there is a third occurrence, the DCE should be notified and the event documented again in the Clinical Performance Instrument using a Critical Incident Report. Any action taken by the Program and the CI will be communicated in writing to the student.

Students should also realize one must learn to be effective prior to being efficient, and therefore may end up staying later than his/her CI to complete chart reviews, documentation, or other non-direct patient care tasks. The student may not perform physical therapy examination, evaluation or interventions if the CI (or his/her designee) is not on the premises.

Students are reminded they are still students and, as such, they should expect to spend time outside of clinic hours reviewing information and completing assignments. Each clinical internship course will have assignments, as well as it is common and appropriate for CI(s) to assign homework. Students are expected to meet all given deadlines.

## **EMPLOYMENT DURING CLINICAL EDUCATION COURSES:**

We highly recommend students do not maintain employment during full time clinical education courses, but realize that may not be possible or realistic. Depending on the location and/or hours of the clinical experience or internship, the student may need to adjust employment hours or not be able to continue employment. If employment hours conflict with facility hours, the student will be expected to forfeit or change employment hours. The student should NEVER request a clinical site to alter clinical internship hours as a result of employment demands!

## **APPROPRIATE BEHAVIOR:**

Students are expected to adhere to:

- the University of Utah Department of Physical Therapy, Student Code of Professional Responsibility
- the APTA [Code of Ethics](http://www.apta.org/Ethics/Core) (<http://www.apta.org/Ethics/Core>),
- the APTA [Guide for Professional Conduct](http://www.apta.org/Ethics/Core) (<http://www.apta.org/Ethics/Core>),
- the APTA [Professionalism Core Values](http://www.apta.org/Professionalism) (<http://www.apta.org/Professionalism>).

In addition to the above, the following are specific suggestions for professional behavior in the clinical setting. While these suggestions may seem common sense, they are printed here because of specific past student situations and have been requested by clinical instructors and sites.

- It is the student's responsibility to seek all the information needed to comply with the clinical site's departmental and organizational policies. Students should ask for additional information or seek clarification of information provided. Such policies will concern lunch, breaks, smoking regulations, dress code, fire and emergency procedures, departmental hours, and holidays, etc. Proper orientation is a shared responsibility for the intern and instructor.
- Abide by departmental regulations of the clinical site.
- Arrive on time (early is considered "on time"), keep appointments, and leave at a time agreed upon (in advance) by the clinical instructor. Do not leave "early."
- Use free time constructively and wisely as mutually agreed upon with the clinical instructor.
- Demonstrate initiative in patient care, departmental functions and in your own learning.
- Accept and contribute constructive suggestions/communications in a professional manner.
- In general, therapists may not accept any gifts or gratuities offered by patients, families, caregivers or vendors (e.g., Jazz tickets). Any such gifts or gratuities offered should be reported to the clinical instructor and handled in a manner in accordance to site policies.
- Students should avoid chewing gum while treating patients. According to OSHA standards, no food should be in patient care areas or eaten while treating patients.
- Students should obtain permission of the clinical instructor before visiting patients after departmental hours. In some facilities, this may be an acceptable practice; in others, it is not. Check beforehand, and comply with those procedures.

- Asking questions of the clinical instructor will not only facilitate learning, but will ensure patient safety and quality care. Be discrete about questions asked in front of the patient, and reserve all questions regarding prognosis for when the patient is not present. Be aware of the clinical instructor's time constraints in answering questions as well as your obligation to ask those questions.
- Strict adherence to the ethical standards, which protect the patients' confidence, is required. Do not discuss your patients' condition(s) outside the clinical setting and with anyone who does not have a "need to know". Patients may be discussed with classmates and faculty for educational purposes only but avoid identifying them by name (see related HIPAA guidelines regarding de-identification of patient records).
- Attention to common courtesy is essential in the clinical setting. Communication of respect, your display of good listening skills and sensitive verbal communications will be helpful in promoting productive working relationships with your clinical supervisors and peers.
- Students are obligated to report back to the school any ethical or legal compromises noted at their clinical sites.
- Personal cell phones or other electronic communication devices not used for reasonable accommodations of a documented disability must be silenced during class or clinic times.

Further guidelines and information are provided elsewhere in the Clinical Education Manual for successful clinical experiences and internships. The University of Utah is privileged to have the opportunity to intern with our clinical affiliates and expect student interns to have the highest professional regard and respect for these opportunities.

## APPROPRIATE CLINICAL PROFESSIONAL DRESS:

Appropriate professional attire is important as a representative of the University of Utah, Department of Physical Therapy. Students are expected to wear professional attire for **all** activities involving clinical contact with patients (including patient volunteer sessions as part of a normal class labs), unless instructed otherwise. Client consideration and professional image are of utmost importance in any clinical situation. Attire should be comfortable and non-restrictive to allow for movement as necessary during patient care while maintaining a conservative modesty.

Students must determine site-specific dress code requirements prior to the first day of the clinical experience/internship. Dressing more conservatively or formally on the first day/week of the clinical is suggested, until the dress code is clarified. If students report to the clinic wearing any inappropriate dress, they may be asked to go home to change, to change in to temporary scrubs for the day, or be dismissed for the day with the day needing to be made up later. The following describes our expectations of clinical dress. Students are expected to adhere to these guidelines AND the site's policies. Examples of Appropriate Clinical Attire:

| <b>Clothing</b>       | <b>Acceptable</b>   | <b>Unacceptable</b>   |
|-----------------------|---|---|
| <b>Tops - Sleeves</b> | <i>Tops any sleeve length except sleeveless*.<br/>*Dressy silk knit sleeveless shells, tanks or tops may be worn only if under a jacket or sweater.</i>   | <i>Sleeveless tops of any kind including tube-tops, tank tops, spaghetti-strap, halter tops and athletic tops. Bare shoulders or back are not permitted at any time.</i>  |
| <b>Tops - Styles</b>  | <i>Professional business shirts with collars are preferred.<br/>Button-down or pull-over shirts with collars (i.e., Polo or Golf shirts, Oxford, Shell, Turtleneck, etc.).<br/>Tops without collars should be tailored and made of quality, firmer fabrics that hold their shape, and be in good condition.<br/>Tops and blouses in conservative colors and moderate styles. Pull-over and button-down sweaters in good condition. Cardigan sweater sets.</i> | <i>Scrub tops unless working in clinical area.<br/>Gym or yoga tops or faded, old or tight-fitting cotton t-shirts.<br/>Lacy camisole, sequined tops, or tops made of see-through revealing fabrics.<br/>Tropical camp shirts, oversized baggy sweaters, denim shirts, flannel or pajama style tops.<br/>Shirts with silkscreen logos or printing of any kind excluding approved shirts with company logo).<br/>Neon bright colored tops or wild, abstract prints</i> |
| <b>Tops - Styles</b>  | <i>Modest tops only.</i>  | <i>Tops that reveal the abdomen when standing, lifting or bending over.<br/>Tops that expose the cleavage, bra, back, shoulder, chest, lower back or under garments is not allowed. Tops with buttons or snaps must stay closed and lay flat and not</i>  |

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|                         |  | expose the abdomen, chest or bra from side or front.<br>Tops made of sheer or revealing fabric   |
| <b>Tops - Styles</b>    | Tops that fit appropriately and look professional.<br>Tops worn tucked in.<br>Tops worn un-tucked must be professional in nature and designed to be worn un-tucked (i.e., men collared camp-shirts that have a straight hemline or women shell tops or tailored button down shirts with round hemlines).                     | Tight, clingy, over-sized, or excessively baggy-fitting tops.<br>Wrinkled, shrunk, faded, stained (including under arms), or worn-out tops.<br>Tops worn un-tucked that are not designed to do so (i.e., rugby tops, jersey tops, dressy button down shirts, etc.)<br><b>*Any top that does not meet Fitting Standards or Clothing Maintenance Standards</b> |
| <b>Jackets</b>          | Suit-like jacket styles.<br>Casual sport jacket styles in conservative colors and classic styles (i.e., Safari jackets, suede jackets, cotton casual jackets).   | Sweatshirts or "hoodies" of any kind worn inside work areas.<br>Denim, team, ski or gym jackets.<br>Fleece jackets or vests are not allowed in clinical or patient care areas.   |
| <b>Dresses</b>          | Dresses that appear professional and tailored (i.e., Coat-dress, shirt dress with collar, etc.)<br>Dresses with modest necklines and hemlines (may not be higher than 2" above the knee when sitting).   | Sundresses, tank dresses, flannel dresses, sheer or revealing evening dresses, denim dresses, back-less or strapless dresses of any kind.<br>Any dress that stops at mid-thigh or with high immodest slits   |
| <b>Skirts</b>           | Casual and dressy skirts in moderate colors, patterns and styles.<br>Skirts with modest hemlines (May not be 2" above the knee when sitting).  | Denim, leather, flannel or neon colored, costume style skirts.<br>Miniskirts, skirts above approved knee length or that stop at mid-thigh.<br>See-through skirts worn without lining or a slip.  |
| <b>Pants - Styles</b>   | Classic tailored slacks, pants, or trousers.<br>Pants made of firmer fabric to maintain a professional appearance (i.e., wool, cotton, and twill). Corduroy if not faded or worn looking. Linen if pressed and not wrinkled.   | Denim jeans of any kind or color.<br>Leather pants, cargo pants, shorts of any length, cut-offs, overalls, yoga, aerobic or sweat pants.<br>Scrub bottoms if not a clinical worker.<br>Trendy pants of extreme styles including extra wide or extremely tight, narrow pant legs.<br>Faded, torn or stained pants of any kind.                                |
| <b>Pants - Fit</b>      | Pants in good condition, wrinkle-free and fit well.  | Pant hemlines that touch or drag on the ground.<br>Baggie pants worn below the hips or that expose underwear.<br>Shrunk or tight pants of any kind. Pants may not pull tight up and around the bottom, leg or abdomen areas. Pockets and pleats should lay flat and not pull open  |
| <b>Footwear - Shoes</b> | Business professional shoes in good, clean condition including: Pumps, flats, espadrilles, boots, loafers, and other leather shoes.<br>Closed-toe dress shoes with moderate heel height (3" or less).<br>Dressy Peep-Toe shoes permitted in non-patient care areas only.<br>Noise resistant shoe soles/ heels are preferred. | Footwear that does not comply with department specific safety regulations.<br>Open toe shoes of any kind (including sandals), slippers, or bare feet.<br>Flip-flops of any kind including thong-style flip flops, beachwear flip flops, yoga flip-flops, etc.<br>Platform or chunky rubber soled shoes.  |
| <b>Footwear - Shoes</b> | Closed-toe casual shoes that are in good, polished condition and are conservative in style and in darker color tones. Athletic shoes and work boots in quality condition and in neutral color tones are acceptable for approved departments including  | Dirty, odor-ridden, worn, stained, or bright athletic shoes including yoga, running, sports, etc.  |

|                                 |  |  |
|---------------------------------|--|--|
|                                 | <i>Loading Dock or clinical areas.</i>   |  |
| <b>Footwear - Crocs</b>         | <i>Crocs in dark or neutral colors (i.e., black, navy) for approved clinical staff and clinical areas only.</i>  | <i>Bright, extreme colored crocs (i.e., orange, pink) worn with scrubs or pants of any kind.<br/>Crocs with accessories or holes.</i>  |
| <b>Footwear - Leg Coverings</b> | <i>Stockings and hosiery in neutral conservative colors and styles.<br/>Solid colored leggings in neutral, conservative colors (i.e., black, charcoal) if worn with matching shoe and pant or skirt color (i.e., brown shoes, brown leggings and brown tweed skirt).</i> | <i>Leggings or stockings in bright colors or bold, busy, print styles, leggings worn as pants (eg, not under matching skirt).<br/>Fishnet stockings, dirty or odor-ridden socks.</i>   |
| <b>Jewelry</b>                  | <i>Jewelry including necklace, rings and earrings that are conservative in style, size and color. Limit two rings per hand in conservative style and color.</i>  | <i>"Clangy" or distracting jewelry of any kind (including loud bracelets or bangles). Large, chunky, bright neon plastic rings or gaudy metal rings</i>  |
| <b>Jewelry - Body Piercing</b>  | <i>Limit two earrings per ear lobe in conservative colors and size.<br/>Ear gages should be plugged closed with plugs matching skin tone.</i>  | <i>Bold, bright (i.e., neon colors) or excessive costume style earrings of any kind. Large chandelier or hoop earrings greater than approximately 1.5 inches in diameter or approximately 1.5 inches in length<br/>Earrings worn on upper ear area.<br/>Exposed eyebrow, tongue, cheek, lip, nose, chest, back or belly piercing is prohibited</i> |
| <b>Tattoos</b>                  | <i>Clothing styles must cover all visible tattoos.</i>   | <i>Visible tattoos on the body such as chest, neck, arm, abdomen, back and ankle tattoos.</i>  |
| <b>Name - Badges</b>            | <i>Badges worn above the bottom of the sternum and at eye-level, free from distracting stickers, pins, etc. Photo ID must be legible and visible at all times.</i>   | <i>Badges worn at or below the bottom of the sternum or that are not visible to staff and patients.<br/>Pins, stickers and other distracting adhesives.<br/>Lanyards used to hold ID badges are not permitted</i>  |

### Grooming Standards

Grooming is essential for the overall professional appearance of all students. In a hospital environment, including all clinical and non clinical areas, it is important for students to be clean and well kempt. Co-workers are also affected when working with students who have bad breath, dirty hair and body odor, etc. Listed below are required grooming practices in the workplace:

| <b>Grooming Technique</b> | <b>Acceptable</b>  | <b>Unacceptable</b>   |
|---------------------------|--|---|
| <b>Body Odor</b>          | <i>Must practice personal hygiene and be free of offensive odor.</i>   | <i>Perfume or cologne that might interfere with those who are ill or allergic to such odors or fragrances, particularly in patient care areas.<br/>Clothing and body with smoke odor.</i> |
| <b>Hair - Head</b>        | <i>Must practice personal hygiene and hair must be neat and clean.<br/>If working in a clinical environment, long hair must be tied back to avoid patient contact during patient care and / or transportation.<br/>Hair colors must be of natural tones.</i> | <i>Extreme trends such as dreadlocks, Mohawks and long spiked hair are <b>not</b> acceptable.<br/>Non-natural colors such as pink, blue etc. are <b>not</b> acceptable.</i>               |
| <b>Hair - Face</b>        | <i>Nose and ear hair must be trimmed and maintained.<br/>Facial hair including mustache and beard must be short and neatly trimmed and maintained.</i>   | <i>Excessive beard or mustaches styles (i.e., braided beard hair).</i>  |
| <b>Face - Makeup</b>      | <i>Make-up must appear professional and natural and should be conservative in styles and colors.</i>   | <i>Frosted, bright colored eye shadow (i.e., bright green, purple, pink, etc.)<br/>Bright or excessively dark, thick eye liner worn</i>   |

|                       |  |   |
|-----------------------|--|---|
|                       |  | <i>under the eye or on top of the eyelid.</i>   |
| <b>Head - Gear</b>    | <i>No hats or head coverings may be worn inside (except for approved departments and for those worn for religious and/or medical purposes).</i>  | <i>Music headphones or other distracting headgear may not be worn in public areas</i>   |
| <b>Face - Glasses</b> | <i>Reading glasses in conservative colors and styles that are not distracting to our professional appearance.</i>  | <i>Sunglasses worn inside the workplace</i>   |
| <b>Fingernails</b>    | <i>Short, natural (not artificial) fingernails are allowed. Fingernails must be clean, neatly trimmed, and filed to avoid harming patients or other employees. Fingernail polish in conservative colors may be worn.</i> | <i>Extremely long nails and neon or distracting colors are <b>not</b> acceptable. Artificial nails may not be worn in clinical areas.</i> |

## **ID BADGES:**

The Program recognizes the importance of the identification of healthcare providers to the consumer and requires students to display proper identification during all patient encounters. Students and/or their CIs are required to inform consumers the student's role in the encounter and gain informed consent for the student's participation. The standard University of Utah **Vertical** Health Sciences Identification Card (U Card) will be used as your ID badge. Students will obtain their vertical U Card during their 1<sup>st</sup> semester in the Program. Identification badges should always face front (must not rotate). It is to be worn on the upper chest area (defined as the bottom edge of the ID badge being no lower than the level of the sternum, bringing the ID badge closer to the face) and visibly apparent to others. Identification badges are to be worn during all clinical experiences, internships, in-class patient experiences, and extra-curricular patient encounters (e.g., service learning project, working in the wellness clinics). Clinical sites may provide students with facility picture identification. In this case, the student would not wear two badges unless dictated by the clinical site.

## **WITHDRAWAL FROM INTERNSHIP:**

At any time during the clinical experience or internship, after consultation with the CCCE and the CI(s), the DCE and/or the faculty may withdraw a student from a clinical internship if, in their judgment, the student is performing incompetently or poses a safety threat to patients, the staff of the facility, or him/herself. The CCCE and the CI(s) may immediately remove any student from the premises who poses an immediate threat or danger, or for just cause under the clinical facility's disciplinary policy. "The student shall be required to follow all the rules, regulations, and procedures of the facility" (as per contract). These rules, regulations, and procedures should be introduced to the student during orientation to the facility or prior to the internship/experience.

## **IMMUNIZATIONS:**

Prior to the beginning of the clinical education component of the curriculum (PHTH 6800, Clinical Experience I, Fall Semester, Year 1), students will be required to show proof of the following immunizations. A copy will be kept in the Department's student file. Students are responsible for keeping all immunizations up-to-date and readily available to provide clinical sites with verification of all immunizations. Immunizations should be up-to-date through the completion date of the internship (should not expire during the internship). A clinical facility may have additional criteria or requirements and the student is responsible for communication with the facility to determine any differences and obtaining the requisite test/immunizations. The student is responsible for the costs of all immunizations. If the student does not provide the required information/proof, the clinical facility or the Program has the right to suspend the student's clinical experience until such information is provided. Students are required to upload all immunization documentation to Certified Background's Immunization Tracker ([www.certifiedbackground.com](http://www.certifiedbackground.com)). See the online "PT Clinical Education Information" site for further details and instructions.

|                 |  |   |
|-----------------|--|---|
| <b>REQUIRED</b> | MMR (Measles, Mumps, Rubella)            | 2 vaccinations OR positive antibody titer. If titer is negative or equivocal, 1 booster will be needed.             |
| <b>REQUIRED</b> | Diphtheria/Tetanus                       | Submit primary DPT series   |
| <b>REQUIRED</b> | Tetanus, Diphtheria, Pertussis (Td/Tdap) | Substitute 1-time dose of Tdap after 2005; then boost with Td every 10 years.                                       |
| <b>REQUIRED</b> | Hepatitis B                              | 3 vaccinations OR positive antibody titer (lab report required). A student may begin a clinical if the series is in |

|                    |  |   |
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|                    |  | process but must provide documentation of completion. If titer is negative or equivocal, 1 booster will be needed.  |
| <b>REQUIRED</b>    | Varicella (chickenpox)                   | 2 vaccinations OR positive antibody titer OR medically documented history of disease. If titer is negative or equivocal, 1 booster will be needed.                                    |
| <b>REQUIRED</b>    | Influenza                                | Annually – shot or nasal spray. Submit documentation of a flu shot administered during the current flu season Oct-Mar.  |
| <b>REQUIRED</b>    | Polio                                    | Completed primary series (at least 3 vaccinations) OR positive antibody titer   |
| <b>REQUIRED</b>    | Tuberculosis (TB) Screening              | Negative TB skin test OR 2 step skin test (1-3 weeks apart) OR QuantiFERON Gold Blood Test OR if positive results, must provide a clear chest x-ray results. Annual test is required. |
| <b>RECOMMENDED</b> | Human Papillomavirus (HPV)               | 3 doses   |
| <b>RECOMMENDED</b> | Hepatitis A                              | 2 doses   |
| <b>RECOMMENDED</b> | Pneumococcal (polysaccharide)            | 1-2 doses   |
| <b>RECOMMENDED</b> | Pneumococcal conjugate 13-valent (PCV13) | 1 dose  |
| <b>RECOMMENDED</b> | Meningococcal                            | 1 or more doses   |

Please consult with your personal health care provider regarding any immunization updates, as those listed here are general recommendations. If you have other conditions, diseases, risk factors, other recommendations may be appropriate. Other immunization resources:

- International travel and health recommendations: World Health Organization: <http://www.who.int/en>
- Utah Health Department: <http://www.immunize-utah.org/index.html>
- Centers for Disease Control: <http://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html>  
For health professionals: <http://www.cdc.gov/vaccines/schedules/hcp/index.html>

## BACKGROUND CHECKS:

The University of Utah requires a completed national background check of all individuals who will have direct patient contact. Students are responsible for obtaining a background check at the time of entry into program. Students are responsible for all costs and should keep a copy of the results for their own records. Also, many clinical sites require updated or complete new background checks prior to an experience or internship. Students should be prepared to have several screens completed during the course of the program. Be sure to check with your clinical site for specific requirements. See the online “PT Clinical Education Information” site for further details and instructions. National background check: [www.certifiedbackground.com](http://www.certifiedbackground.com)

## DRUG SCREENS:

The University of Utah requires drug screens to be completed by all individuals (students and employees) who have direct contact with patients. Students are responsible for obtaining a 10-panel drug screen upon matriculation into the program and prior to every full time clinical internship. Students are responsible for all drug screening costs and should keep a copy of the screening results for their own records. Most clinical sites require drug screens prior to an experience or internship. See the Department Safe & Drug Free Environment policy & the online “PT Clinical Education Information” site for further details and instructions. Drug Screens: [www.certifiedbackground.com](http://www.certifiedbackground.com)

## CARDIOPULMINARY RESUSITATION TRAINING:

Students must maintain current CPR certification/recertification valid throughout the physical therapy program and be prepared to show proof of certification to clinical sites. We accept only American Heart Association **BLS for Healthcare Providers** training.

- American Heart Association: <http://www.heart.org>.
- University of Utah Clinical Staff Education: <http://uuhsc.utah.edu/cse/>. Call 801-581-2422 to verify classes, obtain current prices, and to register.

## **HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA), INFECTION CONTROL, ENVIRONMENTAL HAZARDS & OTHER RECURRENT ANNUAL TRAINING:**

All students must show evidence to clinical sites (upon request) of having completed HIPAA training, infection control, environmental hazards and other training requirements. Training is available through the online "PT Clinical Education Information" Canvas site. All students must complete all training lessons annually (typically in April/May of each year). Beginning with the Class of 2016, students are required to document training completion through the clinical education management system Acadaware ([www.acadaware.com](http://www.acadaware.com))

## **HEALTH INSURANCE:**

Students must maintain and provide evidence of medical health insurance coverage effective throughout the physical therapy program. <http://www.studenthealth.utah.edu>. Students are required to document valid coverage annually through Certified Background ([www.certifiedbackground.com](http://www.certifiedbackground.com)).

## **PROFESSIONAL LIABILITY INSURANCE:**

For participation in any clinical education course or patient experience within any academic coursework, students must provide evidence of comprehensive general liability and professional liability insurance or properly reserved self-insurance. The program purchases adequate insurance coverage for all students in the program and a Certificate of Insurance is available on the online "PT Clinical Education Information" site.

## **CURRENT CONTACT INFORMATION and COMMUNICATION:**

It is the student's responsibility to provide the Program with a current address and phone number throughout their duration in the Program. The DCE may contact the student at the current (home or cell) phone number to discuss the internship, advise the student of a change in an internship, or for other clinical education related reasons. Students must provide this information to Deb Bachan in writing or by email. If a student is traveling to or between internships, s/he should provide a cell phone contact and/or the phone number of a family member or friend who would be available as a contact.

**REMINDER: UMail (University email) is the official form of communication at the University of Utah. Students are required to use their UMail email address for all electronic mail correspondence! Do not forward your Umail account to other email accounts (e.g., gmail, yahoo, Comcast, etc.). Forwarding your Umail account to other services is against the UU Health Sciences policy & infraction carries applicable fines.**

## **STUDENT SUPERVISION:**

According to the legal contract with facilities, the facility shall designate an individual (CCCE) to act as liaison with the School, to provide for supervision of the student in accordance with the Physical Therapy Practice Act by a physical therapist with a minimum of one year of clinical experience, and to provide the student and the school with feedback on the student's performance.

A CI, or his/her designee, must be on the premises at all times when the student is performing physical therapy activities. The student cannot provide physical therapy services if a supervising therapist is not on-site and available for consultation. If a student is assigned to a small clinic with only one physical therapist, the student cannot provide physical therapy services without the physical therapist on-site, as may occur if the therapist is sick.

In the event there is no supervising physical therapist available on-site on any day a student is scheduled to be in the clinic, alternative arrangements must be made for the student's clinical hours. Options may include observation of another professional, assignment to another clinic for the day, or make-up days after the assignment. Students may participate in co-treatments with other professionals (occupational therapists, speech therapists, for example) if the supervising CI is on the premises; however, the patient must be actively receiving physical therapy care. Students can receive instruction from physical therapist assistants, but the CI or his/her designee must be on site.

Student supervision under Medicare A: in the skilled nursing facility setting, under MDS 3.0, in order to record the minutes as individual therapy when a student is involved in the treatment, only ONE (1) resident can be treated by the therapy student and the supervising therapist. In addition, the supervising therapist cannot be treating or supervising other individuals, and the therapist must be able to immediately intervene or assist the student as needed while the student and resident are both

within line-of-sight supervision (e.g., the therapist could be completing documentation while supervising the student and resident).

When a therapy student is involved in the treatment, and one of the following situations takes place, then the minutes may be coded as “concurrent therapy.”

- The student and supervising therapist are each treating a separate resident while the student is in line-of-sight of the supervising therapist
- The student is treating two residents simultaneously, both of whom are in line-of-sight of the supervising therapist, and the therapist is not treating any patients and not supervising other individuals
- The supervising therapist is treating two residents simultaneously (regardless of payer source), both of whom are in line-of-sight, and the student is not treating any residents.

For further guidelines, visit <http://www.apta.org/Payment/Medicare/Supervision> For other settings, such as acute care, the CI must provide on-site supervision. Refer to the CMS Federal Register Volume 64, Number 213 or visit <http://www.apta.org/Payment/Medicare/Supervision>

Student supervision under Medicare B: In order to bill for student services provided to patients and clients with Medicare B, the CI must be present and actively engaged in all decision making related to the patient’s care. The CI may not be engaged in another activity simultaneously. Refer to CMS guidelines: [www.cms.hhs.gov](http://www.cms.hhs.gov) or to the APTA website <http://www.apta.org/Payment/Medicare/Supervision>.

## **GRADING AND CONSEQUENCES OF A FAILURE OF A CLINICAL INTERNSHIP:**

The DCE is responsible for assigning internship grades. All internships are graded on a CREDIT / NO CREDIT basis. Grades are assigned based upon the CI(s)’s written evaluation and recommendations, phone conversations and/or site visits with the student and/or CI(s), as well as any other communication between the CI(s), CCCE and the DCE or between the DCE and the student during the internship and with consideration of the entire record and performance of the student. The DCE will consult with the Chair of the Department and/or the faculty when needed.

Clinical Internship and Experience expectations are described in the course syllabus. The expectations for professional behavior are listed and described in the course syllabus, the Student Handbook, the Clinical Education Manual and the Clinical Performance Instrument.

- A grade of CREDIT is assigned if the student demonstrates satisfactory performance meeting course expectations.
- A grade of “Incomplete (I)” or “Independent Work in Progress (T)” is assigned if the student fails to submit the internship documentation or all course assignments by the assigned due date. A grade of Incomplete may also be given if it is determined the student needs additional time at the internship to successfully meet performance expectations.
- A grade of NO CREDIT is assigned if the student demonstrates unsatisfactory performance and does not meet the course expectations. Unprofessional behavior or patient care that is considered unsafe will result in a grade of NO CREDIT. If the student is assigned a grade of NO CREDIT, the faculty will determine the consequences.
- If a student receives a NC in an internship, he/she MUST successfully repeat the internship with a grade of CR in order to progress in the curriculum. The reason(s) for failure of an internship will serve as the basis for remediation.
- Failure to pass the second attempt at the clinical internship will serve as grounds for dismissal from the Program.