



**LARAMIE COUNTY  
COMMUNITY COLLEGE**

**STUDENT HANDBOOK: PART 2  
APPENDIX FORMS AND RESOURCES**

**PHYSICAL THERAPIST ASSISTANT  
PROGRAM**

Rev. 1/10/2024

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# Welcome!

Congratulations on your acceptance into the Physical Therapist Assistant Program (PTA) class at Laramie County Community College (LCCC). Having chosen to become a PTA you must assume that there are inherent rights and responsibilities of this healthcare field along with a world of opportunity. The faculty at LCCC is ready and eager to assist you in achieving your educational goals.

The Physical Therapist Assistant Program (PTA) Handbook is a supplement to the LCCC Catalog and the LCCC Student Handbook. These policies apply to all students enrolled in the PTA Program. Please refer to the LCCC Catalog and Student Handbook and the Health Sciences & Wellness School Policies (HSW School Policies) for additional information about college policies, procedures, and services.

The PTA handbook outlines policies & procedures specific to the Physical Therapist Assistant (PTA) program, the Associate in Applied Science (AAS) Degree in PTA, and PTA clinical education. It also provides a framework by which students and faculty can function harmoniously. Students are expected to become thoroughly familiar with its contents, and to apply these procedures to their conduct while attending the LCCC PTA Program. The provisions of this Handbook do not constitute a contract, express or implied, between any applicant, student, or graduate and the faculty or the College.

## ***Helpful Contacts: Laramie County Community College***

Campus Operator .....	307.778.5222
Health Sciences & Wellness School .....	307.778.1140
Fax .....	307.778.1395
Admissions/Enrollment Services.....	307.778.1212
Out of state .....	800.522.2993
Financial Aid .....	307.778.1215
Office of Student Accommodations (OSA).....	307.778.1359
TTY Number .....	307.778.1266
Veterans Affairs Office .....	307.778.4396
Campus Safety .....	307.630.0645 / 307.630.0866
Bookstore .....	307.778.1114
Library .....	307.778.1205
Student Success Center (HUB) .....	307.778.4315

## ***Helpful Contacts: School of Health Sciences & Wellness***

### ***Vice President of Academic Affairs***

Dr. Kari Brown-Herbst  
Office: EEC 219  
Phone: 307.778.1103  
Email: kherbst@lccc.wy.edu

### ***PTA Clinical Education Coordinator/ Instructor***

Gabriella King, PT, DPT  
Office: HS 338  
Phone: 307.432.1684  
Email: gking@lccc.wy.edu

### ***Dean Health Sciences & Wellness School***

Starla Mason, MS, RT (R) (QM)  
Office: HSW 336  
Phone: 307.778.1118  
Email: smason@lccc.wy.edu

### ***Health Sciences & Wellness Administrative Assistant***

Tara Ritchie  
Office: HS 330  
Phone 307.778.1140  
Email: tritchie@lccc.wy.edu

### ***PTA Program Director/Instructor***

Brendon Larsen, PTA, BS  
Office: HS 340  
Phone: 307.778.1198  
Fax: 307.778.1395  
Email: blarsen@lccc.wy.edu

### ***Campus Security***

Jesse Blair  
Office: PF 112  
Phone: 307.630.0645  
Phone: 307.778.4317  
Email: jblair@lccc.wy.edu

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Laramie County Community College is committed to providing a safe and nondiscriminatory educational and employment environment. The College does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, political affiliation, sexual orientation or other status protected by law. Sexual harassment, including sexual violence, is a form of sex discrimination prohibited by Title IX of the Education Amendments of 1972. The College does not discriminate on the basis of sex in its educational, extracurricular, athletic or other programs or in the context of employment.

The College has a designated person to monitor compliance and to answer any questions regarding the College's nondiscrimination policies. Please contact: Title IX and ADA Coordinator, Suite 205 Clay Pathfinder Building, 1400 E College Drive, Cheyenne, WY 82007 | 307.778.1217 | [TitleIX\\_ADA.Coordinator@lccc.wy.edu](mailto:TitleIX_ADA.Coordinator@lccc.wy.edu). Contact information for the regional Office for Civil Rights is: Office for Civil Rights, Denver Office, U.S. Department of Education, Cesar E. Chavez Memorial Building, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582, 303.844.5695, [OCR.Denver@ed.gov](mailto:OCR.Denver@ed.gov).

In compliance with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act, Laramie County Community College does not discriminate against students with disabilities. Efforts are made to arrange effective, reasonable accommodations for any qualified individual. The Office of Student Accommodations (OSA) at LCCC provides comprehensive, confidential services for LCCC students with documented disabilities. Services and adaptive equipment to reduce mobility, sensory, and perceptual concerns are available through the OSA, and all services are provided free of charge to LCCC students.

# **Appendix A: Resources for Students**

**STUDENT PHYSICAL THERAPIST ASSISTANT (SPTA) CLINICAL ROTATION REQUEST FORM**

LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)

Physical Therapist Assistant (PTA) Program

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Please use this form to select 5 locations for internship placement using the list of available sites (see instructors for reference). CAPTE states that each student is required to have an *inpatient and outpatient* rotation, so please consider this when making your selections as it will affect graduation from the program. You may also request a site that is NOT already on the list using this form. (*Understand this is a request form ONLY; you are not guaranteed the sites you list on this form.*)

Fall	Spring
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Additional Comments:

---

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**REQUEST FOR ADDITIONAL SITE (*limit one per student*) \***

Name of Site: \_\_\_\_\_

\*No request will be considered without an accompanying *Clinical Site Information Request Form*. Site name, contact person, and CCCE information MUST be filled out in full by the student or the site to consider this request.

**CLINICAL SITE INFORMATION REQUEST FORM**

LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)

Physical Therapist Assistant (PTA) Program

<b>Site Name:</b>		<b>DBA (if applicable):</b>	
<b>Address:</b>		<b>Office Phone:</b>	<b>Ext:</b>
<b>City, State, ZIP:</b>		<b>Office Fax:</b>	
<b>Type of Setting</b> <input type="checkbox"/> Inpatient (Acute, home health, skilled nursing, etc.) <input type="checkbox"/> Outpatient <input type="checkbox"/> Both; _____% in _____% out		<b>Clinic Hours (Students require 40 hrs./wk):</b>	
<b>Dress Code Requirements:</b>		<b>Office Email:</b>	
<b>Specialties</b> List <u>ALL</u> that apply <input type="checkbox"/> Aquatic <input type="checkbox"/> Geriatrics <input type="checkbox"/> Hand Rehab <input type="checkbox"/> Manual Therapy <input type="checkbox"/> Neurology <input type="checkbox"/> _____ <input type="checkbox"/> _____		<input type="checkbox"/> Pediatrics <input type="checkbox"/> Wound <input type="checkbox"/> Women's Health <input type="checkbox"/> Orthopedics <b>Certifications (Please list certifications held by CCCEs or CIs)</b>	
<b>Requirements</b> List <u>ALL</u> that apply <input type="checkbox"/> PPD <input type="checkbox"/> DTT <input type="checkbox"/> MMR <input type="checkbox"/> Hepatitis B <input type="checkbox"/> _____		<input type="checkbox"/> Flu Vaccination <input type="checkbox"/> Color Vision Test <input type="checkbox"/> CPR <input type="checkbox"/> Background Check <b>Additional Comments/Notes:</b>	
<b>Who is the contact person to establish site requirements in preparation for clinicals?</b>			
<b>Name:</b>		<b>Phone:</b>	
<b>Website:</b>		<b>Email:</b>	



How much advance time is recommended to complete requirements?	Is housing available? If so, please explain in detail:
--	--

CCCE/CI Name (First & Last)	PT or PTA	CCCE? Yes/No	APTA CI Credential? YES/NO	Email Address	Work Phone (incl ext.)	Alt Phone (incl ext.)	Ethnicity (optional)	Gender (optional)

Do you wish to receive additional information regarding the LCCC PTA Advisory Committee? YES \_\_\_\_\_ NO \_\_\_\_\_

ADDITIONAL COMMENTS:

## **PROGRAM IMMUNIZATION & ONBOARDING REQUIREMENTS**

LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)

Physical Therapist Assistant (PTA) Program

Student Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Course Number/Title: \_\_\_\_\_ Semester: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

### **Immunization Packets:**

Please submit copies of the following documents in **ONE** packet. We are only able to accept completed packets – no partial packets will be accepted. Verification of current immunizations and titers are required as part of the health screening process prior to entering internship sites. *We apologize however, we are unable to make copies so please have copies completed when you turn them in – thank you!*

\_\_\_\_\_ MMR (Measles, Mumps, and Rubella)

\_\_\_\_\_ HEPATITUS B

\_\_\_\_\_ VARICELLA

\_\_\_\_\_ PPD (Tuberculosis) (LCCC requires a two-step test within the last 12 months)

\_\_\_\_\_ DTT (diphtheria, tetanus, pertussis)

\_\_\_\_\_ FLU SHOT (annual vaccination)

\_\_\_\_\_ TETANUS (within the last 10 years)

\_\_\_\_\_ CPR CARD (BLS through American Heart Association)

\_\_\_\_\_ COVID-19 (as required by clinical partners)

\_\_\_\_\_ Color Vision Test (as required by clinical partners)

### **Other Onboarding Requirements:**

\_\_\_\_\_ Student Information and Goal Sheet

\_\_\_\_\_ APTA CPI Certificate of Completion

\_\_\_\_\_ Student Handbook Agreement

\_\_\_\_\_ Confidentiality Agreement

\_\_\_\_\_ Completion Date of CHES Booklet

### **To be Verified by Authorized HSW Staff:**

\_\_\_\_\_ Background Check

\_\_\_\_\_ Urine Drug Screen

- Please refer to the Clinical Education section of the LCCC PTA Student Handbook for more detail.
- Requirements are subject to change. Clinical partners may have additional requirements. Be sure to check with the ACCE and the CCCE/CI to ensure that you have met site specific requirements.

## **STUDENT CONFIDENTIALITY AGREEMENT**

### **LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**

#### **Physical Therapist Assistant (PTA) Program**

**I understand that confidential care and treatment is the right of all patients in all clinical agencies utilized for my clinical experience as a Physical Therapist Assistant (PTA) Student at Laramie County Community College (LCCC). The diagnosis, treatment, and all other information concerning patients are confidential and may not be released to anyone, including family members, without the consent of the patient. I understand that even the presence of a patient in a clinical facility is considered confidential.**

I understand that other information I may obtain as part of my student experiences is also confidential. I understand that the concept of confidentiality includes but is not limited to information concerning: 1) a patient; 2) a patient's family or significant others; 3) an employee or job applicant; 4) a physician or other practitioner; 5) peer review or quality of care; 6) the sensitive business plans or finances of the college or clinical facility; 7) computer passwords; 8) other students and instructors; or 9) any other persons who may make use of clinical facilities and services.

I agree that, except as clearly directed by my instructor, I will not at any time during or after my student experiences, disclose or discuss confidential information or any part of my experience, which is of a confidential nature to anyone who does not need that information to perform their duties. I also agree not to seek or obtain information regarding confidential matters not necessary to fulfill my responsibilities as a student.

I recognize that my disclosure of confidential information may cause irreparable injury to an individual, the college, and/or the clinical facility, and may result in a civil lawsuit. I understand that any violation of this agreement or my disclosure of any confidential information in an unauthorized manner can result in my immediate dismissal from the PTA Program. If in any situation I am uncertain or unclear of my responsibilities in protecting confidential information, I will seek the guidance of my instructor or appropriate supervising personnel.

By my signature below, I certify that I have read this Student Confidentiality Agreement, have asked any questions I had, that I understand this Agreement, and I agree to be bound by its terms.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name

*Signed original to be kept in student file.*

**STUDENT INFORMATION SHEET**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

*We want to take this opportunity to thank you for being a clinical site for our physical therapist assistant program. Below you will find student specific information.*

Student's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Student Strengths:**

- 1.
- 2.
- 3.

**Student Weaknesses:**

- 1.
- 2.
- 3.

**Student Goals:**

- 1.
- 2.
- 3.

**Other information student would like you to know:**



## QUICK START GUIDE FOR CPI WEB TRAINING MODULES

Access to PT and PTA CPI Web will only be provided if you complete the training session and complete the PT and PTA CPI/WEB Assessment (*CPI Assessment*). You will only have to complete the CPI 3.0 Assessment once. However, you are encouraged to review the freely available training modules prior to each supervised student.

This document contains instructions on how to access the required:

1. *APTA CPI 3.0 CI/SCCE Training*

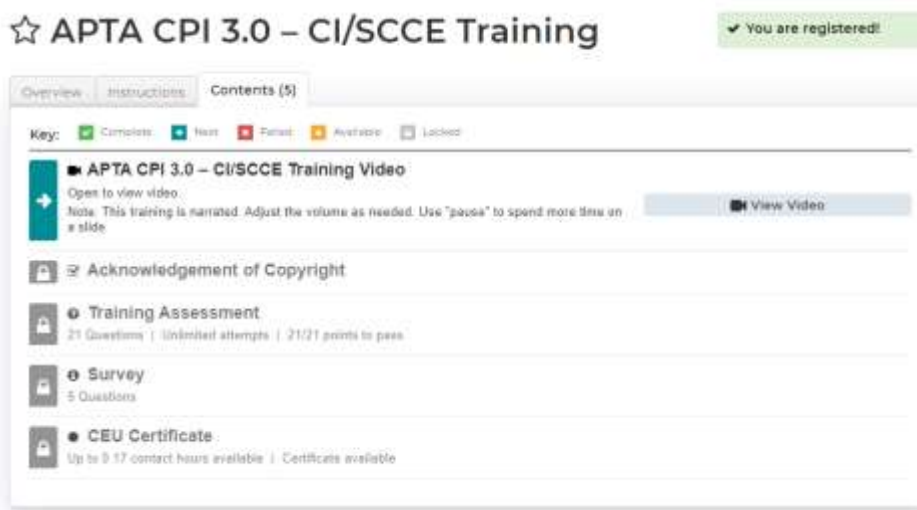
---

### PT and PTA *CPI New User Training Modules*

- The self-guided training includes PowerPoint modules to help you successfully use the CPI Web.
- You can complete the training module-by-module or all at once.
- They are accessible anytime and the training is FREE.

The *Training Modules* can be accessed via the APTA Learning Center

1. Navigate to the CPI 3.0 CI/SCCE Training
  - a. <https://learningcenter.apta.org/products/apta-cpi-30-cisce-training>
2. Register for a **free** account
  - a. The email used for this account will be the same one the ACE will use to activate your account on the CPI Web.
3. Complete the Training Video, Acknowledgement of Copyright, Training Assessment and Survey on CPI New User Training Modules webpage:



4. It is recommended that you print and save a copy of your Completion Certificate

**Difficulty in Accessing the CPI Assessment?**

If you run into any problems with the CPI Assessment on the APTA Learning Center, please contact the APTA at 1-800-999-2782 x 3395 or send email to [learningcenter@apta.org](mailto:learningcenter@apta.org).

**Now that you have completed the Training Session, you can access the PT  
or PTA CPI Web at: <https://cpi.apta.org/>**

**Please Notify the ACE of the E-mail used to register for the CPI training**

*The ACE will not be able to activate your account in the CPI without this information!*

**Changing PT CPI Web Password:**

- *It is highly-recommended that you change your password after you log in.*
- Note that your password is case sensitive and must be typed in exactly as it appears in the information box.

**Problems with Accessing PT or PTA CPI Web?**

If you are having difficulty logging into PT CPI Web after completing the training, please send an e-mail to [CPI@apta.org](mailto:CPI@apta.org).

If you have issues with your APTA username and/or password, please send an e-mail to [membersuccess@apta.org](mailto:membersuccess@apta.org).

## DEFINITIONS OF PERFORMANCE CRITERIA & RATING SCALE ANCHORS

Performance criteria describe all essential knowledge, skills, and behaviors of a physical therapist assistant performing at entry level (new graduate). Each performance criterion is essential to the overall assessment of clinical competence, and each is assessed across the duration of the student’s clinical experience

PTA CPI: Performance Criteria	
<b>Professionalism</b>	<p>1.1 Professionalism: Ethical Practice Practices according to the Standards of Ethical Conduct; demonstrates respect for self, the patient/client, and colleagues in all situations</p> <p>1.2 Professionalism: Legal Practice Practices according to legal and professional standards, including all federal, state, and institutional regulations related to patient/client care and fiscal management</p> <p>1.3 Professionalism: Professional Growth Accepts and is receptive to feedback; participates planning and/or self-assessment to improve clinical performance; contributes to the advancement of the clinical setting through educational opportunities; seeks out opportunities to improve knowledge and skills</p>
<b>Interpersonal</b>	<p>2.1 Interpersonal: Communication Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients/clients, caregivers, intra/interprofessional colleagues); adapts to diverse verbal and nonverbal communication styles during patient/client interactions; utilizes communication resources (e.g., interpreters) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients and clients and others; facilitates ongoing communication with physical therapist regarding patient/client care.</p> <p>2.2 Interpersonal: Inclusivity Delivers physical therapy services with consideration for patient/client diversity and inclusivity for all regardless of age, disability, ethnicity, gender identity, race, sexual orientation, or other characteristics of identity; Provides equitable patient/client care that does not vary in quality based on the patient’s/client’s personal characteristics (e.g, ethnicity, socioeconomic status)</p>
<b>Technical/Procedural</b>	<p>3.1 Technical/Procedural: Clinical Reasoning Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgements; applies current knowledge and clinical judgement while supporting the physical therapist with clinical activities; ensures patient/client safety during the episode of care; presents a logical rationale for clinical decisions with all stakeholders (eg., patients/clients, caregivers, intra/interprofessional colleagues)</p> <p>3.2 Technical/Procedural: Interventions: Therapeutic Exercise and Techniques Performs selected therapeutic exercises, manual therapy techniques, airway clearance, and integumentary repair and protection techniques in a competent manner</p> <p>3.3 Technical/Procedural: Interventions: Mechanical and Electrotherapeutic Modalities Applies selected mechanical and electrotherapeutic modalities in a competent manner</p> <p>3.4 Technical/Procedural: Interventions: Functional Training and Application of Devices and Equipment Performs functional training in self-care and home management, including therapeutic activities, performs application and adjustment of devices and equipment in a competent manner</p>
<b>Business</b>	<p>4.1 Business: Documentation Produces quality documentation that includes changes in the patient’s/client’s status, a description and progression of specific interventions used, and communication among providers; maintains organization of patient/client documentation</p> <p>4.2 Business: Resource Management Participates in the efficient delivery of physical therapy services; demonstrates appropriate understanding of time management and appropriate use of clinical supplies and equipment when supporting physical therapy services</p>
	•



**PTA CPI: Rating Scale Anchors**

<p><b>Beginning performance</b></p>	<ul style="list-style-type: none"> <li>• A student who requires direct personal supervision 100% of the time working with patients with constant monitoring and feedback, even with patients with simple conditions.</li> <li>• At this level, performance of essential skills is inconsistent and clinical problem solving* is performed in an inefficient manner.</li> <li>• Performance reflects little or no experience in application of essential skills with patients.</li> <li>• The student does not carry a patient care workload with the clinical instructor (a PTA directed and supervised by a physical therapist or a physical therapist).</li> </ul>
<p><b>Advanced beginner performance</b></p>	<ul style="list-style-type: none"> <li>• A student who requires direct personal supervision 75% – 90% of the time working with patients with simple conditions, and 100% of the time working with patients with more complex conditions.</li> <li>• At this level, the student demonstrates consistency in developing proficiency with simple tasks (eg, medical record review), clinical problem solving, interventions (eg, monitoring therapeutic exercise), and related data collection (eg, single angle goniometry), but is unable to perform more complex tasks, clinical problem solving, interventions/data collection without assistance.</li> <li>• The student may begin to share the patient care workload with the clinical instructor.</li> </ul>
<p><b>Intermediate performance</b></p>	<ul style="list-style-type: none"> <li>• A student who requires direct personal supervision less than 50% of the time working with patients with simple conditions, and 75% of the time working with patients with complex conditions.</li> <li>• At this level, the student is proficient with simple tasks, clinical problem solving, and interventions/data collection and is developing the ability to consistently perform more complex tasks, clinical problem solving, and interventions/data collection.</li> <li>• The student is <b>capable of</b> maintaining 50% of a full-time physical therapist assistant's patient care workload.</li> </ul>
<p><b>Advanced intermediate performance</b></p>	<ul style="list-style-type: none"> <li>• A student who requires clinical supervision less than 25% of the time working with new patients or patients with complex conditions and is independent working with patients with simple conditions.</li> <li>• At this level, the student is consistent and proficient in simple tasks, clinical problem solving, and interventions/data collection and requires only occasional cueing for more complex tasks, clinical problem solving, and interventions/data collection.</li> <li>• The student is <b>capable of</b> maintaining 75% of a full-time physical therapist assistant's patient care workload.</li> </ul>
<p><b>Entry-level performance</b></p>	<ul style="list-style-type: none"> <li>• A student who is <b>capable of</b> completing tasks, clinical problem solving, and interventions/data collection for patients with simple or complex conditions under general supervision of the physical therapist.</li> <li>• At this level, the student is consistently proficient and skilled in simple and complex tasks, clinical problem solving, and interventions/data collection.</li> <li>• The student consults with others to resolve unfamiliar or ambiguous situations.</li> <li>• The student is <b>capable of</b> maintaining 100% of a full-time physical therapist assistant's patient care workload in a cost effective* manner with the direction and supervision of the physical therapist.</li> </ul>
<p><b>Beyond Entry Level Performance</b></p>	<ul style="list-style-type: none"> <li>• A student who is capable of working independently under the direction/supervision of the PT while managing patients/clients with non-complex and complex conditions. He student is capable of maintaining 100% of a full-time, entry-level physical therapist assistant's caseload.</li> </ul>

# Appendix B: Resources for CCCEs and CIs

**MEMORANDUM OF AGREEMENT**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

This Memorandum of Agreement verifies that the LCCC PTA student, the Center Coordinator of Clinical Education (CCCE) or the supervising PT, and the Supervising Clinical Instructor, have reviewed the documents related to PTA Supervision and the LCCC PTA Clinical Education Policies (found in the student handbook). The signed and dated document must be submitted to the LCCC PTA Program. It is the affiliating student's responsibility to make sure that this document is signed and submitted to the school by the specified date.

If you have accepted students from this program in the past and reviewed these documents at that time, please take a moment to review them again, as some guidelines may have changed. Thank you.

Documents to be reviewed, for this agreement:

1. LCCC PTA Student Handbook Section VII: Clinical Education
2. APTA Supervision of Student PTA (in Appendix B of the LCCC Student Handbook)

*By signing this Memorandum of Agreement, all signed below verify that they have read and understood the contents of the documents above and agree to abide by the stated policies and procedures.*

**Affiliating Student**

\_\_\_\_\_  
Student Name (Printed)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**CCCE, Supervising PT and Supervising CI**

\_\_\_\_\_  
CCCE or Supervising PT Name (Printed)

\_\_\_\_\_  
Supervising CI (Printed) (if other than CCCE)

\_\_\_\_\_  
CCCE or Supervising PT Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervising CI Signature (initial if CI is also the CCCE)

\_\_\_\_\_  
Date

# PHYSICAL THERAPIST ASSISTANT PROGRAM ORIENTATION FORM

LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)

Physical Therapist Assistant (PTA) Program

**Student Name** \_\_\_\_\_

**Clinical Site:** \_\_\_\_\_

**Date of Orientation:** \_\_\_\_\_

**CI Name:** \_\_\_\_\_

To verify completion, the Clinical Instructor puts a check mark in each box and signs the bottom of the form. The student will sign the form and upload it to the designated drop box in Canvas.

## **Facility**

- Tour of Building
- Orientation to Clinic (general review of equipment, supplies and workspace)
- Assigned personal/professional space use areas
- Emergency Procedures of the clinical facility/hospital reviewed
- Reviewed facility Infection Control Procedures
- Review the organizational structure of the facility including the Physical Therapy or Rehabilitation Department.
- Ensure that the student has the appropriate ID badge(s) and parking permit for the clinical site
- Review Clinical Schedule (including weekend or evening coverage)
- Review meal schedule (students must have 30 min. break)
- Review the professional appearance and behavior standards of the facility
- Review confidentiality requirements

## **Discussion of Learning Objectives and Responsibilities**

- Student has been shown the Student Clinical Education Manual for the facility
- Review Course Syllabus with CI and Student
- Review Clinical Education requirements and expectations for facility
- Discuss student learning preferences
- Review student's strengths and weaknesses
- Review facility documentation procedures and process
- Review facility billing procedures and process
- Review any available library or educational resources

## **Other**

\_\_\_\_\_  
**Clinical Instructor Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

**CLINICAL INCIDENT REPORT**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

**Directions:** The Critical Incident Report form may be useful when a critical event (such as a patient safety issue) is observed. The purpose and design of the form is to limit reporting to the observed incident/behavior, without interpretation by the observer/evaluator, in order to record the entry without bias. Antecedents refer to events or environmental factors that preceded the behavior. Behaviors are to be described objectively. Consequences identify any determined ramifications imposed. It is the policy of the LCCC PTA program that any Critical Incident Report results in a call to the ACCE and/or PTA Program Director.

**Student:** \_\_\_\_\_ **Evaluator/Observer:** \_\_\_\_\_

<b>CRITICAL INCIDENT</b>			
Date and Time	Antecedents	Behaviors	Consequences
Student Initials: _____ Evaluator Initials: _____			
Student Initials: _____ Evaluator Initials: _____			
<b>Student Signature:</b>		<b>Evaluator's Signature:</b>	

PTA.LCCC. 9/29/2016

Adapted from: Shea ML, Boyum PG, Spanke MM. Health Occupations Clinical Teacher Education Series for Secondary and Post-Secondary Educators. Urbana, Ill: Department of Vocational and Technical Education, University of Illinois at Urbana-Champaign; 1985. As found in the APTA Clinical Instructor Education and Credentialing Program, American Physical Therapy Association, Alexandria, Va, September 2005: Section IV-12.

## APTA GUIDELINES FOR SUPERVISION OF THE STUDENT PTA



### Compliance Matters: Supervision Requirements for PTAs & Physical Therapy Students

*A brief primer on what to ask and where to seek answers.*

By Sharita Jennings, JD | May 2018

Supervision requirements for physical therapist assistants (PTAs) and physical therapy students (both physical therapist and PTA students) depend on such factors as the policies of individual payers and insurers, state practice act provisions, and the setting in which physical therapy is being provided. Let's simplify this situation by looking at some key issues.

#### Levels of Supervision

It is the responsibility of the physical therapist (PT) alone to evaluate and assess patients, develop a plan of care, and oversee provision of services. PTAs and physical therapy students play important roles in carrying out the plan of care, however. Supervision rules are meant to ensure that patients and clients always are receiving the safest and most effective care. Depending on the setting, practitioner, and applicable state laws, 1 of 3 types of supervision will apply to PTs and the PTAs and students they supervise.

**General.** This is the least restrictive type of supervision. It requires only that the PT be available for direction and supervision by telephone or another form of telecommunication during the procedure in question; the PT need not be onsite.

**Direct.** This type of supervision requires the PT to be physically present at the facility and immediately available for in-room direction and supervision. The PT must have direct contact with the patient or client for the duration of each visit--defined as all encounters with that patient or client within a 24-hour period.

**Direct personal.** This is the highest level of supervision. The PT must be physically present in the room and immediately available to direct and supervise tasks related to patient and client management, and must provide continuous direction and supervision throughout the time these tasks are performed.

#### Factors to Consider

To determine the required level of supervision of PTAs and students, PTs should ask themselves these questions:

- What does the state practice act say about supervision of PTAs and students?
- When Medicare patients are involved, what are Medicare's regulations regarding PTAs and students?
- When a commercial insurer is involved, what are that payer's policies regarding PTAs and students?
- In what type of practice setting are the physical therapist services being provided?

**State practice acts.** State practice acts typically define the scope of practice of PTs and the scope of work of PTAs and physical therapy students. It's the PT's go-to document, therefore, for

determining supervision requirements. Links to all state practice acts are available on APTA's website. (See "Resources" on page 10.)

Be advised, however, that not all state practice acts address supervision of either PTAs or physical therapy students, while some acts address PTAs but not students. Here's what do in these situations:

- If the state practice act is silent on supervision of students but does contain policies on PTA supervision, apply the rules of PTA supervision to physical therapy students.
- If the state practice act addresses *neither* supervision of PTAs *nor* supervision of physical therapy students, look to the supervision requirements of the payer policy. For example, if the individual who is receiving services has health insurance from Blue Cross, consult that company's policies regarding supervision of PTAs and students. If the person is a Medicare or Medicaid patient, check that agency's billing policy.

**Medicare provisions.** Again, if the state practice act is *silent* on supervision requirements, turn to Medicare's billing guidelines to determine the needed level of supervision for PTAs and students in providing services to Medicare beneficiaries. Medicare dictates general supervision of PTAs in all settings other than private practice, in which direct supervision is required. In some settings, however, Medicare stipulates additional requirements even under general supervision. For instance, when a PTA provides services to a patient in a standalone clinic (defined by Medicare as "a facility that is not part of a hospital but is organized and operated to provide medical care to outpatients"), rehabilitation agency, or public health agency, the supervising PT must make an onsite visit at least once every 30 days.

Medicare states that PTs may not bill for services provided by physical therapy students, because they are not licensed practitioners. Students may help PTs provide billed services, however, and PTs may physically guide students through the provision of a billed service. PTs, therefore, need to exercise their best judgment in such situations. Medicare offers these scenarios as guidance for appropriately billing Part B services:

- The PT is present and in the room for the entire session. The student participates in the delivery of services only when the PT is directing the service, exercising skilled judgment, and is the party responsible for assessment and treatment of the patient or client.
- The PT is present in the room, guiding the student in service delivery whenever the student is participating in its provision. The PT is at no time engaged in treating other patients or performing any other tasks.

The PT is the responsible party and, as such, signs all documentation. (A physical therapy student also may sign, but the student's signature is unnecessary.)

PTAs and physical therapy students cannot bill for their services under Medicare or any other payer. The supervising PT, rather, must bill for all services under his or her National Provider Identifier issued by the Centers for Medicare and Medicaid Services.

(A note on payment for services provided by PTAs: Medicare and commercial insurers currently reimburse for services rendered by PTAs at the same rate as they do those furnished by PTs. Beginning in 2022, however, services provided by PTAs will be reimbursed at 85% of the Medicare physician fee schedule rate that applies to those rendered by PTs. At this writing, this upcoming change has no bearing on supervision rules for PTAs.)

**Commercial insurers.** PTs treating patients or clients whose health care is covered by a commercial insurance plan must closely read the contract with the insurer to ensure that they meet supervision

policies covering PTAs and students. Commercial insurers typically defer to Medicare guidelines, but it's important to check with the insurer to be certain.

## Who Signs?

The answer to this question is simple. Because the PT is responsible for drafting the plan of care and supervising all procedures carried out under it, the PT must review and sign all care notes and the plan of care itself.

PTAs and students may draft notes on the care they've provided under the appropriate level of supervision. The supervising PT then must authorize and sign that documentation.

As with all supervision rules, the PT should check the state practice act and agreements with participating insurers to determine if more-stringent rules on signatures apply to any given situation.

<https://www.apta.org/apta-magazine/2018/05/01/compliance-matters-supervision-requirements-for-ptas-and-physical-therapy-students>



*Sharita Jennings, JD, is senior regulatory specialist at APTA.*

## Resources

### Levels of Supervision (APTA House of Delegates Position)

- [www.apta.org/uploadedFiles/APTAorg/About\\_Us/Policies/HOD/Terminology/Supervision.pdf](http://www.apta.org/uploadedFiles/APTAorg/About_Us/Policies/HOD/Terminology/Supervision.pdf)

### State Practice Acts

- [www.apta.org/Licensure/StatePracticeActs](http://www.apta.org/Licensure/StatePracticeActs)

### Report to Congress: Standards for Supervision of Physical Therapist Assistants (Under Medicare)

- [www.ems.gov/medicare/billing/therapyservices/downloads/61004ptartc.pdf](http://www.ems.gov/medicare/billing/therapyservices/downloads/61004ptartc.pdf)



**FIVE-MINUTE FEEDBACK FORM**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

Student: \_\_\_\_\_ Date: \_\_\_\_\_

*The five-minute feedback form is designed to provide quick, daily student feedback, during the early stages of the clinical education experience (usually weeks 1-3). Having written feedback may provide your student, and you, with more concrete information, especially in the areas of Clinical Instructor expectations, and immediate learning needs. In addition, having daily written observations may assist the Clinical Instructor with completing the CPI mid-term. When using this form, a quick listing of your observations and recommendations is acceptable. This is not a part of the student's record – it is provided as another tool to add to your clinical education toolbox. Although the form is most useful during the early clinical education experience, it may be used at any time during the clinical rotation.*

List observed clinical performance or behaviors done well today:

Recommendations for improvement:

Additional comments/follow-up:

CI Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_

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*Adapted from Pueblo Community College Occupational Therapy Assistant Program – Supervisor's Fieldwork Manual*

## WEEKLY ASSESSMENT AND PLANNING FORM

LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)

Physical Therapist Assistant (PTA) Program

**Student:** \_\_\_\_\_ **Experience Week:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*The weekly planning form is a useful feedback and instructional tool, to assist both the Clinical Instructor and the PTA student in assessing current performance, as well as identifying opportunities for additional educational and clinical opportunities. When completing this form, please consider the five (5) performance dimensions of the CPI: supervision/guidance required, quality of care provided, complexity of tasks/environment, consistency of performance, and efficiency of performance.*

Learning opportunities (e.g., patient care conference, in-servicing, observation) and clinical experiences offered:

Areas of improvement and/or demonstrated competence for this week:

Areas for future improvement and growth:

Mutually established goals/action plan for the week of: \_\_\_\_\_

CI Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_

***Clinical Site Visit Record***  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

<b>Student Name:</b>	<b>Date:</b>
<b>Facility:</b>	<b>Clinical Instructor:</b>
<b>Clinical Practicum (circle one):</b> I II	<b>Area of Practice:</b>
<b>In which week of the clinical experience does this visit fall?</b>	
<b>DISCUSSION WITH CLINICAL INSTRUCTOR</b>	
<b>Effective skills</b> (professionalism, initiation, acceptance of feedback, time management, confidence, motivation, etc)	
<b>Verbal and non-verbal communication</b> (with patients/families, staff, in meetings, delegation)	
<b>Documentation</b> (content, accuracy, proficiency, timeliness)	
<b>Level of independence with Plan of Care Development based on PT's evaluation and goals:</b>	<b>Level of independence with treatments and progression of treatments:</b>
<b>Caseload</b> (what percentage of the CI's caseload is the student able to handle effectively)	
<b>Goals for the remainder of the clinical</b>	

<b>Academic preparation</b> (lacking, adequate, exceptional)	<b>Suggestions for faculty</b>
<b>Specific learning opportunities for students at this facility</b> (wound care, surgery observation, education, interdisciplinary meetings, physician communication, specialty techniques, specialty equipment)	
<b>Questions for ACCE or follow up needed</b>	
<b>DISCUSSION WITH STUDENT</b>	
<b>Overall impression of learning experience</b>	
<b>Learning opportunities that have made this clinical memorable, if any</b>	
<b>Performance of Clinical Instructor/Level of Supervision of PT and/or PTA</b>	

**Has the student been given the appropriate amount of items such as autonomy, instruction, feedback, facility orientation, etc (please provide details if able)**

**Overall comments/concerns**

**Additional comments from college representative**

**College Representative:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **COMPREHENSIVE CURRICULUM SPREADSHEET**

### **LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**

#### **Physical Therapist Assistant (PTA) Program**

	<b>Introduced</b>	<b>Intermediary Knowledge</b>	<b>Mastery Knowledge</b>
<b>General Education 3.3.1</b>			
Basic Sciences (biological, physical, physiological, anatomic principles)			Prerequisites
Applied physical therapy science			All PTAT Courses
<b>Technical Education 3.3.2</b>			
To prepare the entry-level PTA to work under the direction and supervision of the PT	1600	2970	2971
Communicates verbally and non-verbally with the patient, the PT, health care delivery personnel, and others in an effective and capable manner. (3.3.2.1)	1600	2970	2971
Recognizes individual and cultural differences and response appropriately in all aspects of physical therapy services (3.3.2.2)	1600	2970	2971
Exhibits conduct that reflects a commitment to meet the expectations of member of society receiving health care services (3.3.2.3)	1600	2970	2971
Exhibits conduct that reflects a commitment to meet the expectations of members of the profession of physical therapy (3.3.2.4)	1600	2970	2971
Exhibits conduct that reflects practice standards that are legal, ethical and safe. (3.3.2.5)	1600	2970	2971
Communicates an understanding of the plan of care developed by the physical therapist to achieve short and long term goals and intended outcomes (3.3.2.6)	1600	2970	2971
Demonstrates	1650, 1720	1660, 1800, 1820, 1840,	2971

competence in implementing selected components of interventions identified in the plan of care established by the PT (3.3.2.7)		2970	
<b>FUNCTIONAL TRAINING</b>			
Activities of Daily Living	1600	1650, 1720	1650
Assistive/Adaptive Devices	1600	1650	1650
Body Mechanics	1600	1650	1650
Developmental Activities	1600	1720	1800
Gait and Locomotion Training	1600	1650, 1720	1820
Prosthetics and Orthotics			1820
Wheelchair management skills	1600	1650	1650, 1800
<b>INFECTION CONTROL PROCEDURES</b>			
Isolation techniques	1600	1650	1650
Sterile technique	1600	1650	1650
<b>MANUAL THERAPY TECHNIQUES</b>			
Passive range of motion	1600, 2030	1650, 1720	1820
Therapeutic massage			1650
<b>PHYSICAL AGENTS AND MECHANICAL AGENTS</b>			
Athermal agents	1650	1650	1660
Biofeedback	1650	1650	1660
Compression therapies			1650
Cryotherapy	1650	1650	1660
Electrotherapeutic agents			1660
Hydrotherapy	1650	1650	1660
Superficial and deep thermal agents	1650	1650	1660
Traction	1660	1660	1660
<b>THERAPEUTIC EXERCISE</b>			
Aerobic conditioning	1600	1720, 1820	1740
Balance and coordination training	1600	1720	1820, 1840
Breathing exercises and coughing techniques	1720	1720	1740
Conditioning and reconditioning	1720	1720	1820, 1740
Postural awareness training	2030	1720	1820, 1740
Range of motion exercises	1600, 2030	1650, 1720	1820
Stretching exercises	1600	1720	1820
Strengthening exercises	1600	1720	1820
<b>Wound Management</b>			

Application and removal of dressing or agents	1600	1650	1840
Identification of precautions for dressing removal	1600	1650	1840
Demonstrates competency in performing components of data collection skill essential for carrying out the plan of care (3.3.2.8)			
<b>AEROBIC CAPACITY AND ENDURANCE</b>			
Measures standard vital signs	1600	1650	1740
Recognizes and monitors responses to positional changes and activities	1720	1740	1740, 1840
Observes and monitors thoracoabdominal movements and breathing patterns with activity	2030	1740	1740
<b>ANTHROPOMETRICAL CHARACTERISTICS</b>			
Measures height, weight, length and girth			1650
<b>AROUSAL, MENTATION, AND COGNITION</b>			
Recognizes changes in the direction and magnitude of patient's state of arousal, mentation and cognition	1720	1650	1800
<b>ASSISTIVE, ADAPTIVE, ORTHOTIC, PROTECTIVE, SUPPORTIVE, AND PROSTHETIC DEVICES</b>			
Identifies the individual's and caregivers ability to care for the device	1600	1650	1650, 1800, 1820
Recognizes changes in skin condition while using devices and equipment		1650	1800
Recognizes safety factors while using the device	1600	1650	1650
<b>GAIT, LOCOMOTION, AND BALANCE</b>			
Describes the safety, status, and progression of patients while engaged in gait, locomotion, balance, wheelchair management		1650, 1720	1800, 1820



and mobility			
<b>INTEGUMENTARY INTEGRITY</b>			
Recognizes absent or altered sensation	1650	1660	1800
Recognizes normal and abnormal integumentary changes	1650	1660	1840
Recognizes activities, positioning, and postures that aggravate or relieve pain or altered sensations, or that can produce associated skin trauma	1600	1650	1800
Recognizes viable versus nonviable tissue			1840
<b>JOINT INTEGRITY AND MOBILITY</b>			
Recognizes normal and abnormal joint movement	2030	1720	1820
<b>MUSCLE PERFORMANCE</b>			
Measures muscle strength by manual muscle testing	2030	1720	1820
Observes the presence of absence of muscle mass	2030	1720	1820
Recognizes normal and abnormal muscle length	2030	1720	1820
Recognizes changes in muscle tone		1820	1800
<b>NEUROMOTOR DEVELOPMENT</b>			
Recognizes gross motor milestones	Lifespan	1840	1800
Recognizes fine motor milestones	Lifespan	1840	1800
Recognizes right and equilibrium reactions		1720	1800, 1840
<b>PAIN</b>			
Administers standardized questionnaires, graphs, behavioral scales, or visual analog scales for pain	1650	1820	1840
Recognized activities, positioning, and postures that aggravate or relieve pain or altered sensations	1720	1820	1840
<b>POSTURE</b>			
Describes resting posture in any position	2030	1720	1820
Recognizes alignment of trunk and extremities at	2030	1720	1820

rest and during activities			
<b>RANGE OF MOTION</b>			
Measures functional range of motion	2030	1720	1820
Measure range of motion using a goniometer			2030
<b>SELF-CARE AND HOME MANAGEMENT AND COMMUNITY OR WORK REINTEGRATION</b>			
Inspects the physical environment and measures physical space			1650
Recognizes safety and barriers in home, community and work environments			1650
Recognizes level of functional status		1650	1800, 1820
Administers standardized questionnaires to patients and others		1650	1800, 1820
<b>VENTILATION, RESPIRATION, AND CIRCULATION EXAMINATION</b>			
Recognizes cyanosis	1720		1740
Recognizes activities that aggravate or relieve edema, pain, dyspnea, or other symptoms	1650	1720	1740, 1820
Describes chest wall expansion and excursion		1720	1740
Describes cough and sputum characteristics		1720	1740
Adjusts interventions within the plan of care established by the physical therapist in response to patient clinical indications and reports this to the supervision physical therapist (3.3.2.9)	1600	1800, 1820, 2970	2971
Recognized when intervention should not be provided due to changes in the patient's status and reports this to the supervising physical therapist (3.3.2.10)	1600	1800, 1820	2970, 2971

Reports any changes in the patient's status to the supervising physical therapist (3.3.2.11)	1600	2970	2971
Recognizes when the direction to perform an intervention is beyond that which is appropriate for a physical therapist assistant and initiates clarification with the physical therapist (3.3.2.12)	1600	2970	2971
Participates in educating patients and caregivers as directed by the supervising physical therapist (3.3.2.13)	1720	1820, 2970	2971
Provides patient-related instruction to patients, family members, and caregivers to achieve patient outcomes based on the plan of care established by the physical therapist (3.3.2.14)	1720	1820, 2970	2971
Takes appropriate action in an emergency situation (3.3.2.15)	1600	1650, 2970	2971
Completes thorough, accurate, logical, concise, timely, and legible documentation that follows guidelines and specific documentation formats required by state practice acts, the practice setting, and other regulatory agencies (3.3.2.16)	1600	2970	2971
Participates in discharge planning and follow-up as directed by the supervising physical therapist (3.3.2.17)	1600	2970	2971
Reads and understands the health care literature (3.3.2.18)	1600	1820	2970, 2971
Under the direction and supervision of the physical therapist, instructs other members of the	1600	2970	2971

healthcare team using established techniques, programs, and instruction materials commensurate with the learning characteristics of the audience (3.3.2.19)			
Educates others about the role of the physical therapist assistant (3.3.2.20)	1600	2970	2971
Interacts with other members of the health care team in patient-care and non-patient care activities (3.3.2.21)	1600	2970	2971
Provides accurate and timely information for billing and reimbursement purposes (3.3.2.22)	1600	2970	2971
Describes aspects of organizational planning and operation of the physical therapy service (3.3.2.23)	1600	2970	2971
Participates in performance improvement activities (quality assurance) (3.3.2.24)	1600	2970	2971
Demonstrates a commitment to meeting the needs of the patients and consumers (3.3.2.25)	1600	2970	2971
Demonstrates an awareness of social responsibility, citizenship, and advocacy, including participation in community and service organizations and activities (3.3.2.26)	1600	2970	2971

Identifies career development and lifelong learning opportunities (3.3.2.27)	1600, 1720, 2030 (Service Learning)	2970	2971
Recognizes the role of the physical therapist assistant in the clinical education of physical therapist assistant students (3.3.2.28)	1600	2970	2971

**PTA Program Master Skills List**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

<b>Therapeutic Procedures I</b>	<b>Therapeutic Procedures II</b>	<b>Functional Kinesiology</b>	<b>Therapeutic Exercise</b>
Hand-washing, hand rubbing, standard precautions, transmission based isolation, and sterile techniques*	Neuromuscular Electrical Stimulation (NMES) including electrode placement, high volt, TENS, interferential*	Goniometry including UE, LE, neck/trunk*	Anthropometrical measurements
Vital Signs including pulse rate, respiratory rate, blood pressure, body temperature, and pulse oximetry*	Ultrasound* and phonophoresis	Palpation including bony prominences, ankle/foot, knee, hip, spine (cervical, thoracic, and lumbar), shoulder, elbow, wrist/hand*	Mechanical and manual resistive techniques
Body mechanics (teaching of)	Iontophoresis	Manual Muscle Testing (MMT) including UE, LE, neck/trunk*	Plyometrics
Transfers including sit-stand transfer, pivot transfer bed to chair, sliding board transfer, Hoyer lift/mechanical transfers*	Traction including cervical and lumbar*	TMJ	Aquatic Therapy/Hydrotherapy
Bed positioning and draping including bed mobility*	Biofeedback	Posture (normal)*	Geriatric exercise
Assistive device fitting and gait training (stairs and level surfaces) *	Infrared lamp (theory only)	PROM, AAROM, AROM including ankle/foot, knee, hip, spine (cervical, thoracic, and lumbar), shoulder, elbow, wrist/hand	Balance assessment and balance/coordination exercises
Wheelchair management including components, measurement, and mobility*	Short Wave Diathermy*	Joint mobility including normal and abnormal movements	Therapeutic ball exercise
Edema management including girth measurements and wrapping for edema control*	Laser		Posture including assessment, instruction, and spinal stabilization exercises
Circulation techniques*	Ultraviolet (theory only)		Body mechanics for work tasks
Intermittent compression*	Cryotherapy*		Workstation analysis and ergonomics
Soft Tissue Mobilization and therapeutic massage including cervical, back, UE, LE*	Moist heat including paraffin*		Open/closed chain exercise
Adaptive equipment	Dry heat		PNF diagonals*
ADL training and IADLs	Contrast bath		Reciprocal inhibition
CPR			Home Exercise Program (HEP) Design and Instruction
Home and Environmental Assessments			Progressive Resistance Exercise
Self-care, home, and community management			Strengthening exercise including isotonic and isometric, concentric, and eccentric
			Circulation exercises
			Analysis of treatment of gait and gait abnormalities
			Peripheral joint mobilization including Grade I-IV *

<b>Neurology</b>	<b>Orthopedics</b>	<b>Cardiac Rehab</b>	<b>Specialty Rehab</b>
Motor learning techniques	Orthotics and prosthetics	Assessment and treatment of circulation and ventilation	Wound care – without sharps debridement
Developmental and functional movement analysis	Supportive and protective devices including taping and dynamic splints	Aerobic/anaerobic activities	Sterile dressing change including dressing application and removal*
Inhibition techniques	Special Tests and assessment tools specific to ortho rehab*	Relaxation strategies	Topical agents
Transfers and position specific to neuro rehab diagnoses*	Casting (theory)	Cardiovascular endurance exercises	Vestibular and balance assessment and rehabilitation including balance exercises and fall prevention
Gait training specific to developmental and neuro rehab diagnoses	Connective tissue stretching	Cardiac rehab-phases	Pediatric assessment and exercises
Cognitive Assessment	Muscle stretching, active and passive	Fitness/wellness programs	Women’s health
Coma stimulation	Post-surgical exercise programming and protocols	Breathing exercises*	Geriatrics
Pediatric exercises	Protective devices	Coughing techniques*	Special tests and assessment tools for specialty areas
Basic NDT techniques*	Post-amputation rehab including residual limb wrapping*	Supplemental oxygen	Lymphedema
Sensation & Deep Tendon Reflex (DTR) testing*	Dynamic splints	Special tests (theory only)	Pain assessment and management including chronic pain
Spinal nerve reflex testing*	PROM using CPM	Postural drainage*	
Dermatomes		Chest percussion and vibration*	
Myotomes		Cardiovascular assessment and special tests	
Adaptive devices		Energy conservation	
Special tests and assessment tools specific to neuro rehab			
Developmental milestones including gross and fine movement			
Righting and equilibrium reactions			

\*Denotes skills a student has demonstrated competence in through practical examination: skill check or competency check.

\*\*Clinical Instructors who teach skills not covered in the program are responsible for assessing the student’s competence with the skill prior to the patient treatment.

# Appendix C: Clinical Practice Standards



# Standards of Practice for Physical Therapy



HOD S06-20-35-29 [Amended: HOD S06-19-29-50; HOD S06-13-22-15; HOD S06-10-09-06; HOD S06-03-09-10; HOD 06-03-09-10; HOD 06-99-18-22; HOD 06-96-16-31; HOD 06-91-21-25; HOD 06-85-30-56; Initial: HOD 06-80-04-04; HOD 06-80-03-03] [Standard]

## Preamble

The physical therapy profession is committed to transforming society by optimizing movement to improve the human experience. Physical therapists pursue excellence in a professional scope of practice that includes optimizing physical function, health, quality of life, and well-being across the lifespan, and they work to improve population health in the communities where they practice. The American Physical Therapy Association (APTA) attests to this commitment by adopting and promoting the following *Standards of Practice for Physical Therapy*. These standards are the profession's statement of conditions and performances that are essential for provision of high-quality professional service to society, and they provide a foundation for assessment of physical therapist practice.

## I. Ethical/Legal Considerations

### A. Ethical Considerations

The physical therapist practices according to the APTA *Code of Ethics for the Physical Therapist*.

The physical therapist assistant complies with the APTA *Standards of Ethical Conduct for the Physical Therapist Assistant*.

### B. Legal Considerations

The physical therapist complies with all the legal requirements of jurisdictions regulating the practice of physical therapy.

The physical therapist assistant complies with all the legal requirements of jurisdictions regulating the work of the physical therapist assistant.

## II. Administration of the Physical Therapy Service

### A. Statement of Mission, Purposes, Goals, Objectives, and Scope of Services

The physical therapy service has a statement of mission, purposes, goals, objectives, and scope of services that is reviewed annually and reflects the needs and interests of the patients and clients served, the physical therapy personnel affiliated with the service, and the community.

### B. Organizational Plan

The physical therapy service has a written organizational plan.

The organizational plan:

- Describes relationships among components within the physical therapy service and, where the service is part of a larger organization, between the service and the other components of that organization;
- Ensures that a physical therapist provides the clinical direction of physical therapist services;
- Defines supervisory structures within the service; and
- Reflects current personnel functions.

### C. Policies and Procedures

The physical therapy service has written policies and procedures that are reviewed regularly and revised as necessary; reflect the operation, mission, purposes, goals, objectives, and scope of the

service; are legally compliant with federal and state law; and are guided by the association's positions, standards, guidelines, policies, and procedures.

D. Administration

Guided and informed by APTA positions, standards, guidelines, policies, and procedures, the physical therapist responsible for the clinical direction of physical therapist services ensures:

- Compliance with local, state, and federal requirements;
- Services are provided in accordance with established policies and procedures;
- The process for assignment and reassignment of physical therapist staff (handoff communication) supports individual physical therapist responsibility to their patients and clients and meets the needs of the patients and clients; and
- Continuing competence of physical therapists and physical therapist assistants by providing training consistent with their respective roles.

E. Fiscal Management

The physical therapist responsible for physical therapist services, in consultation with physical therapy staff and appropriate administrative personnel, participates in the planning for and allocation of resources. Fiscal planning and management of the service is based on sound accounting principles.

The fiscal management plan:

- Includes a budget that provides for optimal use of resources;
- Ensures accurate recording and reporting of financial information;
- Allows for cost-effective utilization of resources;
- Follows billing processes that are consistent with federal regulations and payer policies, charge reasonable fees for physical therapist services, and encourage physical therapists to be knowledgeable of service fee schedules, contractual relationships, and payment methodologies; and
- Considers options for providing *pro bono* services.

F. Improvement of Quality of Care and Performance

The physical therapy service has a written plan for continuous improvement of quality of care and performance of services.

The improvement plan:

- Provides evidence of ongoing review and evaluation of services; and
- Provides a mechanism for documenting improvement in quality of care and performance and is consistent with requirements of external agencies, as applicable.

G. Staffing

The physical therapy personnel affiliated with the physical therapy service have demonstrated competence, and are sufficient to achieve the mission, purposes, goals, objectives, and scope of the service.

The physical therapy service:

- Ensures that the level of expertise within the service is appropriate to the needs of the patients and clients served, and consistent with the scope of the services provided; and
- Provides appropriate professional and support personnel to meet the needs of the patient and client population.

H. Staff Development

The physical therapy service has a written plan that provides for appropriate and ongoing staff development.



The staff development plan:

- Includes strategies for lifelong learning and professional and career development that include self-assessment, individual goal setting, and organizational needs;
- Includes mechanisms to foster mentorship activities;
- Includes information regarding evidence-based practice and relevant clinical practice guidelines; and
- Includes education regarding use of clinical practice guidelines, reflective reasoning, clinical reasoning, metacognition, and the value of mentoring.

I. Physical Setting

The physical setting, where applicable, is designed to provide a safe and accessible environment that facilitates fulfillment of the mission, purposes, goals, objectives, and scope of the physical therapy service. It is appropriate for the number and type of patients and clients served. The equipment is safe and sufficient to achieve the purposes and goals of the physical therapy service.

J. Coordination

Physical therapy personnel collaborate with all health services providers and with patients, clients, caregivers, and others as appropriate; and use a team and person-centered approach in coordinating and providing physical therapist services.

### III. Patient and Client Management

Physical therapist practice incorporates all components of evidence-based practice, integrating best available research evidence, clinical expertise, and an individual's values and circumstances to make decisions regarding services for patients and clients, practice management, and health policy.

A. Physical Therapist of Record

All patients and clients receiving physical therapist services shall have a physical therapist of record who is responsible for patient and client management.

B. Patient and Client Collaboration

Within the patient and client management process, the physical therapist, the individual, and their caregiver(s) establish and maintain an ongoing collaborative process of decision-making that exists throughout the provision of services and can extend over the lifespan.

C. Initial Examination/Evaluation/Diagnosis/Prognosis

The physical therapist performs an initial examination and evaluation to establish a diagnosis and prognosis prior to intervention. Wellness and prevention encounters may occur without the presence of disease, illness, impairments, activity limitations, or participation restrictions. Physical therapist services include the use of assessments to identify the presence of risk factors, and cognitive and environmental barriers and opportunities that may be targets for health promotion activities.

The physical therapist examination:

- Is documented and dated by the physical therapist who performed it;
- Identifies the physical therapy and as indicated other health needs of the patient or client;
- Performs or orders appropriate diagnostic and or physiologic procedures, tests, and measures;
- Produces data that are sufficient to allow evaluation, diagnosis, prognosis, and the establishment of a plan of care;
- Refers for additional services to meet the needs of the patient or client; and
- Includes, when appropriate and available, results from diagnostic and physiologic testing.

D. Management Plan and Plan of Care

The management plan is the framework of physical therapist services provided to patients or clients, groups, or populations. The management plan is based on best available evidence and may include recommendations and goals developed by other entities. When indicated, the management plan

need for ongoing physical therapist services. A management plan is indicated when prevention, health promotion, and wellness services are provided in groups or populations.

The management plan includes a plan of care when physical therapist services are indicated to address a health condition. The plan of care is based on the best available evidence and consists of statements that specify the goals of the plan, predicted level of optimal improvement, interventions to be used, proposed duration and frequency of the interventions that are required to reach the goals and outcomes, and plans as appropriate for referral, consultation, or co-management with other providers.

A plan of care is not needed when the physical therapist is being consulted for expert opinion or advice, or for diagnostic or physiologic testing. In such situations the physical therapist documents the reason(s) that the plan of care was not created.

The physical therapist involves the patient or client and appropriate others in the development of the management plan and plan of care.

#### E. Intervention

The physical therapist provides or directs and supervises intervention consistent with results of the examination, evaluation, diagnosis, prognosis, and plan of care. Intervention is focused on meeting the goals of the plan of care and optimizing functional performance, emphasizes patient or client education, and promotes proactive, wellness-oriented lifestyles. It may be provided in an episode of care, in a single encounter such as for wellness and/or prevention, in specialty consultation, or as follow-up after an episode of care. Services also may be provided intermittently over longer periods of time in cases of managing patients or clients with chronic conditions, creating a lifelong patient or client relationship with the physical therapist.

An *episode of care* is the managed care provided for a specific health condition or conditions during a set time period. The episode can be for a short period, or on a continual basis, or it may consist of a series of intervals of service.

The intervention:

- Is provided at a level that is consistent with best available evidence and current physical therapist practice;
- Is in direct alignment with the patient's or client's desired outcomes and goals;
- Is altered in accordance with changes in response or status; and
- Is provided in such a way that directed and supervised responsibilities are commensurate with the qualifications and legal limitations of the physical therapist assistant.

#### F. Lifelong and Long-Term Patient and Client Relationships

Physical therapists foster and encourage lifelong and long-term patient and client relationships. Where feasible, physical therapists, as entry-point providers, provide services within the community that are available to patients or clients over a lifetime. Efforts are made to address movement system disorders and to maintain optimal health and wellness through physical therapist intervention as needed.

Lifelong and long-term patient and client relationships:

- Foster continuity of service over patients' and clients' lifespans by addressing changes in the movement system, health status, or disabilities as they arise;
- Empower patients and clients to advocate for their own health;
- Empower the physical therapist to advocate on behalf of patients and clients within the health services system; and
- Foster identification by patients and clients that they have their own physical therapist among various health professionals.

#### G. Reexamination

The physical therapist reexamines the patient or client as necessary to evaluate progress or change in status. Reexamination may occur during an episode of care, during follow-up encounters after an



episode of care, or periodically in the case of the management of patients and clients with chronic conditions. During reexamination the physical therapist modifies the management plan accordingly and refers the patient or client to another health services provider for consultation as necessary.

#### H. Conclusion of an Episode of Care

The physical therapist concludes an episode of care when the goals and outcomes for the patient or client have been achieved, when the patient or client is unable to further progress toward goals, or when the physical therapist determines that the patient or client will no longer benefit from physical therapy. Conclusion of a single episode of care may not, in many settings or circumstances, signal the end of a patient or client provider relationship.

#### I. Communication/Coordination/Documentation

The physical therapist communicates, coordinates, and documents all aspects of patient and client management including the results of the initial examination and evaluation, diagnosis, prognosis, plan of care, intervention, responses to intervention, changes in patient or client status relative to the intervention, reexamination, and episode of care summary. The physical therapist of record is responsible for "handoff" communication and follows "handoff" procedures developed by the physical therapy service to the next physical therapist of record. When possible, patient records and data are recorded using a method that allows for collective analysis. The physical therapist ensures that protected health information is maintained and transmitted following legally required practices.

#### J. Co-management/Consultation/Referral

At any point in an episode of care, or in a long-term or lifelong physical therapist-patient or client relationship, a physical therapist may engage in 1 or more of the following actions related to involvement of other clinicians. Other clinicians may be those in other professions and also may be physical therapist colleagues, some with advanced practice credentials or board certification in a clinical specialty.

- Co-management: The physical therapist shares management responsibility for the individual with another clinician(s).
- Consultation: Upon the request of another clinician(s), the physical therapist renders professional expert opinion or advice by applying highly specialized knowledge and skills to aid in the management of an individual's health condition. The physical therapist documents the findings and any recommendations of the consultation as part of the management plan. When a physical therapist is consulted for the purposes of diagnostic or physiologic testing, the physical therapist determines the need for and performs the testing in accordance with best available evidence. The results of the testing are documented and communicated to the referring clinician(s). Unless indicated, the consultant physical therapist does not assume management responsibility of the individual. The physical therapist also seeks consultative services from other clinicians when situations exist that are beyond the expertise or available resources of the physical therapist. In these cases, the physical therapist shares responsibility for the individual with the consultant.
- Referral: The physical therapist may:
  - Refer an individual to another provider and either conclude care or not develop a plan of care;
  - Refer an individual to another provider and continue the management plan at the same time;
  - Receive an individual referred from another provider who chooses not to continue services for the individual;
  - Receive an individual from another provider who continues to provide services to the individual (if the physical therapy episode of care is ongoing, the physical therapist shares responsibility for the individual); or
  - Receive an individual from another provider for diagnostic and or physiologic testing.

#### IV. Education

The physical therapist is responsible for individual professional development. The physical therapist assistant is responsible for individual career development.

- The physical therapist and the physical therapist assistant, under the direction and supervision of the physical therapist, participate in the education of peers, other health services providers, and students.

- The physical therapist educates and provides consultation to consumers and the general public regarding the purposes and benefits of physical therapy.
- The physical therapist educates and provides consultation to consumers and the general public regarding the roles of the physical therapist and the physical therapist assistant.

#### V. Advocacy

The physical therapist and the physical therapist assistant will participate in advocacy for patients' and clients' rights with respect to:

- Physical therapy being an entry-point for patients into the health services system;
- Physical therapists serving in primary care roles;
- Appropriate access to needed health services including physical therapist services; and
- Communities creating safe and accessible built environments, where population health is a priority.

#### VI. Research

The physical therapist applies research findings to practice and encourages, participates in, and promotes activities that establish the outcomes of patient and client management provided by the physical therapist.

The physical therapist:

- Remains current in their knowledge of literature related to practice;
- Protects the rights of research subjects and maintains the integrity of research;
- Participates in research as appropriate to individual education, experience, and expertise;
- Educates physical therapists, physical therapist assistants, students, other health professionals, and the general public about new evidence from research and the outcomes of physical therapist practice; and
- Accesses and translates knowledge in support of clinical decisions, and uses literature based on its quality and appropriateness.

#### VII. Community Responsibility

The physical therapist demonstrates community responsibility by participating in community and community agency activities, educating the public, formulating public policy, and providing *pro bono* physical therapist services.

#### Explanation of Reference Numbers:

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**Last Updated:** 8/12/2020

**Contact:** [nationalgovernance@apta.org](mailto:nationalgovernance@apta.org)



# Standards of Ethical Conduct for the Physical Therapist Assistant



HOD S06-20-31-26 [Amended HOD S06-19-47-68; HOD S06-09-20-18; HOD S06-00-13-24; HOD 06-91-06-07; Initial HOD 06-82-04-08] [Standard]

## Preamble

The Standards of Ethical Conduct for the Physical Therapist Assistant (Standards of Ethical Conduct) delineate the ethical obligations of all physical therapist assistants as determined by the House of Delegates of the American Physical Therapy Association (APTA). The Standards of Ethical Conduct provide a foundation for conduct to which all physical therapist assistants shall adhere. Physical therapist assistants are guided by a set of core values (accountability, altruism, collaboration, compassion and caring, duty, excellence, integrity, and social responsibility). Throughout the document the primary core values that support specific principles are indicated in parentheses. Fundamental to the Standards of Ethical Conduct is the special obligation of physical therapist assistants to enable patients and clients to achieve greater independence, health and wellness, and enhanced quality of life.

No document that delineates ethical standards can address every situation. Physical therapist assistants are encouraged to seek additional advice or consultation in instances where the guidance of the Standards of Ethical Conduct may not be definitive. The APTA Guide for Conduct of the Physical Therapist Assistant and Core Values for the Physical Therapist and Physical Therapist Assistant provide additional guidance.

## Standards

### **Standard #1: Physical therapist assistants shall respect the inherent dignity, and rights, of all individuals.**

(Core Values: Compassion and Caring, Integrity)

- 1A. Physical therapist assistants shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.
- 1B. Physical therapist assistants shall recognize their personal biases and shall not discriminate against others in the provision of physical therapist services.

### **Standard #2: Physical therapist assistants shall be trustworthy and compassionate in addressing the rights and needs of patients and clients.**

(Core Values: Altruism, Collaboration, Compassion and Caring, Duty)

- 2A. Physical therapist assistants shall act in the best interests of patients and clients over the interests of the physical therapist assistant.
- 2B. Physical therapist assistants shall provide physical therapist interventions with compassionate and caring behaviors that incorporate the individual and cultural differences of patients and clients.
- 2C. Physical therapist assistants shall provide patients and clients with information regarding the interventions they provide.
- 2D. Physical therapist assistants shall protect confidential patient and client information and, in collaboration with the physical therapist, may disclose confidential information to appropriate authorities only when allowed or as required by law.

### **Standard #3: Physical therapist assistants shall make sound decisions in collaboration with the physical therapist and within the boundaries established by laws and regulations.**

(Core Values: Collaboration, Duty, Excellence, Integrity)

- 3A. Physical therapist assistants shall make objective decisions in the patient's or client's best interest in all practice settings.
- 3B. Physical therapist assistants shall be guided by information about best practice regarding physical therapist interventions.

- 3C. Physical therapist assistants shall make decisions based upon their level of competence and consistent with patient and client values.
- 3D. Physical therapist assistants shall not engage in conflicts of interest that interfere with making sound decisions.
- 3E. Physical therapist assistants shall provide physical therapist services under the direction and supervision of a physical therapist and shall communicate with the physical therapist when patient or client status requires modifications to the established plan of care.

**Standard #4: Physical therapist assistants shall demonstrate integrity in their relationships with patients and clients, families, colleagues, students, research participants other health care providers, employers, payers, and the public.**

(Core Value: Integrity)

- 4A. Physical therapist assistants shall provide truthful, accurate, and relevant information and shall not make misleading representations.
- 4B. Physical therapist assistants shall not exploit persons over whom they have supervisory, evaluative or other authority (eg, patients and clients, students, supervisees, research participants, or employees).
- 4C. Physical therapist assistants shall not engage in any sexual relationship with any of their patients and clients, supervisees, or students.
- 4D. Physical therapist assistants shall not harass anyone verbally, physically, emotionally, or sexually.
- 4E. Physical therapist assistants shall discourage misconduct by physical therapists, physical therapist assistants, and other health care professionals and, when appropriate, report illegal or unethical acts, including verbal, physical, emotional, or sexual harassment, to an appropriate authority with jurisdiction over the conduct.
- 4F. Physical therapist assistants shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

**Standard #5: Physical therapist assistants shall fulfill their legal and ethical obligations.**

(Core Values: Accountability, Duty, Social Responsibility)

- 5A. Physical therapist assistants shall comply with applicable local, state, and federal laws and regulations.
- 5B. Physical therapist assistants shall support the supervisory role of the physical therapist to ensure quality care and promote patient and client safety.
- 5C. Physical therapist assistants involved in research shall abide by accepted standards governing protection of research participants.
- 5D. Physical therapist assistants shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.
- 5E. Physical therapist assistants who have knowledge that a colleague is unable to perform their professional responsibilities with reasonable skill and safety shall report this information to the appropriate authority.

**Standard #6: Physical therapist assistants shall enhance their competence through the lifelong acquisition and refinement of knowledge, skills, and abilities.**

(Core Value: Excellence)

- 6A. Physical therapist assistants shall achieve and maintain clinical competence.
- 6B. Physical therapist assistants shall engage in lifelong learning consistent with changes in their roles and responsibilities and advances in the practice of physical therapy.
- 6C. Physical therapist assistants shall support practice environments that support career development and lifelong learning.

**Standard #7: Physical therapist assistants shall support organizational behaviors and business practices that benefit patients and clients and society.**

(Core Values: Integrity, Accountability)

- 7A. Physical therapist assistants shall promote work environments that support ethical and accountable decision-making.
- 7B. Physical therapist assistants shall not accept gifts or other considerations that influence or give an appearance of influencing their decisions.





- 7C. Physical therapist assistants shall fully disclose any financial interest they have in products or services that they recommend to patients and clients.
- 7D. Physical therapist assistants shall ensure that documentation for their interventions accurately reflects the nature and extent of the services provided.
- 7E. Physical therapist assistants shall refrain from employment arrangements, or other arrangements, that prevent physical therapist assistants from fulfilling ethical obligations to patients and clients

**Standard #8: Physical therapist assistants shall participate in efforts to meet the health needs of people locally, nationally, or globally.**

(Core Value: Social Responsibility)

- 8A. Physical therapist assistants shall support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.
- 8B. Physical therapist assistants shall advocate for people with impairments, activity limitations, participation restrictions, and disabilities in order to promote their participation in community and society.
- 8C. Physical therapist assistants shall be responsible stewards of health care resources by collaborating with physical therapists in order to avoid overutilization or underutilization of physical therapist services.
- 8D. Physical therapist assistants shall educate members of the public about the benefits of physical therapy.

**Explanation of Reference Numbers:**

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**Last Updated:** 8/12/2020

**Contact:** [nationalgovernance@apta.org](mailto:nationalgovernance@apta.org)

# Core Values for the Physical Therapist and Physical Therapist Assistant



**HOD P09-21-21-09** [Amended: HOD P06-19-48-55; HOD P06-18-25-33; Initial HOD P05-07-19-19] [Previously Titled: Core Values: for the Physical Therapist] [Position]

The core values guide the behaviors of physical therapists and physical therapist assistants to provide the highest quality of physical therapist services. These values imbue the scope of physical therapist and physical therapist assistant activities. The core values retain the physical therapist as the person ultimately responsible for providing safe, accessible, cost-effective, and evidence-based services; and the physical therapist assistant as the only individual who assists the physical therapist in practice, working under the direction and supervision of the physical therapist. The core values are defined as follows:

- **Accountability**  
Accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist and physical therapist assistant including self-regulation and other behaviors that positively influence patient and client outcomes, the profession, and the health needs of society.
- **Altruism**  
Altruism is the primary regard for or devotion to the interest of patients and clients, thus assuming the responsibility of placing the needs of patients and clients ahead of the physical therapist's or physical therapist assistant's self-interest.
- **Collaboration**  
Collaboration is working together with patients and clients, families, communities, and professionals in health and other fields to achieve shared goals. Collaboration within the physical therapist-physical therapist assistant team is working together, within each partner's respective role, to achieve optimal physical therapist services and outcomes for patients and clients.
- **Compassion and Caring**  
Compassion is the desire to identify with or sense something of another's experience, a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.
- **Duty**  
Duty is the commitment to meeting one's obligations to provide effective physical therapist services to patients and clients, to serve the profession, and to positively influence the health of society.
- **Excellence**  
Excellence in the provision of physical therapist services occurs when the physical therapist and physical therapist assistant consistently use current knowledge and skills while understanding personal limits, integrate the patient or client perspective, embrace advancement, and challenge mediocrity.
- **Inclusion**  
Inclusion occurs when the physical therapist and physical therapist assistant create a welcoming and equitable environment for all. Physical therapists and physical therapist assistants are inclusive when they commit to providing a safe space, elevating diverse and minority voices, acknowledging personal biases that may impact patient care, and taking a position of anti-discrimination.
- **Integrity**  
Integrity is steadfast adherence to high ethical principles or standards, being truthful, ensuring fairness, following through on commitments, and verbalizing to others the rationale for actions.



- **Social Responsibility**

Social responsibility is the promotion of a mutual trust between the profession and the larger public that necessitates responding to societal needs for health and wellness.

**Explanation of Reference Numbers:**

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# **APTA GUIDELINES TO PROMOTE EXCELLENCE IN CLINICAL EDUCATION PARTNERSHIPS**



Last Updated:  
9/20/19 Contact:  
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## **GUIDELINES TO PROMOTE EXCELLENCE IN CLINICAL EDUCATION PARTNERSHIPS HOD G06-19-62-59** [Initial: HOD G06-93-27-52] [Previously Titled: Guidelines: Clinical Education Sites] [Guideline]

All physical therapy education programs, including their clinical partners, are accountable for meeting quality standards. The individual and collective efforts of academic programs and clinical partners shall strive to ensure excellence in education. The following guidelines describe aspects of the clinical partner site, the site coordinator of clinical education (SCCE), and the clinical instructor (CI) necessary to promote excellence in clinical education.

### **1. The Clinical Site**

- 1.1 Clinical sites engage in collaborative partnerships with academic programs that provide benefit to all stakeholders.
- 1.2 The philosophies of the clinical education site and of the provider of physical therapist services and clinical education are compatible with that of the academic institution.
- 1.3 Clinical education experiences for students are planned and resourced to meet specific objectives of the academic program, the provider of physical therapist services, and the individual student.
- 1.4 Physical therapy personnel provide services in a legal and ethical manner.
- 1.5 The clinical education site is committed to the principle of equal opportunity and affirmative action as required by federal legislation.
- 1.6 The clinical education site demonstrates administrative support of physical therapy clinical education.
- 1.7 The clinical education site has a variety of learning experiences available to students.
- 1.8 The clinical education site provides an active, stimulating environment appropriate to the learning needs of students.
- 1.9 The clinical education site identifies selected support services available to students.
- 1.10 The clinical education site defines and responsibilities of physical therapy personnel.
- 1.11 The clinical education site has requisite physical therapy personnel to provide an educational program for students.
- 1.12 The clinical education site selects a site coordinator of clinical education (SCCE) based on

specific criteria.

- 1.13 The clinical education site selects physical therapy CIs based on specific criteria as listed in Section 3. The Clinical Instructor.
  - 1.14 The clinical education site provides students access to the special expertise of its personnel.
  - 1.15 The clinical education site encourages clinical educator (CI and SCCE) training and development.
  - 1.16 The clinical education site supports active career development for its personnel.
  - 1.17 The clinical education site has an active and viable process of internal evaluation of its affairs and is receptive to procedures of review and audit approved by appropriate, relevant external agencies and consumers.
2. The Site Coordinator of Clinical Education
    - 2.1 The SCCE is encouraged to be a member of the American Physical Therapy Association (APTA), if eligible, and is active in professional activities.
    - 2.2 The SCCE has specific qualifications and is responsible for coordinating the assignments and activities of students at the clinical education site.
    - 2.3 The SCCE demonstrates effective communication and interpersonal skills.
    - 2.4 The SCCE demonstrates effective instructional skills.
    - 2.5 The SCCE demonstrates effective supervisory skills.
    - 2.6 The SCCE demonstrates effective performance evaluation skills.
    - 2.7 The SCCE demonstrates effective administrative and managerial skills.
    - 2.8 The SCCE seeks opportunities to engage in continuing education related to the roles of supervisor, educator, and/or manager.
3. The Clinical Instructor
    - 3.1 The CI is encouraged to be a member of APTA and is active in professional activities.
    - 3.2 The CI demonstrates clinical competence and legal and ethical behavior that meet or exceed the expectations of members of the physical therapy profession.
    - 3.3 The CI demonstrates effective communication skills.
    - 3.4 The CI demonstrates effective behavior, conduct, and skill in interpersonal relationships.
    - 3.5 The CI demonstrates effective instructional skills.
    - 3.6 The CI demonstrates effective supervisory skills.

3.7 The CI demonstrates effective performance evaluation skills.

3.8 The CI seeks opportunities to engage in continuing education related to the role of an educator.

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**GENERIC ABILITIES ASSESSMENT**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

**To complete this form:**

- 1 Read description and definitions of generic abilities – page 1.**
- 2 Become familiar with behavioral criteria for each level – pages 2 & 3.**
- 3 Assess student’s performance by highlighting appropriate characteristics on pages 2 and 3.**
- 4 Review the Generic Abilities Assessment with your student.**

**Generic Abilities\*\***

Generic abilities are attributes, characteristics or behaviors that are not explicitly part of the profession’s core of knowledge and technical skills but are nevertheless required for success in the profession. Ten generic abilities were identified through a study conducted at UW-Madison in 1991 – 92. The ten abilities and definitions developed are:

Generic Ability	Definition
1. Commitment to Learning	The ability to self-assess, self-corrects, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.
2. Interpersonal Skills	The ability to interact effectively with patients, families, colleagues, other health care professionals, and the community and to deal effectively with cultural and ethnic diversity issues.
3. Communication Skills	The ability to communicate effectively (i.e., speaking, body language, reading, writing, listening) for varied audiences and purposes.
4. Effective Use of Time and Resources	The ability to obtain the maximum benefit from a minimum investment of time and resources.
5. Use of Constructive Feedback	The ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.
6. Problem-Solving	The ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
7. Professionalism	The ability to exhibit appropriate professional conduct and to represent the profession effectively.
8. Responsibility	The ability to fulfill commitments and to be accountable for actions and outcomes.
9. Critical Thinking	The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
10. Stress Management	The ability to identify sources of stress and to develop effective coping behaviors.

\*\*Developed by the Physical Therapy Program, University of Wisconsin-Madison  
 May et al Journal of physical Therapy Education 9-1 Spring 1995

Instructions: **Highlight** or Underline all criteria that describe the student's performance.

<b>Generic Abilities</b>	<b><u>Beginning Level</u> Behavioral Criteria</b>	<b><u>Developing Level</u> Behavioral Criteria</b>	<b><u>Entry Level</u> Behavioral Criteria</b>
1. Commitment to learning	Identifies problems; formulates appropriate questions; identifies and locates appropriate resources; demonstrates a positive attitude (motivation) toward learning; offers own thoughts and ideas; identifies need for further information.	Prioritizes information needs; analyzes and subdivides large questions into components; seeks out professional literature; sets personal and professional goals; identifies own learning needs based on previous experiences; plans and presents an in-service, or research or case studies; welcomes and/or seeks new learning opportunities.	Applies new information and re-evaluates performance; accepts that there may be more than one answer to a problem; recognizes the need to and is able to verify solutions to problems; reads articles critically and understands the limits of application to professional practice; researches and studies areas where knowledge base is lacking.
2. Interpersonal Skills	Maintains professional demeanor in all clinical interactions; demonstrates interest in patients as individuals; respects cultural and personal differences of others; is non-judgmental about patients' lifestyles; communicates with others in a respectful, confident manner; respects personal space of patients and others; maintains confidentiality in all clinical interactions; demonstrates acceptance of limited knowledge and experience.	Recognizes impact of nonverbal communication and modifies accordingly; assumes responsibility for own actions; motivates others to achieve; establishes trust; seeks to gain knowledge and input from others; respects role of support staff.	Listens to patient but reflects back to original concern; works effectively with challenging patients; responds effectively to unexpected experiences; talks about difficult issues with sensitivity and objectivity; delegates to others as needed; approaches others to discuss differences in opinion; accommodates differences in learning styles.
3. Communication skills	Demonstrates understanding of basic English (verbal and written): uses correct grammar, accurate spelling and expression; writes legibly; recognizes impact of non-verbal communication: listens actively; maintains eye contact.	Utilizes non-verbal communication to augment verbal message; restates, reflects and clarifies message; collects necessary information from the patient interview.	Modifies communication (verbal and written) to meet needs of different audiences; presents verbal or written messages with logical organization and sequencing; maintains open and constructive communication; utilizes communication technology effectively; dictates clearly and concisely.
4. Effective use of time and resources	Focuses on tasks at hand without dwelling on past mistakes; recognizes own resource limitations; uses existing resources effectively; uses unscheduled time efficiently; completes assignments in timely fashion.	Sets up own schedule; coordinates schedule with others; demonstrates flexibility; plans ahead.	Sets priorities and reorganizes when needed; considers patient's goals in context of patient, clinic and third party resources; has ability to say "No"; performs multiple tasks simultaneously and delegates when appropriate; uses scheduled time with each patient efficiently.



Instructions: **Highlight** or Underline all criteria that describe the student's performance.

<b>Generic Abilities</b>	<b><u>Beginning Level</u> Behavioral Criteria</b>	<b><u>Developing Level</u> Behavioral Criteria</b>	<b><u>Entry Level</u> Behavioral Criteria</b>
5. Use of constructive feedback	Demonstrates active listening skills; actively seeks feedback and help; demonstrates a positive attitude toward feedback; critiques own performance; maintains two-way information.	Assesses own performance accurately; utilizes feedback when establishing pre-professional goals; provides constructive and timely feedback when establishing pre-professional goals; develops plan of action in response to feedback.	Seeks feedback from clients; modifies feedback given to clients according to their learning styles; reconciles differences with sensitivity; considers multiple approaches when responding to feedback.
6. Problem-solving	Recognizes problems; states problems clearly; describes known solutions to problem; identifies resources needed to develop solutions; begins to examine multiple solutions to problems.	Prioritizes problems; identifies contributors to problem; considers consequences of possible solutions; consults with others to clarify problem.	Implements solutions; reassesses solutions; evaluates outcomes; updates solutions to problems based on current research; accepts responsibility for implementing of solutions.
7. Professionalism	Abides by APTA Code of Ethics; demonstrates awareness of state licensure regulations; abides by facility policies and procedures; projects professional image; attends professional meetings; demonstrates honesty, compassion, courage and continuous regard for all.	Identifies positive professional role models; discusses societal expectations of the profession; acts on moral commitment; involves other health care professionals in decision-making; seeks informed consent from patients.	Demonstrates accountability for professional decision; treats patients within scope of expertise; discusses role of physical therapy in health care; keeps patient as priority.
8. Responsibility	Demonstrates dependability; demonstrates punctuality; follows through on commitments; recognizes own limits.	Accepts responsibility for actions and outcomes; provides safe and secure environment for patients; offers and accepts help; completes projects without prompting.	Directs patients to other health care professionals when needed; delegates as needed; encourages patient accountability.
9. Critical thinking	Raises relevant questions; considers all available information; states the results of scientific literature; recognizes "holes" in knowledge base; articulates ideas.	Feels challenged to examine ideas; understands scientific method; formulates new ideas; seeks alternative ideas; formulates alternative hypotheses; critiques hypotheses and ideas.	Exhibits openness to contradictory ideas; assess issues raised by contradictory ideas; justifies solutions selected; determines effectiveness of applied solutions.
10. Stress management	Recognizes own stressors or problems; recognizes distress or problems in others; seeks assistance as needed; maintains professional demeanor in all situations.	Maintains balance between professional and personal life; demonstrates effective affective responses in all situations; accepts constructive feedback; establishes outlets to cope with stressors.	Prioritizes multiple commitments; responds calmly to urgent situation; tolerates inconsistencies in health care environment.

## **ESSENTIAL FUNCTIONS FOR PHYSICAL THERAPIST ASSISTANT STUDENTS**

### **LARAMIE COUNTY COMMUNITY COLLEGE (LCCC) Physical Therapist Assistant (PTA) Program**

To be successful in this curriculum, students must be able to demonstrate the following skills/abilities:

**Observation:** A candidate must be able to observe a patient accurately at a distance and close at hand. Observation necessitates the functional use of the sense of vision and other sensory modalities. The candidate must be able to observe demonstrations and learn from experiences in the basic sciences and in the clinical physical therapy laboratory such as accurately reading dials on electrotherapeutic equipment and numbers on a goniometer, hear heart and breath sounds, assess normal and abnormal color changes in the skin and palpate various body parts.

**Communication:** A candidate must be able to assimilate information from written sources (texts, journals, notes, medical records, etc.). The candidate must be able to attain, comprehend, retain, and utilize new information presented in written formats as well as produce appropriate written documentation. A candidate must be able to speak with, hear, and observe patients in order to elicit information, perceive nonverbal communications, and describe changes in mood, activity, and posture. The candidate must be able to communicate effectively and sensitively with patients, and efficiently and effectively with the heart-care team, orally and in writing.

**Sensorimotor:** A candidate must have sufficient gross motor, fine motor, and equilibrium functions to elicit information from patients by palpation, auscultation, percussion, and other data collection skills. A candidate must be able to execute movements required to provide therapeutic intervention (e.g., patient transfers, exercise, and application of electrotherapy) and emergency treatment. Quick reactions are necessary not only for safety, but for efficient and effective therapeutic intervention. The student must have the ability to move him or herself and the patient in order to perform motor function tests and treatment. Additionally, the student must be able to ensure the physical safety of a patient at all times. Such skills require coordination of gross and fine muscular movements, equilibrium, and sensation (hearing, vision, smell, and touch).

**Intellectual-Conceptual, Integrative, and Quantitative Abilities:** A candidate must be capable of these abilities which include, but are not limited to, measurement, calculation, reasoning, analysis, synthesis and retention of complex information. Problem-solving is a critical skill demanded of physical therapist assistants, one that involves all these abilities. The candidate must also be able to comprehend three-dimensional relationships and spatial relationships of structures.

**Emotional:** A candidate must have the emotional health to use fully his or her intellectual abilities, the exercise good judgment, and the prompt completion of all responsibilities attendant to the care of patients.

**Interpersonal:** A candidate must be able to develop mature, sensitive, and effective relationships with patients and colleagues. Ability to tolerate physical and emotional stress and continue to function effectively is a must. A candidate must be adaptable, flexible, and able to function in the face of uncertainty. He or she must have integrity, the motivation to serve a high level of compassion, and a consciousness of social values. A candidate needs the interpersonal skills to interact positively with people from all levels of society, ethnic backgrounds, and beliefs.

A deficiency in the abilities listed above can severely diminish a candidate's chances of success in school and in the profession. It is the responsibility of the student with disabilities to request those accommodations that he/she feels are reasonable and are needed to execute the essential functions described. The ability to perform the above skills does not guarantee licensure/certification in any given state. Students who have concerns about the ability to perform any of these functions should contact the PTA Program Director at 307.778.1198. Individuals with disabilities may request reasonable accommodations or information by calling the LCCC Office of Student Accommodations (OSA) at 307.778.1359.

# Appendix D: Required Student Forms

**PHYSICAL THERAPIST ASSISTANT PROGRAM ESSENTIAL FUNCTIONS VERIFICATION**

**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)  
Physical Therapist Assistant (PTA) Program**

*Essential Functions student signature page to be completed at program entry.*

\_\_\_ Yes \_\_\_ No I have read and I understand the Essential Functions relative to the Physical Therapist Assistant Program.

\_\_\_ Yes \_\_\_ No I am able to meet the physical requirements of the PTA Program as specified and do not require any reasonable accommodation to meet these requirements at this time.

\_\_\_ (v) I require the following reasonable accommodation(s) to meet the Physical Requirement standard as specified:

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\_\_\_\_\_  
**Printed Name of Student**

\_\_\_\_\_  
**Signature of Student**

\_\_\_\_\_  
**Date**

***Nondiscrimination in Employment and Education Opportunity***

Laramie County Community College (LCCC) is committed to a policy of nondiscrimination in employment and education opportunity. No person shall be discriminated against in the terms and conditions of employment, personnel practices, or access to and participation in, programs, services, and activities with regard to race, sex, color, creed, religion, age, national origin, disability, marital status, status with regard to public assistance, sexual orientation, or membership or activity in a local commission as defined by law.

**VIDEOTAPE/PHOTOGRAPH CONSENT AND AGREEMENT**

**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)  
Physical Therapist Assistant (PTA) Program**

I, \_\_\_\_\_ give Laramie County Community College (LCCC), PTA Program consent to videotape/photograph/audiotape me during classroom, lab or off campus education experiences for educational purposes only. I also agree to keep all photographs and electronic records that I take or use as a student, as confidential and will not release any electronic information or images unless I receive written notification from the PTA program director.

\_\_\_\_\_  
**Printed Student Name**

\_\_\_\_\_  
**Printed Student Signature**

\_\_\_\_\_  
**Date**

## Volunteer Release and Waiver of Liability Form



**LARAMIE COUNTY  
COMMUNITY COLLEGE**  
Human Resources

*Instructions: This form must be completed by any volunteer who wishes to provide services to LCCC and signed by the supervisor. It must be approved by both Human Resources and Risk Management BEFORE the volunteer may begin.*

### Volunteer Release and Waiver of Liability

This Release and Waiver of Liability ("Release") by the individual signing below ("Volunteer") releases Laramie County Community College ("College"), a Community College District existing under the laws of the State of Wyoming and each of its elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers regarding any and all claims arising in direct relation to Volunteer's assumption of activities related to serving as a volunteer. For purposes of this waiver, "volunteer" does not mean a guest speaker or lecturer providing services of a nominal duration.

Name of Volunteer: \_\_\_\_\_

Name of Activity/Event/Class: \_\_\_\_\_

Briefly Describe Services to be Provided: \_\_\_\_\_

\_\_\_\_\_

Name of Department: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_

Approximate Volunteer Hours per Week: \_\_\_\_\_ Supervisor Email: \_\_\_\_\_

Volunteer Service Dates to be Approved: July 1, 2023 through June 30, 2024 \*Valid only for 1 Fiscal Year

1. **Volunteer Status:** Volunteer desires to provide volunteer services for College and engage in activities related to serving as a volunteer. Volunteer understands that the scope of Volunteer's relationship with College is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that College will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to College. Volunteer is performing these services for civic, charitable or humanitarian reasons and as more fully defined by 29 C.F.R. 553.101.

2. **Initials of Volunteer:**

By my initials indicated, Volunteer hereby states that Volunteer has not received a promise, expectation or receipt of compensation for services to be rendered;

By my initials indicated, Volunteer hereby states that Volunteer's services are being offered freely and without pressure or coercion, direct or implied from College;

By my initials indicated, Volunteer is not currently employed by the College to perform the same type of services being offered in a volunteer status.



3. **Waiver and Release:** Volunteer hereby releases and forever discharges and holds harmless College and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services Volunteer provides to College. Volunteer understands and acknowledges that this Release discharges College from any liability or claim that Volunteer may have against College with respect to providing volunteer services, including but not limited to: breach of contract, bodily injury, personal injury, illness, death, or property damage that may result from the services Volunteer provides to College or occurring while Volunteer is providing services.
4. **Assumption of Risk:** Participation in the aforementioned campus activity carries with it certain risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks may include, but are not limited to: 1) minor injuries such as but not limited to, scratches, bruises, and sprains; 2) major injuries such as but not limited to eye injury or loss of sight, joint or back injuries, heart attacks, and concussions; and 3) catastrophic injuries including but not limited to paralysis and death. I understand, and acknowledge that these and other unforeseeable risks are inherent to participation in the above activity. I hereby assert that my participation is voluntary and I knowingly assume all such risks. Furthermore, I understand that I will be responsible for any medical or other charges in connection with this activity.
5. **Insurance:** Further, Volunteer understands that College does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health, or disability benefits, unemployment benefits, worker's compensation or any other insurance. Volunteer expressly waives any such claim for compensation or liability on the part of College.
6. **Release Scope:** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Wyoming and that this Release shall be governed by and interpreted in accordance with the laws of the State of Wyoming. Volunteer agrees that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected. By signing below, Volunteer expresses understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.
7. **Governmental Immunity:** Participant hereby releases, waives, discharges, and covenants not to sue, LCCC, nor any of its elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers regarding any and all claims arising in as a result of Participant's participation in the aforementioned campus activity. I further acknowledge that the Wyoming Recreation Safety Act, WYO. STAT. ANN. § 1-1-121 (2012) et seq., and WYO. STAT. ANN. § 1-1-109 (2012) applies irrespective of the age of the person assuming the risk. To the fullest extent permitted by law, Participant shall indemnify, defend, and hold harmless LCCC, its elected and appointed officials, employees, officers, agents, successors, assignees, and volunteers from any and all claims, lawsuits, losses, and liability arising out of Participant's involvement in this activity. Further, LCCC does not waive its Governmental/Sovereign Immunity by executing or entering into this Waiver/Agreement and specifically retains all immunities and defenses available to it as a governmental entity pursuant to WYO. STAT. ANN. § 1-39-101 (2011), et seq., and all other applicable laws.

Volunteer Name: \_\_\_\_\_

8. **College Rules:** Volunteer agrees to abide by College policies and procedures and any further amendments to the same that govern the operation and activities of the College. Volunteer agrees to comply with any specific instruction or request given by the College.
9. I hereby certify that I have carefully read the foregoing and acknowledge that I understand and agree to all of the above terms and conditions. I have had the opportunity to ask any and all questions regarding this Release. I am aware that by signing this Release, I assume all risks and waive and release certain substantial rights that I may have. I acknowledge that this Release is binding upon myself, my heirs, executors, administrators, and representatives in the event of my death or incapacity.

_____	_____	_____
Volunteer's Printed Name	Volunteer's Signature	Date
_____	_____	
Volunteer's Phone Number	Volunteer's Email Address (Please Print Carefully)	
_____	_____	_____
Home Street Address	City	State Zip Code
_____	_____	
Emergency Contact Name	Emergency Contact's Phone Number	
_____	_____	
Supervisor's Signature	Date	

**FOR VOLUNTEERS UNDER AGE 18**

I, as the Parent/Guardian of the above-named child (volunteer), hereby give permission for my child to serve as a volunteer. I hereby certify that as the Parent/Guardian of the above Volunteer, I have carefully read the foregoing and acknowledge that I understand and agree to all of the above terms and conditions. I have had the opportunity to ask any and all questions regarding this Waiver. I am aware that by signing this Waiver, I assume all risks and waive and release certain substantial rights that I may have. I acknowledge that this Waiver/Agreement is binding upon myself, my heirs, executors, administrators, and representatives in the event of my death or incapacity.

_____	_____	_____
Parent/Guardian's Printed Name	Parent/Guardian's Signature	Date
_____	_____	
Parent/Guardian's Phone Number	Parent/Guardian's Email Address (Please Print Carefully)	
_____	_____	_____
Home Street Address	City	State Zip Code





Volunteer Name: \_\_\_\_\_

**SUPERVISOR TO COMPLETE**

Does volunteer need the following?

Background Check       Keys       Email/ITS Access

*\*A background check is required for volunteers working with children and/or handling money.*

Date Background Check Completed by HR: \_\_\_\_\_

Background Check Not Required - HR Approval: \_\_\_\_\_

**FOR HR / A&F OFFICE USE ONLY**

Human Resources Approval \_\_\_\_\_ Date \_\_\_\_\_

Risk Management Approval \_\_\_\_\_ Date \_\_\_\_\_

## ***STUDENT STATEMENT OF UNDERSTANDING AND LIABILITY RELEASE***

### **LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**

#### **Physical Therapist Assistant (PTA) Program**

I, \_\_\_\_\_ (print name), am a student at Laramie County Community College (LCCC) – Cheyenne campus who is enrolled in a Health Sciences & Wellness Division program.

I acknowledge that I have been informed of the following and that I understand the following:

1. That the health and human services program I have enrolled in may involve exposure to human body fluids and cell and tissue cultures that may carry infections such as HIV (Human Immunodeficiency Virus) and Hepatitis B Virus (HBV) and Hepatitis C Virus (HCV).
2. That exposure to infectious blood and other body fluids and cultures by contact through eye, mouth, blood, non-intact skin, or other method may put me at risk of contracting a blood borne infection.
3. That to protect myself from exposure to blood and other body fluid and cultures, I will wear protective apparel according to OSHA (Occupational Safety and Health Administration) standards and comply with applicable policies of the College and any hospital or clinical affiliate that I am attending.
4. That if I should become exposed by eye, mouth, blood, non-intact skin, or other method to blood or other human fluids or cultures, I will immediately report such incident to the program instructor or clinical internship supervisor.
5. That if such exposure should occur, I hereby authorize the College or the clinical affiliate to administer such immediate first aid as is deemed appropriate until medical help can be obtained.
6. That I hereby release and hold harmless Laramie County Community College (LCCC), its employees, officers, agents, and representatives, including all hospital and clinical internships, from any liability for any and all injury, illness, disability, or death, including all costs for medical care, resulting from my exposure to infectious blood or other human fluids or cultures or the administration of emergency first aid after such exposure, during the course of my participation in the health sciences and wellness school program, whether caused by the negligence of the College or otherwise, except that which is the result of gross negligence or wanton misconduct by the College.

\_\_\_\_\_  
Printed Student Name

\_\_\_\_\_  
Major

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**GENERIC ABILITIES SELF-ASSESSMENT**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

**Instructions:** Assess your performance in each of the ten abilities below as based on the Generic Abilities Behavioral Criteria. Circle the appropriate level for each ability and comment on your performance in each area. Please sign and date the assessment.

	B – Beginning Level	D – Developing Level	E- Entry Level
<b>Commitment to Learning</b> Comments:	B	D	E
<b>Interpersonal Skills</b> Comments:	B	D	E
<b>Communication Skills</b> Comments:	B	D	E
<b>Effective Use of Time and Resources</b> Comments:	B	D	E
<b>Use of Constructive Feedback</b> Comments:	B	D	E
<b>Problem Solving</b> Comments:	B	D	E
<b>Professionalism</b> Comments:	B	D	E
<b>Stress Management</b> Comments:	B	D	E

**Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**STATEMENT OF AGREEMENT**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

The following statement confirms that the student understands and agrees to the requirements and policies of Laramie County Community College (LCCC) and the Physical Therapist Assistant (PTA) Program as written in this handbook and appendices.

I have read, understand, and agree with the LCCC Physical Therapist Assistant Student Handbook. I agree to comply with the printed policies expressed therein as well as those in the LCCC Catalog, and LCCC Student Handbook. Furthermore, I have been informed that changes may occur as determined by developments in clinical and/or academic settings. As far as possible, changes will be effective prior to the beginning of the academic term. When notified verbally and in writing of these changes, I will comply with them.

I understand that a minimum grade of "C" (75%) will be required to pass each course. I am aware that failure to adhere to all LCCC policies, the PTA Program policies as outlined in the Student Handbook, and the information identified in each course syllabi may result in my dismissal from the PTA Program.

This statement of agreement will become part of my file in the PTA Program Department Office.

My signature indicates acceptance of this agreement.

**Student Signature** \_\_\_\_\_

**Printed Name** \_\_\_\_\_

**Date** \_\_\_\_\_

# Appendix E: Additional Student Forms

**Readmission Application Form**  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

**Instructions:** Answer all questions in an essay format. Use at least 3 sentences for each question. Use full sentences and correct grammar and spelling. Use additional paper as needed. Initial next to appropriate lines.

1. Identify at least three strengths that will help you succeed academically in the PTA program.
2. Explain how these strengths will help you succeed academically in the PTA program.
3. Identify at least 3 areas that contributed to your unsuccessful academic performance.
4. Describe how these areas contributed to your poor academic performance and actions you will take to improve your academic performance.
5. If you are chosen to continue in the PTA program, identify the resources you will utilize and how they will improve your academic performance? (Identify at least 3 resources you will use).
6. Write 3 SMART (Specific, Measurable, Attainable, Relevant, Time-bound) goals for improving your academic performance.
7. Develop a comprehensive plan for improving academic performance by incorporating answers to questions 4, 5 and 6.

\_\_\_\_\_ I understand that I may reenter the program once, though no guarantee of readmission is given. Faculty members reserve the right to deny readmission based on several factors, including, and not limited to prior clinical and classroom performance, professional behaviors, interim remedial work completed by the student.

\_\_\_\_\_ I understand that I may also be required to demonstrate proficiency in physical therapy skills learned up to the point of dismissal from the PTA program by completing the clinical skills check-off and a written readmission examination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

***Routine Student Conference/Advising***  
**LARAMIE COUNTY COMMUNITY COLLEGE (LCCC)**  
**Physical Therapist Assistant (PTA) Program**

**Student:** \_\_\_\_\_ **Semester:** \_\_\_\_\_

*This form may be used during routine conferences and advising sessions to facilitate a collaborative discussion between the student and faculty member.*

**Review of Academic Progress (challenges, grades, success markers and future courses, etc)::**

**Review of Progress Towards Clinicals (CastleBranch compliance, communication with clinical sites, etc.):**

**Student Feedback and Self-Reflection:**

**Student Action Items and Goals to facilitate academic and professional success:**

Faculty Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Signature: \_\_\_\_\_ Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_