Acknowledgement

Represented by my signature, I acknowledge that I have received and will operate within the requirements of the Alvernia University Doctor of Physical Therapy Program Student Handbook. My signature confirms that I have read, understand, and will comply with its contents, and all of my questions have been answered satisfactorily.

X ___________________________________  ___________________
     Signature                                                                       Date

___________________________________
Name (Print)

Please remove this page and return it to the DPT Program Secretary
(Veronica Hall, 2nd Floor).
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Alvernia University
DPT Program

PART I:
Program Overview
INTRODUCTION

The following policies and procedures have been established for the purpose of clarifying, organizing, and maintaining an effective Doctor of Physical Therapy Program at Alvernia University. Although other individuals may obtain information from this document, this manual is intended to serve as an important source of information primarily for the Core and Associated Faculty and Staff within the DPT Program.

This manual will serve as a valuable reference for DPT Faculty and Staff as they engage in the normal, daily operations of the DPT Program, and will provide guidance for making administrative and professional decisions. These policies and procedures have been instituted with the primary objective of ensuring the development and maintenance of a “culture of excellence” in which faculty and students become partners in the pursuit of academic success. The provisions of this manual are not to be regarded as a contract between the student and Alvernia University. The University reserves the right to change any provisions or requirements at any time within the student’s period of enrollment.

ACCREDITATION STATUS

Since 1967, the Middle States Association of Colleges and Schools has granted Alvernia University full accreditation. The most recent reaffirmation of accreditation was granted in March 2005. In order to maintain compliance with Middle States accreditation standards, Alvernia has implemented a system of shared effort that includes collaboration amongst administration, non-tenure track and tenure track faculty, and staff. Ultimately, the Provost is responsible for achieving and maintaining accreditation.

Graduation from a physical therapist program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE), 1111 North Fairfax Street, Alexandria, VA 22314; phone; 703-706-3245; accreditation@apta.org is necessary for eligibility to sit for the licensure examination, which is required in all states.

Alvernia University is seeking accreditation of a new physical therapist education program from CAPTE. The program will submit an Application for Candidacy, which is the formal application required in the pre-accreditation stage. Submission of this document does not assure that the program will be granted Candidate for Accreditation status. Achievement of Candidate for Accreditation status is required prior to implementation of the professional phase of the program; therefore, no students may be enrolled in professional courses until Candidate for Accreditation status has been achieved. Further, though achievement of Candidate for Accreditation status signifies satisfactory progress toward accreditation, it does not assure that the program will be granted accreditation.

ALVERNIA UNIVERSITY MISSION & VISION

Guided by Franciscan values and the ideal of “knowledge joined with love,” and rooted in the Catholic and liberal arts traditions, Alvernia is a rigorous, caring, and inclusive learning community committed to academic excellence and to being and fostering broadly educated, life-long learners; reflective professionals and engaged citizens; and ethical leaders with moral courage.

To Be a Distinctive Franciscan University, Committed to Personal and Social Transformation, Through Integrated, Community-based, Inclusive, and Ethical Learning. Integrated Learning: combining liberal arts and professional education, and blending rigorous inquiry, practical experience and personal reflection in the classroom, on campus, and in society; Community-Based Learning: engaging the local, regional and global communities as partners in education and service; Inclusive Learning: welcoming people of diverse beliefs and backgrounds; responsive to the educational needs of recent high school graduates, working adults and established professionals, and senior citizens; respectful and self-critical in our dialogue about differences in values and perspectives; Ethical Learning:
challenging individuals to be values-based leaders by developing habits of the mind, habits of the heart, and habits of the soul.

COLLEGE OF PROFESSIONAL PROGRAMS MISSION

The Mission of the College of Professional Programs is to empower departments to develop students’, faculty members’, and staffs’ personal and professional responsibility in the context of their vocations. Through modeling ethical standards of our richly diverse professional programs, we encourage continual investment in best practices and engaged learning in collaboration with our communities.

DOCTOR OF PHYSICAL THERAPY PROGRAM MISSION

The mission of the Alvernia University Doctor of Physical Therapy (DPT) Program is to pursue academic excellence in preparing the next generation of autonomous physical therapist clinicians. By challenging students to think critically, act professionally, and serve altruistically, the Program endeavors to develop graduates who are life-long learners, reflective professionals, engaged citizens, and ethical leaders with moral courage. Graduates will be prepared to assume a leadership role in the ever-changing health care environment as Doctors of Physical Therapy who are committed to clinical competence and the application and perpetuation of evidence-based knowledge.

Achievement of this mission is accomplished through the promotion of a graduate who is self-reflective, service-oriented, and highly skilled. Self-reflective professionals are committed to lifelong learning and demonstrate the capacity to thoughtfully consider their actions and creatively solve problems. Service-oriented professionals are agents of change who understand their role within the health care continuum. Such practitioners are committed to making contributions to the profession and to the communities in which they live in the context of client and societal needs. Skilled professionals exhibit clinical knowledge and competence through the application of evidence-based principles and practices. Such practitioners are dedicated to achieving optimal outcomes through exploration of innovative strategies.

DPT PROGRAM GOALS

Program Goals:
To accomplish its mission, the Program will:

- P-1. Provide an innovative and visionary curriculum that includes interprofessional learning, responds to the needs of the profession, fosters new educational models and delivery methods, and adjusts to the changing manner in which students learn.

- P-2. Promote the profession through research that emphasizes the translation of evidence into clinical practice, explores new models of research, and leads to innovative strategies related to movement and function.

- P-3. Collaborate with local clinicians, other health care providers, consumers, and community organizations in pursuing patient-centered initiatives that address the health-related challenges that society faces.

Faculty Goals:
To accomplish its mission, the Faculty of the Program will:

- F-1. Demonstrate expertise in the clinical practice of Physical Therapy with advanced knowledge and skill in accordance with best practice guidelines and informed by the current best evidence.
F-2. Embody the principles and practices of effective teaching by fostering an environment conducive to authentic learning and serve as a role model and resource for students, graduates, and colleagues.

F-3. Demonstrate a commitment to serve the Program, University, profession, and local/global community through collaboration and leadership.

F-4. Advance an agenda of scholarly activity, pursue professional advancement, and engage in lifelong learning that is designed to contribute to the profession of Physical Therapy.

**Graduate/Student Goals:**
To accomplish its mission, the Graduates/Students of the Program will:

G-1. Demonstrate entry-level competence in the examination, evaluation, diagnosis, prognosis, and intervention of the movement system across the lifespan by providing services that are safe, effective, and patient-centered within all available practice settings.

G-2. Embrace best practice standards through the implementation and perpetuation of evidence-based principles, which include the integration of best available research, clinical expertise, and patient-centered values and goals.

G-3. Collaborate with other health care providers, consumers, and community organizations to address the health-related challenges that society faces as autonomous Doctors of Physical Therapy, who are characterized by independent thinking, self-determination, altruistic service, and who embody the highest standards of ethical and moral practice.

G-4. Engage in the persistent, lifelong acquisition of authentic knowledge and skill to advance the art and science of Physical Therapy and its role in the delivery of health care and health promotion.
PART 2: Program Personnel
DOCTOR OF PHYSICAL THERAPY PROGRAM FACULTY/STAFF

DPT PROGRAM CORE FACULTY:

Dr. Christopher H. Wise, PT, DPT, PhD(c), OCS, FAAOMPT, MTC, ATC
DPT Program Director & Associate Professor of PT
610-230-5708
christopher.wise@alvernia.edu

Dr. Robin Zappin, PT, Ed.D
Academic Coordinator of Clinical Education & Assistant Professor of PT
610-796-5621
robin.zappin@alvernia.edu

Dr. Dolores Bertoti, PT, MS, DPT
Professor of PT
610-796-8372
dolores.bertoti@alvernia.edu

DPT PROGRAM ASSOCIATED(contract) FACULTY:

Dr. Benjamin Infantolino, Ph.D., ATC
bwi100@psu.edu

Dr. Kevin Fratis, PT, DPT, NCS
nositting@yahoo.com

DPT PROGRAM ASSOCIATED(hourly) FACULTY:
See course syllabi for complete list of Associated(hourly) faculty

DPT PROGRAM STAFF:

Janice Stock
Administrative Assistant
610-796-8373
janice.stock@alvernia.edu

COMMUNICATION WITH DPT FACULTY

Fostering an environment of collegiality where honesty, camaraderie, diversity, and candor are valued is among the most important responsibilities of the Program Director and faculty. In order to facilitate open communication within the Program, the following policies will be followed:

New Student Orientation: During this initial contact between DPT students and faculty, students will be provided with an overview of the Program, review of Program policies and procedures, and provided with this Handbook and other important Program publications.

Student Advising: All students will be assigned a faculty advisor prior to new student orientation, who is a core member of the DPT Program faculty. Within the adult learning model, there are no mandatory meetings between advisees and advisors and students are expected to schedule meeting times with their advisors as needed. Faculty advisors will be notified if their advisees are experiencing academic difficulties. Faculty advisors will provide mentoring and advising for students on an ongoing basis and will serve as an important resource for students. If a student wishes to be assigned a different advisor, approval must be granted by the Program Director.
**Faculty Office Hours:** DPT faculty will maintain a minimum of 6 hours of office time per week. These hours will be posted on the faculty member's office door and will also be listed in course syllabi. Students who need to meet with faculty should schedule a time to meet during office hours. Alternate meeting times that fall outside of the normal posted office hours may be arranged by contacting individual faculty members. Extended office hours will be offered during times when students are researching and choosing clinical sites, during mid-term/finals week, and during research seminar.

**Program Director’s and ACCE’s “Open-Door” Policy:** DPT students are encouraged to meet with the PD and ACCE on an as needed basis. They will be most available on campus during posted office hours, however, students are encouraged to contact the PD and ACCE at alternate times as needed.

**ACCE Communication with Students Regarding Clinical Education:** Communication between the Academic Coordinator of Clinical Education and the students will occur formally throughout their tenure within the Program and informally as needed. Formal contact will include the following:

1. **DPT 522 Clinical Practice I (Fall Year 1) & DPT 622 Clinical Practice IV (Fall Year 2)**– During the first 6 weeks of these courses, the ACCE will engage in classroom instruction, which will include a review of all policies and procedures, as well as expectations related to clinical education and the OSHA and HIPPA requirements needed to be completed. Assessment tools will be reviewed and ample time will be allowed by Q&A.
2. **DPT 522, 523, 622, 623**– At the end of the first week for each part-time clinical experience, students will receive a Week One Check-In (See appendix) from the ACCE to determine if the students foresee any communication issues with the CI/CCCE.
3. **Clinical Education Meetings** – The ACCE will meet with each class 6 months prior to DPT 524, 624 and 724/725 to complete the selection of clinical sites. One meeting will be designated for lottery number selection and the second meeting will be for site selection. These meetings will be mandatory. The ACCE will communicate in written form with all students once clinical site assignments have been made in accordance with the policies contained within the manual. Once assigned, students will be provided with clinical site contact information and encouraged to contact the clinical site directly. Students entering a clinical education experience with an education, progression, or action plan will be given said plan in writing prior to the clinical education experience and will be notified that their CI has also been given a copy of the plan.
4. The ACCE, or designated faculty member, will complete mid-term evaluations in person or by phone. Students will be encouraged to share challenges, concerns, likes and dislikes at this time.
5. The ACCE will meet with each class following each clinical experience/internship to allow for an exchange of experiences, feedback on the process, clinical sites, and overall clinical experiences.
6. The student and CI will have a debriefing session where the results of these evaluations are reviewed. Upon the recommendation of the CI, the ACCE will assign a final grade of pass or fail for each clinical education experience, which will be placed on the student’s official transcripts and communicated in accordance with University procedures.

**Student Feedback:** Student feedback and outcomes will also provide data that may lead to revisions in the curricular plan. Students will have multiple opportunities to offer informal and formal feedback. Students may offer collective feedback through the Alvernia PT Student Association (PTSA). Prior to graduation, each student will participate in an exit interview where they will have the opportunity to discuss ideas and provide feedback in a one-on-one setting with faculty and will complete a DPT Student Exit Survey (Appendix A). Formal feedback regarding individual courses will be provided through the Alvernia University Student Feedback Evaluations on every course every semester as dictated by University policy. In addition to student feedback, student performance will also serve as a gauge for determining the effectiveness of the curriculum in meeting Program goals. A variety of outcome measures, including NPTE pass rates, graduation rates, and employment rates, among others will be used by the DPT Outcomes Committee to determine the need for curricular review and revision.
Alvernia University DPT Program

PART 3:

Professional Standards
PTA CODE OF ETHICS FOR THE PHYSICAL THERAPIST

CODE OF ETHICS HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24]

EFFECTIVE JULY 1, 2010. For more information, go to www.apta.org/ethics.

Preamble

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive. This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Principles:

Principle #1: Physical therapists shall respect the inherent dignity and rights of all individuals. (Core Values: Compassion, Integrity)

1A. Physical therapists 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 therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

Principle #2: Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients. (Core Values: Altruism, Compassion, Professional Duty)

2A. Physical therapists shall adhere to the core values of the profession and shall act in the best interests of patients/clients over the interests of the physical therapist.
2B. Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.
2C. Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.
2D. Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care.
2E. Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle #3: Physical therapists shall be accountable for making sound professional judgments. (Core Values: Excellence, Integrity)

3A. Physical therapists shall demonstrate independent and objective professional judgment in the patient's/client's best interest in all practice settings.
3B. Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.
3C. Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.

3D. Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.

3E. Physical therapists shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

**Principle #4:** Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public. *(Core Value: Integrity)*

4A. Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B. Physical therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).

4C. Physical therapists shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D. Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

4E. Physical therapists shall not engage in any sexual relationship with any of their patients/clients, supervisees, or students.

4F. Physical therapists shall not harass anyone verbally, physically, emotionally, or sexually.

**Principle #5:** Physical therapists shall fulfill their legal and professional obligations. *(Core Values: Professional Duty, Accountability)*

5A. Physical therapists shall comply with applicable local, state, and federal laws and regulations.

5B. Physical therapists shall have primary responsibility for supervision of physical therapist assistants and support personnel.

5C. Physical therapists involved in research shall abide by accepted standards governing protection of research participants.

5D. Physical therapists shall encourage colleagues with physical, psychological, or substance-related impairments that may adversely impact their professional responsibilities to seek assistance or counsel.

5E. Physical therapists 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.

5F. Physical therapists shall provide notice and information about alternatives for obtaining care in the event the physical therapist terminates the provider relationship while the patient/client continues to need physical therapy services.

**Principle #6:** Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors. *(Core Value: Excellence)*

6A. Physical therapists shall achieve and maintain professional competence.

6B. Physical therapists shall take responsibility for their professional development based on critical self-assessment and reflection on changes in physical therapist practice, education, health care delivery, and technology. *(Continued)*

6C. Physical therapists shall evaluate the strength of evidence and applicability of content presented during professional development activities before integrating the content or techniques into practice.

6D. Physical therapists shall cultivate practice environments that support professional development, lifelong learning, and excellence.

**Principle #7:** Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society. *(Core Values: Integrity, Accountability)*

7A. Physical therapists shall promote practice environments that support autonomous and accountable professional judgments.

7B. Physical therapists shall seek remuneration as is deserved and reasonable for physical therapist services.

7C. Physical therapists shall not accept gifts or other considerations that influence or give an appearance of influencing their professional judgment.

7D. Physical therapists shall fully disclose any financial interest they have in products or services that they recommend to patients/clients.

7E. Physical therapists shall be aware of charges and shall ensure that documentation and coding for physical therapy services accurately reflect the nature and extent of the services provided.
7F. Physical therapists shall refrain from employment arrangements, or other arrangements, that prevent physical therapists from fulfilling professional obligations to patients/clients.

Principle #8: Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally. (Core Values: Social Responsibility)

8A. Physical therapists shall provide pro bono physical therapy services or support organizations that meet the health needs of people who are economically disadvantaged, uninsured, and underinsured.

8B. Physical therapists shall advocate to reduce health disparities and health care inequities, improve access to health care services, and address the health, wellness, and preventive health care needs of people.

8C. Physical therapists shall be responsible stewards of health care resources and shall avoid over-utilization or under-utilization of physical therapy services.

8D. Physical therapists shall educate members of the public about the benefits of physical therapy and the unique role of the physical therapist.

Proviso: The Code of Ethics as substituted will take effect July 1, 2010, to allow for education of APTA members and non-members. (General Counsel, ext.3253)

APTA STANDARDS OF PRACTICE FOR PHYSICAL THERAPY

HOD S06-13-22-15 [Amended 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's commitment to society is to promote optimal health and functioning in individuals by pursuing excellence in practice. The American Physical Therapy Association 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 Code of Ethics of the American Physical Therapy Association.
The physical therapist assistant complies with the Standards of Ethical Conduct for the Physical Therapist Assistant of the American Physical Therapy Association.

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, and Goals
The physical therapy service has a statement of mission, purposes, and goals that reflects the needs and interests of the patients/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.

C. Policies and Procedures
The physical therapy service has written policies and procedures that reflect the operation, mission, purposes, and goals of the service, and are consistent with the association’s standards, policies, positions, guidelines, and Code of Ethics.

D. Administration
A physical therapist is responsible for the direction of the physical therapy service.

E. Fiscal Management
The director of the physical therapy service, 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.
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.

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

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

I. Physical Setting
The physical setting is designed to provide a safe and accessible environment that facilitates fulfillment of the mission, purposes, and goals of the physical therapy service. The equipment is safe and sufficient to achieve the purposes and goals of physical therapy.

J. Collaboration
The physical therapy service collaborates with all disciplines as appropriate.

III. Patient/Client Management

A. Physical Therapist of Record
The physical therapist of record is the therapist who assumes responsibility for patient/client management and is accountable for the coordination, continuation, and progression of the plan of care.

B. Patient/Client Collaboration
Within the patient/client management process, the physical therapist and the patient/client establish and maintain an ongoing collaborative process of decision making that exists throughout the provision of services.

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 visits/encounters may occur without the presence of disease, illness, impairments, activity limitations, or participation restrictions.

D. Plan of Care
The physical therapist establishes a plan of care and manages the needs of the patient/client based on the examination, evaluation, diagnosis, prognosis, goals, and outcomes of the planned interventions for identified impairments, activity limitations, and participation restrictions. The physical therapist involves the patient/client and appropriate others in the planning, anticipated goals and expected outcomes, proposed frequency and duration, and implementation of the plan of care.

E. Intervention
The physical therapist provides or directs and supervises the physical therapy intervention consistent with the results of the examination, evaluation, diagnosis, prognosis, and plan of care. The physical therapy intervention may be provided in an episode of care, or in a single visit/encounter such as for a wellness and prevention visit/encounter or a specialty consultation or for a follow-up visit/encounter after episodes of care, or may be provided intermittently over longer periods of time in cases of managing chronic conditions. An *episode of care* is the managed care provided for a specific problem or condition during a set time period and can be given either for a short period or on a continuous basis, or it may consist of a series of intervals marked by 1 or more brief separations from care.

F. Reexamination
The physical therapist reexamines the patient/client as necessary during an episode of care, during follow-up visits/encounters after an episode of care, or periodically in the case of chronic care management, to evaluate progress or change in patient/client status. The physical therapist modifies the plan of care accordingly or concludes the episode of care.

G. Conclusion of Episode of Care
The physical therapist concludes an episode of care when the anticipated goals or expected outcomes for the patient/client have been achieved, when the patient/client is unable to continue to progress toward goals, or when the physical therapist determines that the patient/client will no longer benefit from physical therapy.

H. Communication/Coordination/Documentation
The physical therapist communicates, coordinates, and documents all aspects of patient/client management including the results of the initial examination and evaluation, diagnosis, prognosis, plan of care, intervention, responses to intervention, changes in patient/client status relative to the intervention, reexamination, and episode of care summary. The physical therapist of record is responsible for “hand off” communication.

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 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. Research**

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

**VI. Community Responsibility**

The physical therapist demonstrates community responsibility by participating in community and community agency activities, educating the public, formulating public policy, or providing pro bono physical therapy services. (See also Board of Directors standard Criteria for Standards of Practice)

(Clinical Practice Department, ext 3176)

**Explanation of Reference Numbers:** BOD P00-00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P" indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.


**APTA VISION STATEMENT OF THE PHYSICAL THERAPY PROFESSION**

Adopted by APTA's House of Delegates (House) in 2013, APTA's Vision Statement of the Physical Therapy Profession is supported by Guiding Principles to Achieve the Vision, which demonstrate how the profession and society will look when the vision is achieved. APTA's strategic plan helps the association work toward this vision.

**Vision Statement of the Physical Therapy Profession**

Transforming society by optimizing movement to improve the human experience.

**Guiding Principles to Achieve the Vision**

Movement is a key to optimal living and quality of life for all people that extends beyond health to every person's ability to participate in and contribute to society. The complex needs of society, such as those resulting from a sedentary lifestyle, beckon for the physical therapy profession to engage with consumers to reduce preventable health care costs and overcome barriers to participation in society to ensure the successful existence of society far into the future. While this is APTA's vision for the physical therapy profession, it is meant also to inspire others throughout society to, together, create systems that optimize movement and function for all people. The following principles of Identity, Quality, Collaboration, Value, Innovation, Consumer-centricity, Access/Equity, and Advocacy demonstrate how the profession and society will look when this vision is achieved. The principles are described as follows:

**Identity.** The physical therapy profession will define and promote the movement system as the foundation for optimizing movement to improve the health of society. Recognition and validation of the movement system is essential to understand the structure, function, and potential of the human body. The physical therapist will be responsible for evaluating and managing an individual's movement system across the lifespan to promote optimal development; diagnose impairments, activity limitations, and participation restrictions; and provide interventions targeted at preventing or ameliorating activity limitations and participation restrictions. The movement system is the core of physical therapist practice, education, and research.

**Quality.** The physical therapy profession will commit to establishing and adopting best practice standards across the domains of practice, education, and research as the individuals in these domains strive to be flexible, prepared, and responsive in a dynamic and ever-changing world. As independent practitioners, doctors of physical therapy in clinical practice will embrace best practice standards in examination, diagnosis/classification, intervention, and outcome measurement. These physical therapists will generate, validate, and disseminate evidence and quality indicators, espousing payment for outcomes and patient satisfaction, striving to prevent adverse events related to patient care, and demonstrating continuing competence. Educators will seek to
propagate the highest standards of teaching and learning, supporting collaboration and innovation throughout academia. Researchers will collaborate with clinicians to expand available evidence and translate it into practice, conduct comparative effectiveness research, standardize outcome measurement, and participate in interprofessional research teams.

**Collaboration.** The physical therapy profession will demonstrate the value of collaboration with other health care providers, consumers, community organizations, and other disciplines to solve the health-related challenges that society faces. In clinical practice, doctors of physical therapy, who collaborate across the continuum of care, will ensure that services are coordinated, of value, and consumer-centered by referring, co-managing, engaging consultants, and directing and supervising care. Education models will value and foster interprofessional approaches to best meet consumer and population needs and instill team values in physical therapists and physical therapist assistants. Interprofessional research approaches will ensure that evidence translates to practice and is consumer-centered.

**Value.** Value has been defined as “the health outcomes achieved per dollar spent.”¹ To ensure the best value, services that the physical therapy profession will provide will be safe, effective, patient-centered, timely, efficient, and equitable.² Outcomes will be both meaningful to patients and cost-effective. Value will be demonstrated and achieved in all settings in which physical therapist services are delivered. Accountability will be a core characteristic of the profession and will be essential to demonstrating value.

**Innovation.** The physical therapy profession will offer creative and proactive solutions to enhance health services delivery and to increase the value of physical therapy to society. Innovation will occur in many settings and dimensions, including health care delivery models, practice patterns, education, research, and the development of patient-centered procedures and devices and new technology applications. In clinical practice, collaboration with developers, engineers, and social entrepreneurs will capitalize on the technological savvy of the consumer and extend the reach of the physical therapist beyond traditional patient-therapist settings. Innovation in education will enhance interprofessional learning, address workforce needs, respond to declining higher education funding, and, anticipating the changing way adults learn, foster new educational models and delivery methods. In research, innovation will advance knowledge about the profession, apply new knowledge in such areas as genetics and engineering, and lead to new possibilities related to movement and function. New models of research and enhanced approaches to the translation of evidence will more expeditiously put these discoveries and other new information into the hands and minds of clinicians and educators.

**Consumer-centricity.** Patient/client/consumer values and goals will be central to all efforts in which the physical therapy profession will engage. The physical therapy profession embraces cultural competence as a necessary skill to ensure best practice in providing physical therapist services by responding to individual and cultural considerations, needs, and values.

**Access/Equity.** The physical therapy profession will recognize health inequities and disparities and work to ameliorate them through innovative models of service delivery, advocacy, attention to the influence of the social determinants of health on the consumer, collaboration with community entities to expand the benefit provided by physical therapy, serving as a point of entry to the health care system, and direct outreach to consumers to educate and increase awareness.

**Advocacy.** The physical therapy profession will advocate for patients/clients/consumers both as individuals and as a population, in practice, education, and research settings to manage and promote change, adopt best practice standards and approaches, and ensure that systems are built to be consumer-centered.
References


Background: The current vision statement succeeds Vision 2020, which was adopted by the House in 2000 and was influential in guiding the profession over its 13 years. Although elements of Vision 2020 are not explicitly mentioned in the current vision or its guiding principles, the values of Vision 2020 remain significant to the successful fulfillment of the new vision.

PENNSYLVANIA STATE PHYSICAL THERAPIST PRACTICE ACT

See http://www.pacode.com/secure/data/049/chapter40/subchapAtoc.html
PART 4: Student Retention, Progression, Withdrawal, Dismissal
STUDENT RETENTION & PROGRESSION

Course Registration:

To enroll in courses, all students must complete the University registration process. No student can register for another student or allow another person to register on the student’s behalf. All students must be authorized in the “Self-Serve” tab on the University website to register by their academic advisor. If a student registers during pre-registration and then decides not to return to the University, it is the student’s responsibility to notify the Graduate and Continuing Studies Office in writing prior to the beginning of classes to avoid charges. Registration dates can be found on the Academic Calendar. Information regarding tuition and course offerings is available from the Office of Graduate & Adult Education. The policy for enrollment in graduate courses is found under the heading, "Registration" in the Alvernia University Graduate Catalog.

DPT Program Retention and Progression Policies and Procedures:

Credits/Overloads Policy: The University policy related to number of credits per semester requires graduate students to register for a maximum of 9 credits per academic semester. Greater than 17 credits per semester is considered overload. Overloads require the approval of the student’s faculty advisor. Students enrolled in the DPT Program and undergraduate students who are currently pursuing the 3+3 accelerated track will be automatically approved for overload as dictated by the pre-determined curricular plan. The University policy for taking overload credits can be found under the heading, "Credits/Overload" in the Alvernia University Graduate Catalog.

Auditing Policy: In order to progress through the Program, students may be required to audit one or more courses. They may be required to audit a course in partial fulfillment of a learning contract in a course that was passed but one in which reinforcement of material may be required in order to fulfill the requirements of the learning contract. Students may also choose to gain exposure to an additional area of specialty practice by auditing a second elective during semester 7. No credit is earned for an audited course. The cost of auditing a course is 50% of the cost of the course, per credit. University policies related to auditing courses can be found under the heading, “Auditing” in the Alvernia University Graduate Catalog.

Course Repeat Policy: The Course Repeat Policy allows for students to complete the requirements of a learning contract enabling them to continue in the Program. If a student fails to pass a course, they will be placed on academic probation and a learning contract (Action Plan) will be established by the DPT Academic Review Committee (ARC), which may include the option for a student to repeat/delete a course. In addition to the policy as described under the heading, "Repeat/Delete Option" in the Alvernia University Graduate Catalog, the Program has additional requirements. Since each course within the DPT Program requires the successful completion of all prior coursework, students failing to pass a course with a grade of "C", or better will be unable to continue within the Program and must re-take and pass the course with a grade of "C", or better the next time that the course is offered. A student may only utilize the repeat/delete option one time throughout the Program. When a course is repeated for credit, the earlier grade remains on the student’s permanent record and appears on all transcripts. The higher grade is used in computing the cumulative grade point average. The repeat/delete option may only be used in cases where both the original and repeated courses were earned at Alvernia; neither may be by correspondence or by study at another institution.

Student Notification of Academic Performance and Progress:

University Policies for Student Notification of Academic Performance include:

Semester Grades Policy: Students with certain levels of outstanding financial obligations will not have access to their Self-Service transcript until their accounts are cleared. The responsibility for identifying grade errors is that
of the student. Blackboard does not necessarily represent the final grade earned and students are advised to review academic transcripts. Students on hold may visit the Office of the Registrar or the Graduate and Adult Education office during business hours to view their transcript. Any grade correction must be made by the instructor and filed in the Registrar's Office. The deadline for corrections is 21 calendar days after the grade is issued (except in cases of a grade grievance or in the case of an approved Incomplete). After that time, no changes will be made on the student's record. This policy can be found under the heading, "Semester Grades" in the Alvernia University Graduate Catalog.

Transcripts Policy: Requests for transcripts may be made in writing to the Registrar's Office or requested through Self Service. Forms are available from that office or at www.alvernia.edu/academics/registrar. No transcript request is released until all financial obligations to the University have been met. Students may request unofficial copies for their personal use. The first transcript requested after the degree is conferred is free. Processing of a transcript request is completed within five working days after the request is received; the prevailing fee must be submitted with the request for each transcript. This policy can be found under the heading, "Transcripts" in the Alvernia University Graduate Catalog.

Computation of Grades: At the completion of a course, each student is assigned a letter grade based upon the appropriate scale below: A = 4.0 (94-100); A- = 3.7 (90-93); B+ = 3.3 (87-89); B = 3.0* (83-86); B- = 2.7 (80-82); C = 2.0 (73-79); F = Failure (72 and below). "Less than 3.0 may = probation.can be found under the heading, "Computation of Grades" in the Alvernia University Graduate Catalog.

Early Warning Notices Policy: In mid-semester, faculty members submit early warning notices to the Office of Student Success. Students who are doing less than "C" work are identified and specific information regarding their lack of progress is noted. Students, their advisors, and the Registrar's Office are notified. This policy can be found under the heading, "Early Warning Notices Policy" in the Alvernia Undergraduate Catalog.

DPT Program Policies for Student Notification of Academic Performance:

DPT students will be notified of their academic and clinical performance and progress through both formal and informal means. The minimal expectation for communication to the student regarding their performance both academically and clinically is once at the conclusion of the semester at which time final grades are submitted. At the conclusion of each semester, students will be issued a final grade for each course by the primary instructor of the course in accordance with the University grading system described under the heading, “Computation of Grades” in the Alvernia University Graduate Catalog, as referred to above. This final grade will be added to the student's permanent, official transcript. Assigned grades are consistent for all courses across the curriculum and will be included on each course syllabus. Students will receive an unofficial grade report, which is posted under the “Self-Serve” tab on the University website, at the conclusion of each semester from the Registrar’s Office. This "unofficial transcript" will include individual final grades for each course as well as the student’s semester and cumulative GPA. Informally, students may also be notified of their final grade in each class by the primary instructor via email, in Blackboard, or in person prior to the student viewing their unofficial transcript. In addition to notification of a student's final grade in a course, students will also be notified of their grade on class assignments, written examinations, and practical examinations throughout each course. It is expected that grades on assignments and exams are communicated to students within one week of their completion, except with larger projects in which more time may be necessary. Grades on assignments and exams will be communicated confidentially to each student by the primary course instructor. Communication of grades may be done through email, Blackboard, telephone, or personal contact between the student and primary course instructor. The Program ascribes to the importance of timely student feedback in the educational development of each student.

Students who have failed to meet the academic and/or professional behavior requirements of the Program will be placed on probation. Students will be notified of this change in status from good to unsatisfactory standing with the Program through written notification from the Program Director immediately. The student's DPT faculty advisor will also be notified of the student's change in status. In this written notification, the student will be apprised that he/she is on probation and asked to appear before the DPT Academic Review Committee (ARC), who will be responsible for developing a learning contract with the student. After careful deliberation, the chair of
the ARC will provide the student with the details of the learning contract established between the ARC and the student in written form. This document will contain specific measurable behavioral goals and will serve as a formal contract and will be signed by all members of the ARC, as well as the student, and placed in the student’s permanent file. If the student fails to fulfill the requirements of the contract and will be asked to meet once again with the ARC after which the student will receive written notification of his/her dismissal from the Program. This written notice will be prepared by the ARC and will be placed in the student’s permanent file. If the student succeeds in meeting the requirements of the learning contract, he/she will be informed that he/she has been removed from probation and is currently in good academic standing and allowed to proceed within the Program.

Students who are experiencing academic difficulty throughout the curriculum may be notified through formal and informal interactions between the student and the student’s academic advisor, who will be one of the core faculty members within the DPT Program. During these interactions, the academic advisor will notify the student of his/her current academic status and negotiate with the student a plan to address these issues proactively, when possible. Students who are having consistent issues or those whom a primary course instructor or faculty advisor perceives as demonstrating the potential for not meeting course or Program requirements may be asked to appear before the DPT Academic Review Committee (ARC), at which time a learning contract (Education or Progression Plan) may be developed to assist the student in addressing any issues. The ARC will maintain minutes of all student meetings and the faculty advisor will also take minutes of all student meetings, which will be maintained in the student’s permanent academic file. Students who are struggling academically are encouraged and expected as adult learners to initiate contact with the primary course instructor or faculty advisor on an ongoing basis. See information regarding the DPT Academic Review Committee (ARC) below.

DPT Program Resources to Support Retention and Progression:

**Orientation:** Each Fall, prior to the start of class, all DPT students will attend orientation. Orientation will be conducted by the DPT faculty with the involvement of returning students. Orientation is designed to achieve the following objectives: 1.) introduce first year students to the faculty and returning students, 2.) provide an overview of the profession of physical therapy, 3.) provide an overview of the University including mission and resources, 4.) provide an overview of the DPT Program including mission, objectives, and curricular structure, 5.) convey pertinent information about Program policies and requirements. Orientation will include a morning information session followed by an afternoon social event designed to promote student interaction and to orient students to the campus. Orientation will also include a keynote address designed to inspire students toward achievement.

**Advising:** All students will be assigned a faculty advisor, who is a core member of the DPT Program faculty, in the summer before the start of coursework within the Program. As adult learners, students are expected to initiate all interactions with their faculty advisors. Faculty advisors will receive notification from the Registrar if their advisees are experiencing academic difficulties. Faculty advisors will provide mentoring and advising for students on an ongoing basis and will serve as an important resource for students. Faculty advisors will maintain the same advisees throughout their time in the Program. If a student wishes to be assigned a different advisor, approval must be granted by the Program Director, after consulting with all involved parties.

**Learning Contracts:** If students are in danger of not fulfilling academic or non-academic Program requirements or are currently not fulfilling the requirements of the DPT Program, a formal learning contract may be employed. Such contracts are designed to proactively curtail a student’s decline in performance, when possible, or to provide a strategy for assisting a student who is on probation to be restored to good academic standing. See below for details of the various types of learning contracts developed by the Program.

**Academic Review Committee (ARC):** This committee is comprised of the DPT Program Director and Program core faculty and is convened on an as needed basis. The ARC may convene regarding issues of academic performance, professional behavior, or concerns over safety. The primary objective of the committee is to review current or pending issues related to the progress of students throughout the curriculum. The ARC will consider requests, make recommendations, and take action related to: 1.) academic rules, regulations, and performance,
2.) violations of student conduct, including issues of safety, 3.) student grievances, and the 4.) dismissal and re-admission of students.

If students are not successfully demonstrating the competencies and skills required by the DPT Program, a formal learning contract will be developed by the ARC. Such formal contracts will include specific measurable, behavioral objectives, expectations, responsibilities, and consequences. These learning contracts are designed to provide very specific expectations and objectives that may be used to guide progression and facilitate restoration of the student to good academic standing within the program or proactively to prevent the student from being placed on probation. Contracts may be developed to address student performance in either the classroom or clinical practice environment and may relate to issues regarding any of the Program requirements. Once established, the learning contract will be provided to the student in written form from the Chair of the ARC within 2 days of the ARC meeting. Members of the ARC, as well as the student, will indicate their acceptance of the terms of the contract by affixing their signatures to the printed document. An original signed copy of the learning contract will be maintained in the student’s permanent academic file. Three specific types of learning contracts may be established by the ARC to achieve these objectives.

- **Education Plan** is a proactive contract between a student and the faculty. It may be written in the case where areas for improvement have been identified in either the classroom or clinical setting that could put a student at risk for not achieving Program expectations or requirements in the future.
- **Progression Plan** is an in-process contract between a student and the faculty when a student is currently not meeting expectations and requirements during the course of a semester.
- **Action Plan** is a retroactive contract between a student and the faculty which may be used when a student has failed to meet Program expectations and requirements and is on Probation. The action plan is designed to outline the specific tasks, requirements, and expectations that must be accomplished, including time frames, by the student in order to be removed from probation and reinstated to good standing within the Program. Action plans may require the student to perform tasks that are beyond general program requirements, such as auditing courses, engaging in clinical observation, and meeting regularly with academic or clinical faculty, among others. A student on probation will not be able to proceed within the curriculum unless he/she successfully executes the specific requirements that have been outlined in the action plan.

**Physical Therapy Student Association (PTSA):** The PTSA is a student-governed organization designed to promote collegiality among DPT students and to promote and represent the University and the profession of physical therapy within the university and surrounding community. The PTSA will meet a minimum of once per semester to plan events, provide updates, participate in community events, and to socialize. The PTSA will communicate with Program faculty via the PTSA-faculty advisor and through representation on the DPT Professional Advisory Board. The President from the PTSA, along with one representative from each of the DPT classes, will represent their class on the Advisory Board where they will attend annual meetings, provide input, and communicate pertinent information to their respective classes.

**Peer-Mentor Program:** To aid in the transition of first year students into the DPT Program, the PTSA will sponsor and manage a peer-mentor program. The PTSA will attempt to match each incoming student with a second or third year DPT student. The peer mentor program will attempt to contact incoming students before orientation and make plans to interact with them at orientation and on an ongoing basis thereafter. The Program encourages incoming students to engage second and third year students as mentors during their first year in the Program and into the future.

**Alvernia Physical Therapy Alumni Association (APTAA):** Once accreditation has been achieved and the charter class has graduated, the APTAA will be established with the assistance of the DPT Program. This organization will be self-governed by electing officers who are alumni of the program. The purpose of the APTAA will be to provide support in various ways to the DPT Program. This will include guidance and support for the current students of the program. The APTAA will strive to become a valuable resource for past, present, and future students of the DPT Program at Alvernia University.
Progression Activities:

The DPT Program will make every effort to assist students in identifying and addressing specific deficits in knowledge, behavior, and skill. As an adult learner and in keeping with the learner-directed philosophy of the Program, it is ultimately the student's responsibility to identify areas of deficiency and develop a plan for resolution. Progression activities designed to assist students in overcoming deficits observed in student knowledge, behavior, and skill will occur both formally and informally. When deficits in student performance are observed by an academic or clinical faculty member or by the student's academic advisor, the DPT Program will endeavor to provide timely assistance to support students in maintaining or returning the student to good academic standing within the Program. At the time in which a deficit in knowledge, skill, or behavior is identified, and upon consultation with the core faculty, the Program Director will invite the student to meet with the Academic Review Committee (ARC). The ARC provides the primary mechanism by which the Program will develop a formalized plan, referred to as a learning contract, to assist students in addressing deficits that are identified throughout the Program. Upon meeting with the student and considering all factors related to the deficit that has been identified, the ARC will develop a learning contract and inform the full DPT core faculty of the parameters of the contract. If a student behavior is found to be egregious, the student will not be offered the opportunity to further progress within the Program and may be immediately dismissed from the Program with or without the option to reapply at a later date. Egregious behaviors consist of any behavior in which the student knowingly disregards Program policies resulting in a situation which places themselves, other students, faculty, or patients/clients at risk for harm. Unsafe practices may be one manifestation of an egregious behavior, however, unsafe practice may also be an indicator of profound deficits in student knowledge and/or skill. Within the Program, unsafe practice is considered a serious offense and handled with fervent diligence at every level. From lab skill checkouts to practical exam criteria and throughout the clinical practice coursework, students who routinely engage in unsafe practice will not be allowed to continue within the Program. The decision to dismiss a student from the Program as a result of unsafe practice depends on the nature of the event and the student's history of similar events. Each case will be handled on an individual basis by the ARC. If a student is dismissed for egregious behavior or repeated episodes of unsafe practice, the services designed to support the student's retention and progression will no longer be available to the student.

During the time in which a student is on probation, all University and Program support services for retention and progression, as described above, are available to the student. The ARC may also recommend an action plan in which additional support and specific actions may be required of the student. In such cases, the full complement of University and Program support services are available to the student. The learning contracts developed by the ARC may require the student to access specific University and/or Program support services for the purpose of addressing the specific needs of the student. The full complement of support services offered at both the University and Program levels that are designed to support student retention and progression in the Program are outlined in the previous section.

Each learning contract will vary and is designed to address each student's specific needs. These contracts, which are explained elsewhere within this document, are designed to address each deficit through supplementary instruction and remediation that results in evidence that each deficit has been resolved. In addition to the support services previously described, students with identified deficits in knowledge, skill, or behavior who have been placed on a learning contract may be provided with the following support services designed to promote student progression within the Program:

Degree Requirements:

The Program's Degree Requirements policy is as follows: To qualify for the degree of Doctor of Physical Therapy from the Alvernia University DPT Program the following degree requirements must be accomplished: 1.) successful fulfillment of all graduate requirements of Alvernia University (see Alvernia University Graduate Catalog), 2.) successfully complete the minimum number of prescribed graduate credits (121 credits), 3.) successfully complete all 8 clinical education experiences with a grade of "Pass", 4.) achieve a cumulative GPA of 3.0 or better, 5.) complete the minimum number of prescribed graduate credits within 3 calendar years from the start of matriculation unless approved by the DPT Academic Review Committee, 6.) successfully pass all practical examinations with a 75%, or better throughout the curriculum, 7.) successfully pass the comprehensive examination with a 75%, or better at the conclusion of all required coursework, 8.) No student will graduate with
an incomplete grade in a course, 9.) demonstrate strong moral character and consistently exhibit professional behavior, 10.) students who have met the above criteria and plan to graduate must file a petition to graduate, as required by the University.

The grading system adopted by the DPT Program is similar to other graduate programs within the University. It is University policy that at the completion of a course, each student is assigned a letter grade by the primary course instructor based upon the scale below: A = 4.0 (94-100); A- = 3.7 (90-93); B+ = 3.3 (87-89); B = 3.0 (83-86); B- = 2.7 (80-82); C = 2.0 (73-79); F = Failure (72 and below). As described, if a student is unable to achieve a final grade of “C”, or better for any course, they are placed on academic probation and they must repeat and achieve a final grade of “C”, or better, in the course in order to continue within the program. An incomplete grade will be assigned only if there are extenuating circumstances preventing the student from completing all course requirements and the instructor, Department Chair, and Dean approve and sign the Submission for Incomplete Grade form. The completed form must be returned to the Office of Graduate & Adult Education by the final day of the course to have the incomplete grade posted. The student must complete and submit the assignments listed on the form to the instructor within four weeks of the exam period for a semester course. Incomplete grades that have not been changed by the instructor at the end of this period will automatically be changed to an “F.” No student will graduate or be able to proceed throughout the Program unless all courses have been completed. The University policy related to incomplete grades can be found under the heading, "Incomplete Grades" in the Alvernia University Graduate Catalog.

STUDENT WITHDRAW & DISMISSAL

DPT Program Policies & Procedures Related to Student Withdrawal & Dismissal:

The policies and procedures related to student withdrawal, dismissal, and probation are made available to all prospective and enrolled students in printed form upon admission to the Program.

Essential Functions: A student who is unable to perform these functions with reasonable accommodation for whatever reason will also be unable to fulfill the demands of a practicing physical therapist. In such cases, the students will be counseled toward a career path that is better suited for their individual talents. The list of Essential Functions can be found at http://www.alvernia.edu/academics/graduate/dpt/functions/index.html.

Academic Integrity: The Program’s Academic Integrity Policy is in alignment with the University’s policy described in the Alvernia University Student Handbook under the heading, “Academic Honesty”. This policy will be listed on every course syllabus within the curriculum as a reminder of this important contract between the program and the student. Violation of this policy is considered a serious breach of contract that will result in a failing grade on the assignment and penalties up to and including dismissal from the program without the opportunity to return.

Professional Behaviors: The Program places a high priority on the development of student professional behaviors. This is evidenced in several ways throughout the Program and breaches in professional behavior, which may result in probation or dismissal. Students of the DPT Program are representatives of their class, the DPT Program, the University, and the profession of physical therapy. Students are expected to dress appropriately for classroom and laboratory instruction and to be in professional attire when guests are present during classroom experiences. Professional attire is defined as that which would be acceptable in a physical therapy clinical setting. Hats of any kind are not permitted in class. Students are expected to be prompt for all scheduled activities. If a student is going to be late or will need to miss class or a scheduled event, the student is expected to call and notify the appropriate faculty member or Program secretary in advance. As graduate students, there is no mandatory attendance policy, however, course instructors have the freedom to implement policies for attendance and tardiness as they apply to individual courses. Such policies will be described in course syllabi which serve as the contract between the instructor and the student. When completing clinical experiences, students are expected to meet or exceed the expectations of the clinical setting with regard to professional attire, promptness, attendance, and completion of assigned tasks. Students who exhibit behaviors...
that are unprofessional may be required to meet with the Academic Review Committee, who may recommend or require a specific learning contract. Students who do not comply with required contracts, who commit egregious acts, or who continue to display unprofessional behaviors may be dismissed from the program. The professional behavior policy is as follows:

“As a future physical therapist, you will be expected to act professionally when interacting with colleagues, clients, families, and coworkers. Acting professionally includes, but is not limited to, being respectful of other’s opinions, obeying rules and procedures, avoiding gossip and demeaning dialogue, avoiding the use of profanity, demonstrating teamwork and collegiality, informing employers of absences and tardiness, and maintaining favorable relationships with others. With this in mind, the DPT Program faculty and staff will expect you to act professionally throughout all interactions. More specifically, faculty will expect the student: to inform them in advance of any absences or tardiness, to engage in respectful verbal and non-verbal communication in and outside of class, to avoid the use of profanity, to dress appropriately during all classroom and clinical situations, to interact with those from outside of the university with respect. I understand that violation of this policy is considered a serious breach of contract that may result in the development of a learning contract and/or penalties up to and including dismissal from the Program.”

Practical Examination Retakes: In alignment with the Program’s philosophy, which emphasizes clinical competence, the Program has instituted a practical examination re-take policy which requires students to pass a practical exam within 2 re-take attempts (3 times total). The specific policies and procedures related to the administration of practical examinations is an issue of academic freedom and is determined by each individual faculty member. Student assessment of cognitive, affective, and psychomotor knowledge and ability during practical examinations elevates the importance of these experiences throughout the curriculum. For this reason, students must demonstrate the ability to successfully complete all practical examinations. If a student fails a practical exam, he/she will have a maximum of 2 re-takes. Students unable to pass the practical exam within 3 attempts will fail the course in which the exam is required and will be unable to proceed through the curriculum. Specific testing policies and procedures are a matter of academic freedom and are, therefore, determined by the primary course instructor. This policy applies to the number of allowable re-examination attempts and the specific policies governing the scoring of any re-examination attempts relative to the determination of the final course grade. Any variation in this policy will be noted by the primary course instructor in each course’s syllabus which is distributed to each student at the beginning of each semester. The following policies shall serve as the minimum requirement regarding the practical examination process in all courses throughout the curriculum:

- **Passing Score:** Although the primary course instructor may require a higher passing score, the minimum passing grade for all practical examinations within the DPT Program is a 75%.
- **Maximum Re-examination Attempts:** If the student is not successful on the first attempt, a maximum of 2 re-examination attempts are allowed for each practical examination. Each student has a maximum of 3 attempts to pass each practical exam. Individual course instructors may require a more stringent re-examination policy.
- **Not Achieving a Passing Score on the Maximum Number of Re-examination Attempts:** If the student is not successful in passing a practical on the maximum number of allowable attempts for a course, a grade of “F” for both the practical exam and the course will be assigned. If a grade of “F” is received for the practical, and subsequently the course, the student will be unable to proceed through the curriculum and will, therefore, be placed on academic probation and will not be able to proceed through the Program until the student successfully passes the course the next time it is offered.
- In preparation for a practical reexamination, the student is expected to seek assistance and develop a schedule for review.
- Whenever possible, practical reexaminations will be videotaped for review purposes and will be evaluated by an instructor different from the instructor who evaluated the first attempt.
- This policy is subject to the individual preferences of the course instructor. The student is advised to become familiar with the specific requirements of each individual course.

Academic Performance, Probation, and Dismissal: The Program’s Policy for Probation and Dismissal is in alignment with the University policy described under the heading, “Academic Probation/Academic Dismissal” in the Alvernia University Graduate Catalog. The DPT Program policy for probation and dismissal is as
follows: Students enrolled in the DPT Program must maintain a cumulative GPA of 3.0, or better, on a 4.0 scale throughout the curriculum and a grade of “P” in all clinical education courses. A student may be placed on academic probation for the following reasons: 1.) A student whose cumulative GPA falls below a 3.0, 2.) A student who earns a semester GPA below 3.0, 3.) A student who earns a final grade of “C” in more than one course in the same semester, 4.) A student who earns a final course grade that is below a “C” or “P” thus indicating failure of the course. Students who receive a final course grade below a “C” or “P” will be required to re-take the course when it is next offered and will be unable to continue in the Program until they have successfully completed the course after which they will proceed through the Program a year later than anticipated. The student’s initial grade will remain on the student’s permanent transcript but the most recent course grade will be used to calculate the student’s cumulative GPA. Upon being placed on academic probation, the student will receive written notification from the Program Director that they are on probation and no longer in good academic standing and will be required to meet with the DPT Academic Review Committee (ARC), at which time a learning contract will be developed.

A student will be dismissed from the DPT Program for the following academic reasons: 1.) One additional semester after being placed on probation, a student is unable to attain a cumulative GPA at or above a 3.0, 2.) One additional semester after being placed on probation, a student earns a semester GPA below 3.0, 3.) One additional semester after being placed on probation, a student earns a final grade of “C” in more than one course in the same semester, 4.) A student who earns a final course grade that is below a “C” or “P” fails to earn a final course grade of “C”/“P”, or better, upon re-taking the course, 5.) A student who is on academic probation more than once throughout the Program will be dismissed. As per University policy, a student who has been academically dismissed may write an appeal letter to the Program Director and Department Chair if extenuating circumstances warrant a review of the academic record. Appeal letters should include documentation of the extenuating circumstances and at least one letter of support from the advisor or an Alvernia instructor. A student who does not appeal or whose appeal has been unsuccessful will no longer be enrolled in the Program and will not be entitled to Financial Aid. A student who has been dismissed for academic reasons may petition for re-admittance into the Program.

Unsafe Practice: Unsafe practice by students during lab or clinical experiences is considered a serious event and may lead to a student’s dismissal from the Program. All practical exams throughout the curriculum will assess and grade each student’s performance as it relates to safety. Significant or repeated issues related to safety during lab and/or practical examination experiences may put the student at risk for failing the examination and/or the course. The Clinical Performance Instrument (CPI) and the Integrated Clinical Experience Form also include criteria related to safety. The Clinical Instructor and/or the CCCE is encouraged to contact the ACCE immediately if an issue of safety arises with an affiliating student. Depending upon the nature of the issue, or in the case of repeated safety issues, a student may be at risk for failing the clinical education experience. During mid-term follow up and at the conclusion of each clinical education experience the ACCE, or designated alternate, will obtain information regarding the student’s adherence to safe practice guidelines. The policy for safe practice within the Program is as follows:

“A Physical Therapist’s primary obligation to his/her client is to avoid harm. As such, a student’s safe performance of all procedures and utilization of equipment during all lab and clinical education experiences is vital. For purposes of safety, students are required to observe recommended guidelines to ensure safe practice not only for others but for themselves as well. Students are expected to fully understand all indications, precautions, and contraindications that govern the use and implementation of all procedures prior to their use. In addition, students will be expected to have knowledge and observe best practice guidelines. Students who do not feel safe performing or receiving certain examination or intervention procedures are expected to make their concerns known and not engage in such activities until they feel safe to do so. Unsafe practice by students during lab or clinical experiences is considered a serious event and may lead to a student’s failure of the course and dismissal from the program.”

Comprehensive Examination: Every student in the Program must achieve a passing score of 75% on the
Comprehensive Examination in order to graduate. The purposes of the examination are as follows: 1.) to determine students’ knowledge in all areas of content contained within the curriculum, 2.) to determine students’ knowledge in all of the major practice patterns including musculoskeletal, neuromuscular, cardiopulmonary, and integumentary; and 3.) to determine students’ understanding of the impact of issues related to impairment, functional limitations and disability across the lifespan, 4.) to facilitate student preparation for the National Physical Therapy Examination (NPTE) toward achievement of a passing score. Students will take the comprehensive examination at the successful completion of all required didactic and clinical coursework as a 1 credit course. Each student must achieve a passing score of 75% on the exam to graduate. If a student is unsuccessful on the first attempt, 1 re-take will be allowed within the same semester. If the student is unsuccessful on the second attempt, the student will be required to register for DPT 810 (1 credit) each semester (fall, spring, summer) to remain a matriculated graduate student until a passing grade on the exam and course is achieved. Failure to register will make the student ineligible to sit for the examination. Students will continue to enroll in the course and will have only one opportunity to pass the exam within each semester, and so on until the student passes. Each student must achieve a passing score on the examination to graduate. See the DPT 810 Course Syllabus for details of requirements for the comprehensive examination.

Dismissal for Non-Academic Reasons: In addition to the policy on professional behaviors, the Program has instituted a policy of dismissal for non-academic reasons, which is in alignment with University policies. In addition to the specific programmatic requirements related to professional behavior, University policy states that students may be dismissed from the graduate program for any of the following non-academic reasons: 1.) failure to respect the rights of others as evidenced by verbal, physical or mental abuse of others, harassment of any kind, assault, or any action which endangers the rights of others, 2.) failure to abide by federal, state, and local laws which prohibit the use, possession and sale of illegal substances, 3.) failure to adhere to the various professional codes of ethics, such as the American Physical Therapy Association Code of Ethics, 4.) failure to function appropriately within the site placement settings, internships or practicums, as documented through evaluations by on-site supervisor and academic adviser.

In addition to University policy, the DPT Program will recommend dismissal to the Provost for the following non-academic reasons: 1.) Students will attest to their ability to perform all of the criteria within the Program’s “Essential Functions” document with or without reasonable accommodations. Should a situation arise in which the student is unable to perform all criteria described in this document, he/she will be unable to continue in the Program. For additional information regarding reasonable accommodations the student will be referred to the Alvernia website at http://alvernia.edu/student-life/student-success/ADAServicesandAccommodations.html. 2.) Misconduct outside of the Program that results in a felony conviction may make a student ineligible for licensure. Therefore, students who are convicted may be dismissed. 3.) Breaches in scientific misconduct as defined in the document, “Honor in Science”, breaches in academic honesty, breaches in the code of ethics and standards of practice as published by the American Physical Therapy Association, and breaches in the standards of clinical integrity as defined in the DPT Clinical Education Manual. 4.) Students who place their clients at risk physically and/or emotionally. 5.) Students who are unable to relate appropriately with others, including clients. 6.) Students who are unable to perform in a professional manner, including inability to adhere to professional work ethics, professional dress codes, and resistance to supervision. 7.) Students who are unable to use professional judgment, including seeking help for personal problems which interfere with professional practice, 8.) Students who are consistently unable to demonstrate the knowledge, values, and skills necessary for generalist PT practice, 9.) Failure to respect the rights of others as evidenced by verbal, physical or mental abuse of others, harassment of any kind, assault, or any action which endangers the rights of others, 10.) Failure to abide by federal, state, and local laws which prohibit the use, possession, and sale of illegal substances. Only the Provost may dismiss a student from the University for non-academic reasons. Students may appeal such a dismissal to the President of the University. This policy is delineated under the heading, "Dismissal from the Academic Program" in the Alvernia University Graduate Catalog.

Voluntary Withdrawal: Students for any reason and at any time may voluntarily withdraw from the Program. The tuition refund schedule for students who withdraw from the University and the policy regarding withdrawal from the University can be found under the heading, "Withdrawal Policies" in the Alvernia University Graduate
Catalog. Total withdrawal from the University applies only to students who submit in writing to the Office of G&AE Office their intention to completely withdraw from all courses. Reapplication and acceptance are required for these students to be readmitted after withdrawing from the University. The effective date of withdrawal is the date a completed official withdrawal notice is returned to the G&AE Office. Students who do not comply with the withdrawal procedure forfeit their right to any refund. If a student fully withdraws from the University following the end of the Withdrawal period and prior to the last week of classes, a grade of “Withdraw Pass (WP)” or “Withdraw Fail (WF)” will be assigned based on whether a student currently has a “B” average up to the point of withdraw from the University. Students withdrawing from Alvernia University will be held financially responsible for all costs and fees. Students who withdraw from a course for any reason will not be allowed to progress through the Program. Students may be eligible to re-enroll at a later time pending approval by the DPT ARC.

Medical Withdrawal: Inquiries regarding the medical withdrawal procedure are directed to the Director of Health Services, Claire Murphy, MD at:
Alvernia University
400 St. Bernardine Street
Reading, PA 19607-1799
Phone: 610-568-1467
Fax: 610-796-8422

Registration Change: As dictated by University policy, which is outlined under the heading, "Registration Changes" in the Alvernia University Graduate Catalog, each of the following constitutes a registration change: adding or dropping a course, withdrawing from a course after the add/drop period, or auditing a course. Schedule Change Forms are obtained from the G&AE Office and must be filed with that office to complete the process. The policy regarding each of the following types of registration changes are described below.

Add/Drop Period: The deadlines for the add/drop period are located on the academic calendar. Requests to add/drop a course must be received by 5 PM on the date listed. Students wishing to drop a course may do so by dropping via Self-Service or by completing the proper paperwork. Paperwork can be found on the Alvernia website, under the heading, “Current Students”, and “Printable Forms”.

Course Withdrawal: After the add/drop period has ended, a student may withdraw from a course by completing proper paperwork in the School of Graduate & Continuing Studies Office. A student may withdraw from a course up until the close of the withdrawal period with no academic consequences. Students withdrawing from a course will still be held financially responsible for all costs and fees. Refer to the Academic Calendar for deadline information at http://www.alvernia.edu/academics/calendar.html. Students who withdraw from a course for any reason, either within the add/drop period or after, will not be allowed to progress through the Program. Students may be eligible to re-enroll at a later time pending approval by the DPT ARC.

Student Eligibility for the National Physical Therapy Examination (NPTE):

In order to gain access to the NPTE, candidates must meet certain eligibility requirements from both 1) the state in which they seek licensure and 2) The Federation of State Boards of Physical Therapy (FSBPT). Students are encouraged to refer to the FSBPT website for updates and modifications regarding student eligibility and the process of applying for the NPTE.

Current FSBPT Eligibility Requirements (3/2015):

- You must be at least 18 years of age.
- Submit an online registration and pay the registration fee.
- Have a degree appropriate for the exam level from a CAPTE accredited institution, or
  - Be within 90 days of graduation from a CAPTE accredited institution.(NOTE: For PA state licensure, students may NOT take the NPTE prior to graduation); or
  - Have an education that is deemed substantially equivalent.
- Have only tested 3 times out of the last 4 test dates (Maximum attempts in any 12-month period per exam level is 3).
- Have complied with any test security requests made by FSBPT staff.
- Have completed any sanctions related to a disciplinary action taken by FSBPT or a jurisdiction licensing authority.
- Be approved by the licensing authority (board) in the state or jurisdiction where they intend to be licensed.

**2016 FSBPT Eligibility Requirements:**

The requirements below will be in addition to the current FSBPT requirements.

*FSBPT’s eligibility requirements are not the same as a jurisdiction’s requirements for licensure.*

- **Lifetime Limit**
  Candidates will be able to take the exam a maximum of 6 times. An individual can take the NPTE for PTs 6 times and also take the NPTE for PTAs 6 times if he or she is otherwise qualified to do so. Candidates will still be allowed up to 3 attempts per year but now will have a 6 time total limit. As of January 1, 2016, any candidate who has already tested 6 times will no longer be allowed to test unless a jurisdiction chooses to appeal this policy on a specific candidate’s behalf (see “appeals process” below).

Candidates who have not yet passed the exam received a notice from FSBPT in 2014 explaining the new requirement and implementation date. The notice period allows candidates to take up to 3 attempts in 2015. There will be no “grandfathering” for candidates who registered prior to this requirement going into effect. All candidates who do not have a passing score and have tested in the last 3 years will be notified of the changes and have until January 1, 2016 to pass the exam prior to the new requirements going into effect.

- **Low Score Limit:**
  Candidates who receive two very low scores on the exam, currently defined as performing at or close to chance level (scale scores 400 and below), will not be allowed to test again. Candidates who receive a very low score on the exam are notified that their performance is so far away from the minimal competence level that they need to engage in serious remediation, like enrolling in another PT educational program, before attempting the NPTE again and that another score that is very low (400 or below) may result in further action by FSBPT. As January 1, 2016, candidates who receive a score of 400 or less will be notified that a second score of 400 or less will result in a lifetime ban. No scores prior to January 1, 2016 will be considered, which means all candidates will have a “clean slate” with regard to this eligibility requirement.

**2017 FSBPT Eligibility Requirements:**

- **English Language Proficiency:**
  Most foreign-educated physical therapists/assistants will need to pass the TOEFL and meet FSBPT’s current score requirements. There are some exemptions to the TOEFL requirement for individuals who are exempt under the USCIS regulations. TOEFL scores must be reported directly to FSBPT for purposes of determining eligibility for the NPTE. States may have different requirements for licensure and submitting TOEFL scores to the FSBPT does not mean that a candidate has met state licensure requirements. For information on each state’s TOEFL requirements visit the state’s website. The current FSBPT TOEFL score requirement is in the table below.

<table>
<thead>
<tr>
<th>TOEFL Section</th>
<th>Minimum Score</th>
</tr>
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<tbody>
<tr>
<td>Reading</td>
<td>21</td>
</tr>
<tr>
<td>Listening</td>
<td>18</td>
</tr>
<tr>
<td>Writing</td>
<td>24</td>
</tr>
<tr>
<td>Speaking</td>
<td>26</td>
</tr>
</tbody>
</table>
• **Appeals Process:**

Candidates who are ineligible to register for the NPTE because they do not meet eligibility requirements will be able to appeal. Candidates who appeal will need to be able to demonstrate that they are qualified to take the NPTE and are a bona fide candidate for licensure in a state. **A candidate should remediate prior to reaching the 6-time lifetime limit or 2 low-score limit.** Appeals will not be accepted until registration opens for the 2016 exams. At that time this webpage will be updated with specific instructions on how to appeal and any appropriate forms.

**Jurisdiction Requirements:**

To approve a candidate to sit for the NPTE, at a minimum, jurisdictions will require:

The candidate is a graduate of or graduating from a PT or PTA program that meets the accreditation standards of the Commission on Accreditation in Physical Therapy Education (CAPTE) or is deemed substantially equivalent.

For a complete list of jurisdiction requirements visit the FSBPT website for the state in which you are seeking licensure. For PA licensure see State Board of PA at http://www.dos.pa.gov/ProfessionalLicensing/BoardsCommissions/PhysicalTherapy/Pages/default.aspx

**Graduation and NPTE Eligibility:**

The Alvernia DPT Program has an August graduation date. The earliest date, therefore, that Alvernia students will be eligible to take the NPTE is on the October test date. The FSBPT offers the exam on one day in January, April, July (on 2 consecutive days), and October. See the FSBPT website for details.
PART 5:
Program Policies
GRIEVANCE POLICY

Overview:

It is the practice of the University to direct formal complaints to the group best qualified to address the specific area of concern. Student or faculty complaints are directed to the grievance procedures in the student or faculty handbook; issues of ethics are directed to EthicsPoint; complaints concerning research are directed to the Institutional Review Board, complaints concerning Discrimination, Equal Employment or Harassment are directed to the Office of Student Life/Human Resources. Each of these bodies is responsible for following up on complaints and maintaining records of the disposition of each complaint. Student records related to formal complaints will be kept on file by the appropriate office within the University which includes the Provost's office for student, faculty complaints or issues of ethics, the Chair of the IRB's office for complaints related to research, and in the Human Resources office for any complaints related to discrimination, equal employment, or harassment. Any complaints made directly to the DPT Program such as complaints from clinical education sites, employers of graduates, and the public will be maintained in the student's confidential file located in a locked cabinet in the DPT Program Director's office. These files will be maintained in this fashion for a period of 5 years from the time of separation of the student from the University, after which they will be purged while maintaining confidentiality.

University policies related to the handling of complaints are presented and made available to students and faculty within the Alvernia University Faculty Handbook, Alvernia University Course Catalog, Alvernia University Graduate Catalog, Alvernia University Student Handbook, and Alvernia University Employee Handbook.

Program Policy for Handling Grievances:

An individual or organization who experiences an unfavorable experience with any student, faculty member, or staff member of the Alvernia University Doctor of Physical Therapy Program is able to file a written grievance. This grievance should be filed within 30 days of the offending incident(s) and should be addressed to the Doctor of Physical Therapy Program Director. The written grievance and any corrective action(s) will be kept on file in a locked cabinet in the Program Director's office for a period of 5 years, after which they will be purged while maintaining confidentiality.

Complaints should be addressed to:
Alvernia University
Doctor of Physical Therapy Program Director
400 Saint Bernardine Street
Reading, PA 19607

DPT Procedure for Handling Grievances:

The Program procedure for handling such grievances is as follows:
1. The party wishing to file a grievance should submit a detailed written explanation of the grievance to the DPT Program Director. The description of the complaint should be as detailed as possible and should include the names of all involved parties, dates of the incident(s), and any actions taken since the incident(s).
2. Upon receiving the written grievance, the Program Director will discuss the complaint directly with the complainant within 7 days from the date that the grievance was filed.
3. Based on the discussion with the complainant, the Program Director will develop a written plan to investigate and address the complainant's concerns. This written action plan will be sent to the complainant.
4. If the complainant is satisfied with the written action plan, a letter from the Program Director acknowledging the resolution of the complaint will be filed with the complaint in the Program Director’s office and a copy will be sent to the complainant.
5. If the complainant is dissatisfied with the written action plan developed by the Program Director or if the complaint is related to the Program Director, the complainant will be encouraged to submit a written grievance to the Dean of the College of Professional Programs. The Dean will contact the complainant directly and develop a written corrective action plan, which will be filed with the complaint in the Program Director’s office and a copy will be sent to the complainant. The Dean will meet individually or jointly with all parties involved to seek resolution.
6. If the complainant remains dissatisfied with the Dean’s written action plan for resolution, the complainant is encouraged to contact the Provost of the University. A written corrective action plan for resolution will be
developed by the Provost and filed with the complaint in the Program Director’s office and a copy will be sent to the complainant. A letter outlining the final resolution of the grievance by the Provost will be filed with the complaint in the Program Director’s office and a copy will be sent to the complainant.

7. A copy of the grievance and all written corrective action plans for resolution will be kept on file in the Program Director’s office for a period of up to 5 years from when the complaint was filed.

RIGHTS, RESPONSIBILITIES, SAFETY, PRIVACY, DIGNITY OF STUDENTS

The University policies and procedures that address the rights, responsibilities, safety, privacy, and dignity of DPT program students can be found under the heading “Community Standards” in the Alvernia University Student Handbook. More specifically, they can be found under the headings, “Students’ Personal Rights” and “Students’ Collective Rights”, “Student Code of Citizenship” and “Examples of Prohibitions that Flow from the Tenets of the Student Code of Citizenship”. All of the policies identified below will be made available to students via the catalogs which are identified below at the time of enrollment, either through the University homepage, the Program homepage, or in printed form upon request.

Student Background Checks and Clearances:

Additionally, applicants must understand that in order to meet Program outcomes they are obliged to directly work with children and/or older adults. There are no alternatives to meet these Program outcomes. Such applicants/students with convictions/charges documented on the criminal or child abuse reports will be denied acceptance into courses with associated clinical practice and, therefore, cannot complete the applicable program of study. Such applicants/students will be advised of other academic study options at Alvernia University and will not be admitted into the DPT Program. Convictions/charges documented on a PA Criminal Record Check report will be based on criteria outlined in Acts 169/13. To practice physical therapy, licensing beyond a college degree is required. Applicants may be denied employment for misdemeanors and felony convictions, including alcohol related offenses.

The Program will include written statements regarding background checks in marketing and catalog documents. Students will be advised of the background check policy prior to service learning (if required by the facility). Required background checks include the following: PA Criminal History Clearance (ACT 34) a Pennsylvania Child Abuse History Clearance (ACT 151) and an FBI Clearance ACT 114). Pennsylvania Acts 33 and 34 require that prospective employees of agencies serving children in public and private schools present evidence to a potential employer of any criminal record with the State Police, or statement from the State Police that such a record does not exist. Forms can be obtained from the DPT Secretary. The specific laws affecting background checks and the accompanying mechanism of checking are outlined within the DPT Clinical Education Manual University policy can be found in the Alvernia University Undergraduate Course Catalog under the heading, “Background Check Policy Academic Programs”, which can be accessed at http://www.alvernia.edu/academics/catalogs/11-12CourseCatalogFINAL.pdf. See Appendix B for additional information and the Background Checks Notification of Policy form that must be completed by all enrolled students of the Program.

Additional Student Fees:

Students will pay a $1,500.00 comprehensive program (student activity) fee, which will cover student-related costs. Costs associated with the need for emergency medical care while the students are involved in off-campus educational experiences will be handled by the student’s insurance coverage, which all students must have prior to admission into the program. Any deductibles, co-pays, or costs for care not covered by insurance will be the responsibility of the student and their families. Students will also incur additional costs related to textbooks and supplies that are required for each course. Students may incur travel and housing costs during any of the full-time clinical education experiences. See the DPT Clinical Education Manual for more information. Students will incur a $100 Graduation fee.

Confidentiality of Records:
The Federal Family Education Rights and Privacy Act of 1974 (FERPA) protects a student's educational records from unauthorized disclosure to third parties. A student must sign a consent form to grant access to his/her Community Standards record before the Office of Community Standards will disclose the information contained in the student's records, unless an exception is permitted by law. These privacy requirements apply to students' parents and/or legal guardians except for specific situations. Federal law makes an exception in these cases and does allow, but not require, the University to share Community Standards information. FERPA affords students certain rights with respect to their academic records. For information on FERPA rights, the student is directed to the Registrar's Office.

The policy related to the confidentiality of records that involve student disciplinary action is described in the Alvernia University Student Handbook under the heading, “Privacy of Community Standards Records”. The policy for student inspection of their records is under the heading, "Inspection of Community Standards Records" and parent review of student disciplinary file records is found under the heading, “Parent/Legal Guardian Notification”. The policy regarding the making of amendments to disciplinary records is found under the heading, “Amendment of Records”.

Release of Medical Information to Clinical Sites:

The policy for the release of medical information to clinical sites is described in the DPT Clinical Education Manual under the heading, “Authorization to Release Medical Information” along with the Authorization to Release Medical Information Form. All full-time, undergraduate Alvernia University students and students pursuing a health-related degree are required to submit a completed Medical History Form and proof of having received a Physical Examination by a physician to the University Health and Wellness Center. Health records maintained by the Health and Wellness Center are confidential and will be released only with written permission. Students are responsible for completing and submitting the Authorization to Release Medical Information Form (Appendix to the Health & Wellness Center located in Veronica Hall) in order that information requested by clinical sites may be made available to them. Students are responsible for maintaining communication with the Director of Health Services and for assuring that current information is on file in the Health & Wellness Center. Information shared with Teaching or Clinical sites becomes part of the student’s Educational Record under FERPA. This includes, but is not limited to, immunization records, physical exams, Tuberculosis test, and drug screens.

The only information that the DPT program maintains are the summary reports sent out by the Health and Wellness Center regarding student completion of health requirements and a copy of the students’ health insurance card and HIPAA training. The Health and Wellness center records include: immunization records, PPD, physical exams and drug screens, and the medical history tracking form, which is reviewed prior to each semester. All students must have up to date records with the Health and Wellness Center in order to begin each clinical education experience. Specific health requirements for each clinical education site are retrieved through communication with the ACCE upon confirmation of the clinical education experience. Students are informed that sites may have additional health requirements and that they will need to comply with all site health requirements prior to the start of their educational experience. Students will be informed of these additional requirements within a sufficient period of time to ensure compliance. Students are expected to present all necessary clearances and health requirements on the first day, or prior to the start of the clinical experience, as requested.

Protection of Information used for Verification of Student Identity:

The DPT Program will protect information that may be used to verify student identity in accordance with University policy as dictated by FERPA. As described above, this Act protects student educational records from disclosure to third parties. Information that may be used to verify student identity will be protected and only information required by Alvernia faculty and staff to safely and effectively engage the student in the course of study will be provided. Information that may be used to verify student identity will be contained within the student’s file and maintained in a locked cabinet in the locked DPT Program Office and available only to Alvernia faculty and staff who are directly involved in the student’s course of study. Prior to disclosure of any information to other parties for educational purposes, such as clinical sites or associated faculty, students will be asked to provide written approval to release this information to the Registrar’s Office and DPT Program Director.
During all clinical education experiences, Alvernia University DPT students will maintain ID cards and name badges at all times when they are at the off-campus clinical site for the purpose of identification. The policy for protection of student identifying information can be found in the DPT Clinical Education Manual under the heading, “Student Identifying Information”.

**Information Shared with the Clinical Facility:**

For purposes of safety, each student’s medical record will be shared with teaching or clinical sites and becomes part of the student’s Educational Record under FERPA. This includes, but is not limited to, immunization records, physical exam records, Tuberculosis test drug screens, as well as any other additional records as required by each specific facility. This information is shared by the University Health and Wellness Center pursuant to the student’s completion and submission of the Authorization to Release Medical Information Form. The policy for sharing health-related information is described previously and outlined in the DPT Clinical Education Manual. Additional information regarding the student is provided to the clinical site on the Student Clinical Information Form, which is completed by the student and will be sent to the Center Coordinator of Clinical Education (CCCE) at the time in which the clinical education experience is confirmed. The specific laws affecting background checks and the accompanying mechanism used to perform the background check are outlined in the DPT Clinical Education Manual. To protect student confidentiality, details regarding the student’s academic status will not be routinely communicated to clinical sites. However, clinical sites will be informed by the ACCE if a student assigned to a specific clinical site is unable to engage in the clinical practice experience for academic reasons or if they have been dismissed from the Program as soon as the issue has arisen. The ACCE will also inform the CCCE/CI if a student is entering the clinical education experience with a learning contract ion place. The details of the learning contract will be communicated so that it is clear what is expected of the CI and the student during the clinical experience and to allow the CI to determine if he/she is capable of fulfilling the requirements of the contract. The policy and procedure for sharing confidential student information with clinical sites can be found in the DPT Clinical Education Manual under the heading, “Protection of Confidential Student Information”.

**Request for Accommodation:**

The DPT Program has adopted a policy of non-discrimination. All students must successfully perform, with or without reasonable accommodation all of the Essential Functions contained in Part V of this manual. Alvernia University determines its ability to meet the specific requests of special needs students on a case-by-case basis. Reasonable accommodations, as defined by Act 504 and the Americans with Disabilities Act (ADA), are provided when students self-identify and provide documentation to the University’s Disabilities Services Coordinator. In accordance with Act 504 of the Rehabilitation Act and the Americans with Disabilities Act (ADA), the University offers accommodations to students with documented learning, physical and/or psychological disabilities. It is the responsibility of the student to contact the ADA coordinator, preferably prior to the beginning of the semester, to initiate the accommodation process and to notify instructors as soon as possible to develop an accommodation plan. Course requirements will not be waived but, if possible, reasonable accommodations will be made to allow each student to meet course requirements. Students needing assistance should contact the Disabilities Services Coordinator in BH 1121-A, at 610-796-8423. Details on academic support for special needs students can be found in the “University Procedures” section of the Alvernia University Student Handbook and in the DPT Program Student Handbook both of which are issued to enrolled students upon admission to the program.

**Professional Liability Insurance Requirements:**

Professional liability insurance coverage is provided for DPT Program students through United Educators - Policy No. LPD201200273700 (www.ue.org), which is renewed annually on July 1 beginning at 12:01 a.m. at address of 400 Saint Bernardine St., Reading, PA 19607 with the retroactive date of the previous July 1 at 12:01 a.m. The limits of liability (including defense costs) are $1,000,000 each claim, $3,000,000 annual aggregate, with a deductible of $10,000 per claim.

Students enrolled in the Program are automatically covered and do not need to enroll for professional liability coverage. Students are expected to immediately report any incident related to or arising out of a Professional Service or Professional Internship Program to the DPT PD and/or ACCE who in turn will report the incident to Alvernia University’s insurance carrier. The policy covers any actual or alleged wrongful act in the performance or failure of performance of any professional service or while performing services in a professional internship.
program. Professional services are activities that may only be legally performed by a person holding a professional license, regardless of whether the person is licensed or not; and, whether the person is an employee, uncompensated volunteer or independent contractor of Alvernia – as long as they are acting within the scope of his or her professional license and only while acting within the scope of his or her duties assigned by the Included Entity (i.e. Alvernia or internship site). It does not include any activity for which an employee is compensated by any party other than an Alvernia or internship site.

Potential Health Risks and Standard Precautions:

The Occupational Safety and Health Administration (OSHA) requires that all health care workers understand the dangers of blood borne pathogens and how to protect themselves and others through the use of standard precautions. The DPT Program, as well as many of the contracted clinical facilities require that students have been educated in regards to standard precautions. The DPT Program provides education regarding standard precautions within the first semester of the Program in DPT 522: Clinical Practice I and revisits this principles in subsequent coursework. This session is mandatory and students must sign a declaration page indicating that they have received such training, which will be placed in the student’s clinical education file in the office of the ACCE. A copy of this signed document will be provided to a student's assigned clinical facility, upon request. During each clinical experience, students are required to follow all clinical facility policies regarding blood borne pathogens. Such policies include, but are not limited to, standard precautions, regular hand washing, and the appropriate use of personal protective equipment such as gloves, gowns, masks, and goggles. Any potential exposure to body fluids must be reported via the facility’s reporting mechanism with an additional report made to the ACCE. Any follow-up care will occur upon the advice of a physician.

Exposure Control Plan:

Policy: The DPT Program’s Exposure Control Plan is designed to reduce the chances of exposure to blood borne pathogens that individuals in the DPT Program may encounter during classroom, laboratory, or clinical education experiences. Blood borne pathogens include, but are not limited to, the hepatitis B virus (HBV), hepatitis C virus (HBC), and human immunodeficiency virus (HIV). The following information will serve as a supplement to the guidelines put forth in the Exposure Plan written for all employees of Alvernia University. These guidelines were established by the Occupational Safety and Health Administration (OSHA) standard, 29 CFR 1910.1030. This plan specifically focuses on the following individuals: 1.) Licensed Physical Therapists serving as clinical or associated faculty involved in educational activities with DPT Program students, 2.) Core DPT Faculty involved in educational activities with DPT Program students, 3.) DPT Program students engaged in classroom, laboratory, or clinical education experiences within the curriculum, 4.) DPT Program students engaged in pro bono services or service-learning activities arranged through the Program.

Procedure: All DPT core faculty and students must attend an annual training seminar on blood borne pathogens. The University will be responsible for providing this information and training. All employees are encouraged to review the detailed exposure control plan developed by the University, which is available in the Health Center. It is important that all bodily fluids are treated as if they contain a blood borne pathogen. The following activities may place an individual at risk for encountering the potential exposure to a blood borne pathogen: performing CPR that includes resuscitation using mouth to mouth; dressing wounds, burns, blisters; managing an ill individual (vomitus); suture/post-surgical dressing removal; assisting physicians with procedures or operating room observation; proper disposal of soiled linens and towels; cleaning tables and infected areas; proper disposal of biohazard waste.

Compliance: The goal of compliance in preventing disease transmission of blood borne pathogens is achieved in several ways. Appropriate engineering and work practice controls along with practicing Universal Precautions can help protect all members of the Program. Appropriate containers for biohazard waste along with personal protective equipment are available in the DPT learning space. All waste soiled with potentially infectious material should be disposed of in specific containers for hazardous waste and labeled accordingly. Appropriate hygiene measures (i.e. hand washing) should be performed immediately after care of a sick and/or injured individual. Antiseptic gels or wipes will be used for routine cleaning of equipment. Areas that are in direct contact with individuals will be cleaned using antiseptics after each use. If hands come in contact with any bodily substance or materials contaminated by a bodily substance, they should be washed with soap and water immediately. A sink
with antiseptic hand cleanser is available in the DPT learning space. No food or drink will be allowed in the DPT learning space due to possible exposure to blood borne pathogens. It is important that personal protective equipment be used when the potential for exposure exists. This equipment consists of the following: latex gloves, goggles, face shields, CPR masks, and gowns. Any equipment that is single use should be disposed of in red biohazard bags. Any sharps instruments (i.e. needles or scalpel blades) should be placed in an appropriate sharps container. An appropriate disinfectant solution will be made available in the circumstance that any surface is soiled with blood or body fluids. All surfaces used during lab experiences will be routinely cleaned using disinfectant solution.

Post-Exposure: In the event that an exposure incident occurs, the involved individual must contact his/her direct supervisor or faculty member. If the supervisor is unable to be contacted, treatment should not be delayed. The following steps should be taken after an attempt to contact the supervisor: 1.) Wash the affected area with soap and water. If an eye splash injury occurs, flush the eye with water, 2.) Go immediately to the nearest Emergency Room with your source individual, if feasible, 3.) If an individual is at an off-campus clinical facility at the time of exposure, go to the nearest emergency room in the respective area. Do not wait until you return from the experience or activity before receiving care, 4.) the involved individual should follow-up with recommended care as directed by the Emergency Department personnel, 5.) the involved individual should inform the DPT Program Director of the event and inform him/her of the recommended treatment plan and any treatment that has been provided since the exposure.

It is important that documentation of the incident also takes place immediately on the Exposure Incident Report form (Appendix C). This document will contain the route(s) of exposure and how the exposure occurred. The exposed individual will be given the option for baseline blood testing. If the source individual is known, they will be given the option to consent for testing to determine HIV, HCV, and HBV status. If the source individual is already known to have a blood borne disease, new testing does not need to be performed. If their status is unknown and they consent to testing, laws protecting the confidentiality of this information will be followed.

Storage and Use of Hazardous Materials:

The DPT Program maintains compliance with OSHA’s laboratory health standards. Occupational Exposures to Hazardous Chemicals in Laboratories (29 CFR 1910.1450) requires employers of laboratory employees to implement exposure control programs and convey chemical health and safety information to laboratory employees working with hazardous materials. Specific provisions of the standard require: 1.) laboratory inspections, 2.) establishment of standard operating procedures for routine and “high hazard” laboratory operations, 3.) research protocol safety reviews for procedures, activities or operations which employer believes to be of a sufficiently hazardous nature to warrant prior approval, 4.) employee exposure assessments, 5.) medical consultations/exams, 6.) employee training, 7.) labeling of chemical containers, and 8.) the management of chemical safety information sheets (Material Safety Data Sheets) and other safety reference materials. The standard’s intent is to ensure that laboratory employees are apprised of the hazards of chemicals in their work area, and that appropriate work practices, procedures and controls are in place to protect laboratory employees from chemical health and safety hazards.

The Alvernia University Chemical Hygiene Plan-Document ID No. S-2 provides the standard operating procedures (laboratory practices and engineering controls) that identify the safeguards that should be taken when working with hazardous materials. These safeguards will protect the students and faculty from unsafe conditions in the vast majority of situations. There are instances, however, when the physical and chemical properties, the proposed use and quantity used for a particular purpose or the toxicity of a substance will be such that either additional or fewer controls might be appropriate. Individual laboratories may modify these procedures to meet their specific uses and operational needs. These modifications, however, must be in writing and maintained in the laboratory with a copy of this document. In addition, the Hazardous Materials Safety Committee should also be informed of these changes. The manner in which Alvernia University is complying with each of the elements in OSHA’s laboratory standard is detailed in the Chemical Hygiene Plan. An official copy of this document is located in the Facilities Department Office. It is available for review between the hours of 8:30 and 4:30 Monday through Friday when the university is open. Copies of this plan are also available in the reference section of Franco Library.
Within this document, important information regarding the storage and use of hazardous materials can be found under the following headings: “Chemical Hygiene Responsibilities” are described on page 1, “Hazardous Chemical Definition” is defined on page 3, “Hazard Identification” on page 4. “Chemical Safety Training” on page 5, “Material Safety Data Sheets” on pages 6-9, “Laboratory Safety Information Sources” on page 10, “Good Work Practices/Procedures for Handling Laboratory Chemicals” on page 11, “Personal Protective Clothing and Equipment” on page 13, “Laboratory Safety Equipment” on page 16, “Chemical Storage Requirements” on page 18, “OSHA’s Laboratory Health Standard” on pages 61-70, and “Laboratory Safety Reference Material” on page 72.

Safety Regulations and Emergency Procedures:

Safety regulations and emergency guidelines are outlined in the Alvernia University Emergency Guidelines and Procedures Manual, which are provided to students upon admission to the University. An Emergency Procedures Placard is also posted in every classroom on campus to advise students and faculty about emergency procedures. Additional questions regarding emergency procedures can be obtained by contacting the Alvernia University Public Safety Department at 610-796-8350. Within the Alvernia University Emergency Guidelines and Procedures Manual, important information regarding safety regulations are included under the following headings: “Emergency Reporting Procedures”, “Call Box Locations”, “Evacuation, Sheltering, and Lockdown”, “Fires”, “Medical Emergencies”, “AED’s”, “Natural Disasters”, “Violent or Criminal Behavior”, “Sexual Assault”, “Civil Disturbances”, and “Bomb Threats”.

The Alvernia University Crisis Management Plan is available to students upon admission. This document includes important information under the following headings: "Emergency Service Phone Numbers", "Emergency Personnel Team", "Emergency Team Phone Chain", "Types of Emergency Incidents", and the "Crisis Disaster Response System".

In an effort to ensure the safety and security of the Alvernia community, the University has adopted E2 Campus. E2 Campus is a campus-wide, text-messaging system that will enable Alvernia University officials to communicate with registered students, faculty, staff, and parents in the event of a catastrophic emergency. E2Campus is voluntary, but students, faculty, and staff are encouraged to register. It is the surest and most efficient way to provide information that is critical to the safety and well-being of everyone in the University community. This policy is described under the heading, "E2 Campus Registration" in the Alvernia University Emergency Guidelines and Procedures Manual.

The closest Automated External Defibrillator (AED) to the DPT learning space is located in the gymnasium on the wall near the exit doors facing Room 112 in the Physical Education Center (PEC), which is located just directly above the DPT learning space. Another AED is located in the Athletic Training Room, which is located one floor above the DPT learning space in the PEC. A third AED is located just outside of the Athletic Director’s office (Room 205) in the PEC. During CPR training, DPT students will learn how to safely use an AED.

OSHA 29 CFR 1910.157(d)(2) and NFPA 10 Chapter 6.2.1.1 mandate that the distribution of portable fire extinguishers allow for a maximum travel distance of 75 feet for a Class A fire extinguisher. One portable fire extinguisher is located in the DPT learning space just outside of the ACCE’s office, which fulfills this regulation. In accordance with OSHA and NFPA regulations, the Alvernia University Fire Prevention Plan requires that only trained employees are authorized to use a fire extinguisher. Alvernia University offers fire extinguisher training on a regular basis. The PD will undergo fire extinguisher training on a regular basis to ensure proper use.

Maintenance of Equipment:

The dedicated DPT learning space, classroom space, and faculty offices will be maintained by the Maintenance Department of Alvernia University. Such maintenance will include routine cleaning and general repairs. Annual inspection and maintenance of fire extinguishers will be addressed by the Maintenance Department. Muhlenburg Medical Repair, Inc. at 127 W Summit Street, Mohnton, PA 19540, (610) 777-9693 will be contracted to perform annual equipment inspection and repairs that exceed the limitations of warranties.

Regular cleaning of the equipment and facilities will be performed on a weekly basis through the use of work study students who have been assigned to the DPT learning space. During weekly cleaning, work study students will
take inventory and report to the Program Director any supplies that need to be re-ordered or equipment that must be repaired. At the end of each semester, work study students will take a formal inventory of equipment and supplies using the “DPT Equipment and Supplies Checklist”. This list includes the name and amount of all equipment and supplies located within the DPT lab. DPT students and faculty will also be encouraged to clean all equipment after each use and to report any items that need to be repaired or re-ordered. In addition to weekly cleaning, thorough cleaning of the DPT lab space will occur at the conclusion of each semester by DPT work study students and University maintenance staff.

Classroom and Laboratory Access:

During the semester while classes are in session, currently enrolled DPT students will be given access to the DPT Program learning space on the ground floor of the Physical Education Center (PEC) on Alvernia University’s main campus between the hours of 7:00am until 11:00pm with extended hours during examination week. Campus security will routinely patrol the building and surrounding area 24 hours/day, 7 days/week. An emergency phone will be available at the entrance of the DPT learning space to allow students to contact campus security in case of an emergency. Information related to procedures to follow in the case of an emergency as well as an evacuation route is posted in the DPT lab space. Campus security will be available 24 hours/day, 7 days/week to provide assistance as needed.

All DPT students will be oriented to the lab during their first semester in the Program. This orientation will include the location of AED’s, external phone line, fire extinguisher, and all equipment that is at their disposal. The policies that govern student use of the learning space are posted on the DPT Lab Use Policy Placard within the learning space. Each student will acknowledge their acceptance of these policies by affixing their signature to the front page of the DPT Policies & Procedures Manual during orientation. The following policies, will govern student use of the DPT lab in the Physical Education Center (PEC):

- Only DPT students who are currently enrolled in the DPT Program will have access to the lab before, during, and after classroom hours. No other students may use the lab space without the consent of the DPT Faculty.
- Only DPT students are permitted to utilize the equipment located within the DPT lab including, but not limited to, computers, printers, screen, exercise equipment.
- DPT students will utilize the lab at their own risk.
- DPT students will be expected to utilize only the equipment for which they have been trained during their coursework within the DPT Program at Alvernia.
- DPT students must follow all precautions and contraindications for the use of all equipment.
- DPT students using the lab must properly clean all equipment after each use and restore the lab to a neat and orderly appearance after each use.
- DPT students will remove shoes when using the tables and any other clothing or accessories that may damage the equipment (i.e. belt buckles, jewelry, etc).
- If equipment is damaged, the responsible party should inform DPT faculty or staff immediately.
- No equipment or supplies will be removed from the lab without the consent of the DPT faculty.
- The last person to use the lab must lock all doors before leaving.
- To gain access outside of normal classroom hours, students will utilize their identification cards to operate the card access system located at the external door of the building and at the inside door to the DPT lab. The card access system provides information to campus security regarding student use of the DPT lab.
- Students must maintain their ID cards to verify their identity the entire time that they are within the building.
- An elevator is available to gain access to the ground floor of the PEC and is available for student use during open lab hours.
- The DPT lab will be available for student use when the PEC is open. The DPT lab will be open for extended hours during mid-term and finals week.
- Before and after classroom hours, students are encouraged to enter the DPT lab in the company of at least one other classmate.
- Students should contact Campus Security immediately if any issues arise at (610) 796-8350. A phone is available in the DPT lab for student use as needed.
Due Process:

Alvernia University’s policies related to ensuring that students are provided with the fundamental principles of justice and entitled to proper legal procedures are provided in the Alvernia University Student Handbook, which is distributed to all students upon admission to the University by the Admissions Office. These policies are described under the heading, “Community Standards”, “Students’ Personal Rights”, “Students’ Collective Rights”, and “Rights of Accused Students”. The process for corrective actions are provided under the headings, “Interim Suspension”, “Community Standards Conferences”, “Preliminary Conference”, “Reconsideration of Sanction”, “Formal Administrative Conference”, and “Sanctions”. The process for student appeals is described under the heading, “Appeal Process” and the policy related to confidentiality is also fully described under the heading, “Confidentiality of Student Records”. University policies related to student appeals as it relates to academics are described in the Alvernia University Graduate Catalog under the headings, “Student Appeals”, “Appeal of Grades”, and “Due Process for Grade Appeals”. The University’s due process policy related to a student’s dismissal from a program or the University is described under the headings, “Dismissal from the Academic program”, “Dismissal from the University”, and “Due Process for Dismissal from a Program or the University”.

Protected Health Information (PHI):

During Program orientation, students will be introduced to the proper use of PHI. Formal HIPAA training will be conducted as part of the course requirement for DPT 522, which occurs in the first semester of the Program (see "HIPAA Training" below). Students will be expected to strictly follow all guidelines established by the host clinical site related to the use of PHI. Students will receive further instruction related to PHI and HIPAA throughout the Administration and Education track of the curriculum, most specifically in DPT 604 and 704 (see course syllabi). Students will be tested to assess their comprehension of this information. In addition, DPT faculty will model strategies for proper handling of PHI as they incorporate actual patient scenarios into regular classroom and lab teaching activities and as they integrate actual patients into classroom teaching situations. DPT faculty and staff will be informed of the Program’s policies and procedures related to the use of PHI by requiring all faculty and staff to read and acknowledge acceptance of policies pertaining to PHI contained within the DPT Policies & Procedures Manual, upon hire.

Health Insurance Portability & Accountability Act (HIPAA) Training:

It is the policy of Alvernia University College of Professional Programs’ related to health-related professions Health Care Students and Faculty (Athletic Training, Nursing, Occupational Therapy, Social Work, and DPT) to participate in a mandatory online Health Insurance Portability and Accountability Act (HIPAA) Education Session prior to entering the clinical education coursework. The goal of this program is to identify HIPAA initiatives regarding patient privacy and data security and to help healthcare workers comply with the guidelines. HIPAA training course objectives include: 1.) Describe the overall purpose and goals of the HIPAA, 2.) Discuss the compliance issues with privacy reforms, including written notice, acknowledgement, prior authorization, and minimum disclosure, and 3.) Discuss compliance with data security reforms, including issues regarding workplace layout, information storage, and rules covering conversation. During these training sessions, the specific Program policies related to HIPAA as well as student expectations will be provided with ample time for students to ask questions. At the conclusion of these training sessions, students will sign a “proof of HIPAA training” form and they will be expected to adhere to all policies and procedures related to HIPAA when interacting with individuals from outside of the University (see Appendix D). Prior to embarking on each clinical practice course, students will engage in a review of HIPAA and the policies that govern the protection of PHI as it applies to specific clinic requirements.

The College of Professional Programs procedure for HIPAA Training requires students to:

1. Access the online HIPAA for Healthcare Workers program by MEDCOM TRAINEX through the website: http://www.medcomrn.com/alvernia. Any computer with online access may be used.
2. Create an account following directions on the screen. There is not an Alvernia identifier, so they can use any ID and Password to gain access.
3. Enter personal registration information following directions on the screen.
4. Proceed to program instructions.
5. Complete all three (3) programs:
   a. HIPAA for Nurses: An Overview
   b. HIPAA for Nurses: The Privacy Rule
   c. HIPAA for Nurses: The Security Rule
6. Complete all three posttests, program evaluations and print certificates.
7. Provide the DPT Program secretary with all three (3) program certificates by the due date that will be provided.

**RIGHTS, RESPONSIBILITIES, SAFETY, PRIVACY, DIGNITY OF INDIVIDUALS INVOLVED WITH THE PROGRAM**

**Use of Human Subjects for Educational Purposes:**

To enhance the learning experience for students, faculty will seek to utilize human subjects during classroom and laboratory learning experiences intermittently throughout the curriculum. These subjects will be invaluable in allowing students to observe individuals with real impairments and thus facilitate the connection between didactic knowledge and clinical skill. Informed consent is required for all individuals prior to their participation. Informed consent from an individual's legal guardian or power of attorney is required for minors and those unable to make decisions for themselves prior to participation. See The Consent to Participate In a Learning Experience (Appendix ??). Prior to entering the classroom environment, the instructor must seek to identify the patient’s wishes in regards to the parameters during the classroom experience. The extent to which care may be provided and whether or not students may be involved in providing care to the patient during classroom experiences will be decided upon by each subject. The instructor will clearly communicate the expectations for the class to the patient and answer any questions that they may have. The patient’s decision to be involved, and to what extent, will in no way impact the care that they are receiving outside of the teaching environment. Should the individual consent to allow student involvement in examination and intervention, the primary course instructor will provide direct, onsite supervision and ensure safe practice. The individual may at any time, choose to discontinue the session or may refuse a particular intervention or specific student or instructor from performing a particular intervention. Following the experience, subjects will debrief with the instructor for the purpose of answering questions and to assess the individual’s response to the experience. Prior to participation, any individual involved in a classroom teaching experience will sign a "Classroom and Laboratory Participation in Teaching-Learning Activity Guest Indemnity Agreement" form.

Students will be informed of the Program policy related to the use of human subjects and will be required to review these policies in the appropriate DPT manuals. The primary course instructor will review this policy and students will be informed about how this experience will take place. DPT faculty and staff will be informed of the Program’s policies and procedures related to authorized use of material by requiring all faculty and staff to read and acknowledge acceptance of all policies contained in DPT Handbooks and Manuals upon hire.

**Policies and Procedures Related to Human Subjects Research:**

The Alvernia University Institutional Review Board (IRB) maintains ethical standards for research that involves human subjects, which is an integral part of the professional development for the faculty and the University. The function of this Institutional Committee is to formulate, recommend, and oversee policies and procedures for conducting research with human participants. The privilege of conducting human subject research is granted based on a responsibility to engage in ethical research, respecting the rights of participants, and acting in a manner that is consistent with the values of the University. The IRB protects the rights, safety, and welfare of human research participants by adhering to the policies of the U.S. National Institutes of Health when conducting human subjects research. University policies and procedures related to human subjects research can be found on the IRB webpage at http://www.alvernia.edu/facstaff/irb/index.html and in the Alvernia University Graduate Catalog and the Alvernia University Faculty Handbook under the heading, "Institutional Review Board". Policies and procedures involving human subjects research are published and available to students and faculty. Within the DPT Program, students will be informed of these policies through formal instruction primarily in DPT 713 and 714 during the third year of the Program. Within these courses, students and faculty will be collaborating in the development of a research project. Prior to data collection, each student-faculty group will submit for University IRB approval. Students will learn first-hand the process for submitting and securing IRB approval (see
Policies that apply to individuals involved in the Program can be found under the following headings: "The Use of Protected Health Information (PHI)", "The Use of Information Obtained from Clinical Sites", "Patient Refusal to Participate in Clinical Education", "Obtaining Authorized Use of Patient/Health, Professional-Related Material or Images", and "Protection of Clinical Instructor Information" in the DPT Clinical Education Manual. Policies and Procedures Related to Human Subjects Research can be found in the Alvernia University Graduate Catalog and the Alvernia University Faculty Handbook.

Policy for Student Use of Technology During Class:

The use of technology during class may limit the student's learning experience and the learning experiences of other students. For this reason, Doctor of Physical Therapy students are prohibited in the personal use of technologic devices (cell phones, tablets, computers) during in-class time except for class activities or emergency situations. Students may keep their devices accessible during class, however, instructors reserve the right to ask the student to remove the device from sight if the student fails to follow this guideline. Students are prohibited from carrying or using technologic devices during written or practical examinations. Repeated use of devices during class may result in the removal of the student from class or a reduction in a student's grade.

ESSENTIAL FUNCTIONS

The DPT Program at Alvernia University, in compliance with the Americans with Disabilities Act (ADA), does not discriminate against qualified individuals with disabilities. A person qualified for the DPT program is one who has met academic standards and is able, with or without reasonable accommodations, to meet the essential functions of a physical therapist, in alignment with current practice as determined by several sources as referenced. The Essential Functions adopted by the Alvernia University DPT Program are available on an ongoing basis at http://www.alvernia.edu/academics/graduate/dpt/functions/index.html.

These essential functions are the activities that a student physical therapist must be able to perform, with or without accommodations, in partial fulfillment of the requirements for successful completion of the professional curriculum. They are applicable in the classroom, laboratories, simulated clinical settings, and on clinical education assignments. Alvernia University uses independent clinical education sites that may or may not be able to offer the same reasonable accommodations made available by the university.

The list of essential functions is designed to assist students interested in the DPT program to make informed decisions about career options. Additional requirements and competencies are outlined in course syllabi and on the clinical performance instrument. The Essential Functions must be completed in all settings, which include highly complex environments, and within a time frame that is consistent with actual clinical practice. If it becomes apparent that a student is unable to fulfill each essential function with reasonable accommodation or if the needed accommodations are beyond what would be considered reasonable thus causing undue hardship to the university or harm to others.

The Alvernia University DPT Program Essential Functions document has been developed to achieve compliance with the following statutes: the Americans with Disabilities Act of 1990, the ADA Amendment Act of 2008, and Section 504 of the Rehabilitation Act of 1973. ADA records are maintained by the Disability Services Coordinator. Information related to ADA, Discrimination, and Title IX can be found on the University website at http://www.alvernia.edu/student-life/index.html. Questions should be directed to the Disability Services Coordinator located in Bernardine Hall, Room 1121, and by phone at 610-796-8423. For questions, concerns, or to request review of a request for accommodations, students should contact: Vice President for University Life and Dean of Students, 400 St. Bernardine Street, Reading, PA 19607, 610-796-8211, joe.cicala@alvernia.edu.
**Essential Functions in the Affective Domain:**
1. Interact effectively and sensitively using appropriate verbal, nonverbal, and written communication skills with faculty, peers, other members of the health care team, and patients/clients, and caregivers.
2. Read, write and interpret written and nonverbal communication at a competency level that allows one to safely function in classroom, laboratory, and clinical settings.
3. Recognize the impact and influence of age, lifestyle, family or peer support, socioeconomic class, culture, beliefs, race, and abilities on faculty, peers, other members of the health care team, and patients/clients, and caregivers.
4. Recognize the psychosocial impact of movement dysfunction and disability on the client and caregivers and integrate these needs into patient examinations, evaluations, assessments, interventions, discharges, and or referrals.
5. Efficiently organize and prioritize multiple tasks, integrate and critically analyze information, and formulate applicable decisions.
6. Practice in a safe, ethical, and legal manner, following guidelines for standard practice as established by federal, state, and local law, the College, clinical facilities, the APTA, and related professional organizations.
7. Accept personal responsibility for all actions, reactions, and inactions.
8. Demonstrate responsibility for self-assessment, professional growth and development.
9. Effectively and consistently manage personal stress and appropriately respond to the stress of others.
10. Speak and write effectively in English to convey information to other individuals and groups.

**Essential Functions in the Cognitive Domain:**
1. Comprehend, retain, recall, and apply complex information learned in required prerequisite courses to the program's professional course work.
2. Read, comprehend, integrate, critically analyze, interpret, and apply information from written materials, demonstrations, lectures, laboratory sessions, and research literature, and other pertinent sources to develop and support the rationale for appropriate patient examinations, evaluations, assessments, interventions, discharges, and or referrals.
3. Collect, organize, prioritize and document information to make safe, appropriate and timely decisions regarding patient care for the purposes of examination, evaluation, assessment, intervention, discharge, and or referral for any patient.
4. Demonstrate management skills including planning, organizing, supervising, and delegating.

**Essential Functions in the Psychomotor Domain:**
1. Possess sufficient mental and physical stamina, postural and neuromuscular control, and eye-hand coordination for extended periods of time in order to perform patient care tasks in a manner that does not compromise patient or therapist safety.
2. Safely, reliably, and efficiently perform required physical therapy examination and intervention procedures to evaluate and treat the functional skills & limitations and gross motor system of patients across the lifespan. These include but are not limited to:
   - Cognitive, mental, emotional status
   - Cardiopulmonary status
   - Segmental length, girth, volume
   - Skin integrity & wound care
   - Sensation
   - Strength
   - Joint mobility, motion and play
   - Muscle tone and reflexes
   - Coordination & balance
   - Development skills & movement patterns
   - Functional abilities
   - Posture & gait
   - Endurance
   - Pain
   - Therapeutic exercises
   - Prosthetics & orthotics
   - Adaptive devices & assistive technology
   - Demonstrate the ability to perform CPR and emergency first aid.
- Safely and reliably read meters, dials, printouts, and goniometers.
- Demonstrate the ability to manipulate and operate physical therapy equipment and monitoring devices.
- React safely and appropriately in a timely manner to sudden or unexpected situations involving persons and or equipment.

Sources:
PART 6:
Curriculum & Academic Requirements
ALIGNMENT WITH CONTEMPORARY PRACTICE

The Program’s curricular plan has been developed with the primary focus of producing clinically-competent, community-conscious graduates who are prepared to think critically. Graduates are expected to creatively explore evidence-based solutions that are designed to specifically meet the individual needs of the client in all practice environments.

The curricular plan is in alignment with the foundational tenants of physical therapy practice as espoused in such documents as the Guide to Physical Therapy Practice (GPTP) and the Normative Model of Physical Therapist Education. The Program’s curriculum will also display a commitment to the creation of an educational experience that closely adheres to the standards of clinical practice as espoused by the APTA Code of Ethics, APTA Revision of the Code and Standards, and the APTA Guide for Professional Conduct. Throughout the curriculum, a strong emphasis will be placed on the use of the current best evidence and best practice standards in a learning environment that employs the use of sound pedagogical methods.

The theoretical underpinnings supporting the Program’s curriculum are in alignment with the profession’s vision for the future practice of physical therapy. The following tenets of APTA’s Vision 2020(http://www.apta.org/Vision2020/) and APTA’s 2013 Vision Statement(http://www.apta.org/Vision/).

CURRICULAR PHILOSOPHY

Consistent with the principles aforementioned, the mission of Alvernia University, and the vision of the American Physical Therapy Association (APTA), the primary philosophical orientation of the Doctor of Physical Therapy Program will emanate from four primary tenants.

**Principles of Learner-Directed Education:**
The Doctor of Physical Therapy Program emphasizes a curricular structure that is individualized and learner-directed. Implicit in its framework is an appreciation of individual student learning styles. Kolb describes a model of learning that begins with a *concrete experience* followed by *reflective observation*, *abstract conceptualization*, and concluding with *active experimentation*. In clinical practice, physical therapists learn through a process very similar to that described by Kolb. The objective of the overall curricular structure and individual course structure is an explicit consideration of the learning style that is represented throughout each endeavor and to choose the experiences that best represent the pre-existing individual learning styles of the students. Paramount to philosophical orientation is the need for educators to possess a relentless preoccupation with the welfare of their students as equally contributing partners on a journey toward enhanced knowledge and understanding. In a model of learner-directed education, instructors are viewed as facilitators who guide students through meaningful learning experiences. The development of competent, critically-thinking graduates prepared to impact their profession and the lives of others requires an educational process that considers a myriad of learning styles and seeks to provide opportunities for the integration of multiple learning preferences and one in which the onus of learning is placed upon the student.

**Principles of Performance-Based Education:**
Above all, the AUPTI graduate physical therapist must achieve clinical competence. With achievement of licensure as the minimum requirement and expert, competent, clinical care as the expectation, graduates of the program will develop the knowledge base and clinical skill to practice effectively and autonomously. The content and organization of the curriculum is performance-directed and engenders a philosophical orientation toward competence in clinical practice. In accordance with this initiative, content emphasizes evidence-based practice and encourages the pursuit of practice-based evidence. The knowledge base and essential skills required to enable graduates to practice competently and autonomously will serve as the preeminent criterion for inclusion in the curriculum. Teaching initiatives will focus on the specific development of the cognitive, affective, and psychomotor domains of learning.

**Principles of Community-Conscious Education:**
Incumbent on the physical therapist professional is the ability to see beyond one’s self and serve others altruistically, generously, and without prejudice. To empathetically view experiences from different perspectives is
an imperative mandate for all health care professionals. The philosophical orientation of the AUPTI strives to instill, enhance, and expand each student's appreciation of those who are different. A myriad of deliberate and sustained experiences provide opportunities for students to develop cultural competence. This goal is achieved by changing attitudes and patterns of thought that precede behavioral adaptations. Viewing disability through the eyes of those whom we serve infiltrates every aspect of the curriculum and demonstration of skill in appreciating diversity is expected and required.

**Principles of Doctorally-Trained Professional Education:**

A doctor may be defined as "a person who has earned the highest academic degree awarded by a college or university in a specified discipline". Implicit within this definition is the doctor's contract with society. With this privilege comes a great deal of personal responsibility to "do no harm". More than avoidance of malfiscience, however, doctors are expected to operate at all times under the terms of beneficence. As doctors of a newly-anointed doctoring profession, graduate physical therapists must attend to the dual constructs of personal responsibility and societal expectation. Graduates of the AUPTI receive explicit instruction in the personal requirements and professional responsibilities associated with their entrance into the doctoring profession of physical therapy. As doctors of physical therapy, graduates will appreciate their role as leaders within the health care community and be fully equipped to pursue their rightful place as autonomous professionals in the service of those in need. As citizens of a larger community, graduates will be prepared to practice ethically, honestly, and diligently for the better good of mankind in clinical practice, academic endeavor, and scientific inquiry. Graduates will be dedicated to embracing the art and the science of physical therapy according to the ethical principles and practice act requirements as delineated elsewhere. Associated with professionalism is the ability to altruistically serve those in need and to provide expert care that is founded upon the current best evidence.

**Values Statement:**

Consistent with Alvernia University and the profession of physical therapy, the DPT Program is founded upon the core values of altruistic service, respect for the dignity and autonomy of others, cultural competence, and a relentless commitment to excellence. These values guide all Program initiatives from course content to hiring practices to student admissions and ensure that the mission, goals, and outcomes of the Program are achieved. An appreciation for the role of the Program as part of a larger community will prepare graduates for making significant contributions to the communities in which they live and serve.

**References:**


**CURRICULAR MODEL**

The Program’s curricular model is best described as a “hybrid” model that combines both a traditional and systems-based approach to professional education. The traditional aspect of the curriculum begins with a strong foundation in the basic sciences, which serves as the scaffolding upon which the clinical science and practice courses are built. The systems-based model uses the systems-based practice patterns that are developed through a progression from foundational to more complex concepts. Once students obtain foundational knowledge in the clinical sciences, they embark on educational experiences designed to explore the role of physical therapy in addressing specific impairments that emerge from each of the practice patterns described in the GPTP (musculoskeletal, neuromuscular, cardiopulmonary, integumentary). The progression of content and learning experiences that develop from basic to complex in the context of clinical practice is consistent with evidence supporting the best methods to ensure the development of clinically-relevant skills and knowledge. The
Clinical Education Program espouses a Clinical Expert Integration Model (CEIM) in which expert clinicians are actively involved in all aspects of the curriculum and serve as lab assistants, guest lecturers, primary course instructors, clinical instructors, pro bono clinic supervisors, student mentors, and provide ongoing feedback regarding individual course content and overall curricular structure. Within this model, the integration of clinicians who are actively involved in regular clinical practice is elevated as the preferred method for creating an authentic, contemporary learning experience that connects the classroom to the clinic.

The curriculum embodies the application of evidence-based educational principles as the foundation of the curriculum. Such principles include an emphasis on problem-solving and critical and integrative thinking. The application of this principle is demonstrated in the Program's learner-directed model in which students are required to routinely reflect on their performance. The curricular structure is designed with the intent to allow students to progress from foundational to complex concepts which culminate in empowering students to become independent problem solvers in the presence of ambiguity. Active learning represents a significant component of the curriculum that includes an emphasis on connecting the clinic to the classroom, lab-based coursework, peer-mentoring in the classroom and clinic, and student assignments that require engagement and collaboration. Structured and varied experiences of sufficient depth and breadth to allow the acquisition and application of essential knowledge, skills, attitudes, and behaviors, early and frequent exposure of students to clinical experts in the classroom and clinic.

INSTRUCTIONAL METHODS

A myriad of instructional methods will be used throughout the Program for the purpose of meeting student needs and achieving expected student outcomes. The overarching philosophy of the Program is to engage each student as an active participant in the process of learning through learning experiences that place the onus of learning on the student. Within this “Learner-Centered Paradigm”, the instructor facilitates and guides the student toward greater levels of knowledge and skill while the student takes the lead and responsibility for the attainment of new knowledge. The primary purpose of the learner-centered paradigm is for the instructor to create environments and experiences that bring students to discover and construct knowledge for themselves. In-classroom instruction is considered to be only one of many opportunities for learning to occur. Within this model, the process of learning may be divided into three distinct phases: 1.) the preparation for learning phase which is designed to prepare students for the active learning experience; 2.) the active learning phase which focuses on developing skill through practice; and 3.) the evaluation of learning phase which insures that learning has occurred and reinforces prior learning.

Within the Program, there is a consistent emphasis on connecting the classroom to the clinic. In semester one, students, with supervision, will perform newly learned skills on actual patients. Two 12-week post-didactic clinical internships will ensure entry-level performance. The curriculum will emphasize the importance of repetition in facilitating the attainment of new knowledge. Content will be delivered in a fashion that progresses from foundational to more complex. Teaching methods address the affective, cognitive, and psychomotor domains and will be developed in a manner that seeks to address the varied learning styles of each student. Opportunities for active engagement, which places the onus of learning on the student, will result in the creation of authentic knowledge. Evaluative criteria that is used to assess student learning will be consistent with the manner in which the content was taught and applied. Faculty will adhere to pedagogical constructs that represent excellence in teaching, explore innovative strategies to active learning, and develop skill in meeting the individual needs of students with varied learning styles and abilities. The Journal of PT Education as well as a variety of educational journals and published texts will be used to inform teaching and learning strategies.

EVALUATION OF STUDENT LEARNING

In addition to evaluating student performance for both competence and safety, an important aspect of evaluating student learning is to empower both instructors and their students to improve the quality of learning in the classroom. Faculty can use these assessments to refocus their teaching to help students to make their learning more efficient, effective, and meaningful. Evaluation of student learning must be: learner-centered, teacher-
directed, mutually beneficial for teacher and student, formative rather than summative, context-specific, ongoing, and rooted in good teaching practice. Assessment is a four-step continuous cycle which includes:

- establishing learning goals,
- providing learning opportunities
- assessing student learning, and
- using the results to improve student learning.

Throughout the Program, evaluation strategies will be viewed as an ongoing process that requires the collaborative effort of both instructor and student. Assessment tools used throughout the Program will be periodically evaluated to ensure alignment with student learning outcomes so that they will both assess and enhance student learning. To improve the accuracy of the tools used to assess student learning, the following strategies will be used throughout the curriculum: starting with clear statements, teaching what we are assessing, creating a test blueprint for exams, making assignments crystal clear, making sure assignments explicitly relate to learning goals, asking colleagues to review drafts, experimenting with similar tools on smaller cohorts, scoring students fairly, and evaluating and utilizing the outcomes from assessment efforts in future teaching. In every evaluative strategy that is adopted, the overarching principle is to make assessment authentic which includes creating assignments that: are realistic, complex, simulate real life situations, and are psychomotor-based.

References:

CURRICULUM EVALUATION PLAN

Data will be collected on an ongoing basis from a variety of sources to evaluate the effectiveness of the curriculum. This evaluation is closely aligned with the mission, philosophy, and goals of the Program. The DPT Curriculum Assessment Matrix (Appendix E) provides a detailed description of the indicators of curriculum effectiveness, the measure used to assess effectiveness, the time frame for data collection, the source of the data that was collected, the expected outcome, and the results. The skills identified on the following forms correspond to the following documents: A Normative Model of Physical Therapist Professional Education (2004), the Guide to Physical Therapist Practice, and CAPTE Evaluative Criteria (2006).

Instruments used to provide data regarding curriculum effectiveness include the following:

Student Information Form (see DPT Clinical Education Manual): This form will be completed by students prior to each clinical practice course (part-time and full-time) and is designed to provide the clinical instructor with important information about the student’s past and present experiences. Students are asked to identify key areas of development related to clinical practice prior to beginning the course and then required to reflect upon progress in those areas at the conclusion of the course. A student’s progress in clinical performance during the course is provided by comparing pre- and post-course comments. It is expected that 75% of students will perceive that they have improved in the performance of clinical skills.

DPT Student Exit Survey (Appendix A): This form will be completed by every student at the completion of all coursework immediately prior to graduation. It includes 8 criteria upon which students are asked to assess the Program’s ability to prepare them for entry-level practice using a 5-point Likert scale.

Full-Time Internship Midterm Check-In Form (see DPT Clinical Education Manual): This form is designed to ensure that both the CI’s and student’s needs are being met during each of the full-time clinical internships. One of the questions on the form asks about how the CI would rate this student relative to other students that they have supervised. It is expected that 75% of CI’s would consider our students at or above students form other programs, indicating that Program curriculum is adequately preparing students for practice.
Integrated Clinical Experience (ICE) Form (see DPT Clinical Education Manual): During 4 part-time clinical practice courses, students will be supervised and will perform newly learned clinical skills on actual patients. CI's will check whether each skill was performed successfully, which is a requirement for passing the course. It is expected that 90% of students will demonstrate satisfactory performance in each of the clinical skills thus demonstrating the ability to integrate this skill with other skills and implement this skill in the care of patients.

DPT Graduate Survey (Appendix F): This form is completed at 1 and 5 year intervals by graduates of the Program for the purpose of assessing their perception of the extent to which the Program prepared them for clinical practice using a 5-point Likert scale.

Employer Survey (Appendix G): This form, which is completed by employers of Program graduates one year after graduation asks employers to respond to 14 criteria using a 5-point Likert scale related to their perception of Program graduates.

DPT Professional Advisory Board Meeting Minutes (on-site materials): Comprised of local clinicians, academicians, healthcare professionals, healthcare administrators, local businessmen, and students this board will provide ongoing feedback to the Program in regards to its suitability in meeting the needs of the PT profession, healthcare community, and local community.

The primary responsibility for curricular assessment and the development of proposals for modifying the curriculum falls within the purview of the DPT Curriculum Committee. This standing committee, comprised of core faculty, interacts with the DPT Outcomes Committee to collect data related to curricular outcomes, deliberates over these outcomes, and makes recommendations to the full faculty about proposed curricular changes, as needed. The Curriculum and Outcomes committees will meet on a regular basis throughout the semester. Based on collected data, these committees will submit a committee report at weekly DPT faculty meetings. Summative and formative reports will be submitted from each committee at the ESR, which occurs at the completion of each semester. During the spring ESR, the full faculty will deliberate over committee reports and make decisions in regards to necessary curricular changes. Curricular changes will be considered and made on an annual basis at the spring ESR based on the recommendations from the Curriculum Committee. These recommendations are based on the results of data collected by the Outcomes Committee. Weekly DPT faculty meeting and ESR meeting minutes will reflect deliberation and decisions related to curricular evaluation. Any proposed curricular changes are brought before the full faculty and voted upon, after which the core faculty, under the direction of the Program Director will seek to implement the proposed changes in the following academic year.

CURRICULAR TRACKS
The Program’s curriculum is developed around 6 main curricular tracks. These tracks serve to provide overall structure and ensure the integration of important content. The 6 tracks consist of: Foundation Science, Clinical Foundation, Administration and Education, Critical Inquiry, Clinical Practice Patterns, and Clinical Practice. Within each of the curricular tracks, content is presented in a fashion that proceeds from foundational to more complex. Furthermore, the threads of critical thinking/problem solving, evidence-based practice, and the development of clinical competence are sequentially integrated into the curriculum. See the DPT Curriculum Sequence for details of the Program’s course of study.

Foundation Science Curricular Track:
- First Year Courses (credit/student contact hrs):
  - DPT500: Gross Anatomy & Histology (5/6)
  - DPT501: Development Through the Lifespan (4/4)
  - DPT502: Kinesiology (4/5)

Clinical Foundation Curricular Track:
- First Year Courses (credit/student contact hrs):
  - DPT508: Physical Therapy Procedures I (4/4)
**DPT509: Foundations of Clinical Examination and Evaluation (4/4)**

**Second Year Courses (credit/student contact hrs):**
- DPT608: Physical Therapy Procedures II (4/4)

**Third Year Courses (credit/student contact hrs):**
- DPT708: Management of Medical/Surgical Conditions, Diagnostics, and Pharmacotherapeutics (4/4)

**Administration, Education, and Communication Curricular Track:**

**First Year Courses (credit/student contact hrs):**
- DPT504: Foundations of Physical Therapy (3/3)
- DPT505: Education and Communication in P.T. (3/3)

**Second Year Courses (credit/student contact hrs):**
- DPT604: Health Care Policy & Issues in P.T. (3/3)

**Third Year Courses (credit/student contact hrs):**
- DPT704: Administration & Management in P.T. (2/2)

**Critical Inquiry Curricular Track:**

**Second Year Courses (credit/student contact hrs):**
- DPT612: Foundations of Clinical Research I (3/3)

**Third Year Courses (credit/student contact hrs):**
- DPT712: Foundations of Clinical Research II (2/2)
- DPT713: Clinical Research Seminar I (3/3)
- DPT714: Clinical Research Seminar II (3/3)

**Practice Pattern Curricular Track:**

**First Year Courses (credit/student contact hrs):**
- DPT516: Musculoskeletal PT Practice I (4/4)
- DPT520: Neuromuscular PT Practice I (4/4)

**Second Year Courses (credit/student contact hrs):**
- DPT616: Musculoskeletal PT Practice II (4/5)
- DPT620: Neuromuscular PT Practice II (4/5)
- DPT628: Cardiopulmonary PT Practice I (3/3)
- DPT617: Musculoskeletal PT Practice III (4/5)
- DPT621: Neuromuscular PT Practice III (4/5)
- DPT629: Cardiopulmonary PT Practice II (4/5)

**Third Year Courses (credit/student contact hrs):**
- DPT732: Integumentary PT Practice (3/3)
- DPT801-809: Electives (3/4)

**Clinical Practice Curricular Track:**

**First Year Courses (credit/student contact hrs):**
- DPT522: Clinical Practice I (1/6)
- DPT523: Clinical Practice II (1/6)
- DPT524: Clinical Practice III (6/40)

**Second Year Courses (credit/student contact hrs):**
- DPT622: Clinical Practice IV (1/12)
- DPT623: Clinical Practice V (1/12)
- DPT624: Clinical Practice VI (6/40)

**Third Year Courses (credit/student contact hrs):**
- DPT724: Clinical Practice VII (8/40)
- DPT725: Clinical Practice VIII (8/40)

**Other:** DPT810: Comprehensive Examination (1/2)
### COURSE SEQUENCE

#### Fall (semester 1)

<table>
<thead>
<tr>
<th>Course</th>
<th>Credits/Contact</th>
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<tbody>
<tr>
<td>DPT500</td>
<td>Gross Anatomy &amp; Histology 5/6</td>
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<td>DPT501</td>
<td>Development Through the Lifespan 4/4</td>
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<tr>
<td>DPT504</td>
<td>Foundations of Physical Therapy 3/3</td>
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<td>Physical Therapy Procedures I 4/4</td>
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<td>DPT522</td>
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<tr>
<td>DPT502</td>
<td>Kinesiology 4/5</td>
</tr>
<tr>
<td>DPT509</td>
<td>Foundations of Clinical Exam and Eval 4/4</td>
</tr>
<tr>
<td>DPT516</td>
<td>Musculoskeletal PT Practice I 4/4</td>
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<tr>
<td>DPT520</td>
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<tr>
<td>DPT524</td>
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<td>DPT505</td>
<td>Education and Communication in P.T. 3/3</td>
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<tr>
<td>DPT604</td>
<td>Health Care Policy &amp; Issues in P.T. 3/3</td>
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<tr>
<td>DPT612</td>
<td>Foundations of Clinical Research I 3/3</td>
</tr>
<tr>
<td>DPT616</td>
<td>Musculoskeletal PT Practice II 4/5</td>
</tr>
<tr>
<td>DPT620</td>
<td>Neuromuscular PT Practice II 4/5</td>
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<tr>
<td>DPT628</td>
<td>Cardiopulmonary PT Practice I 3/3</td>
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<tr>
<td>DPT622</td>
<td>Clinical Practice IV 1/12</td>
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<tr>
<td>DPT608</td>
<td>Physical Therapy Procedures II 4/4</td>
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<td>DPT617</td>
<td>Musculoskeletal PT Practice III 4/5</td>
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<td>DPT621</td>
<td>Neuromuscular PT Practice III 4/5</td>
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<td>DPT629</td>
<td>Cardiopulmonary PT Practice II 4/5</td>
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<td>Clinical Practice V 1/12</td>
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<td>DPT624</td>
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<tr>
<td>DPT704</td>
<td>Administration and Management in P.T. 2/2</td>
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<tr>
<td>DPT708</td>
<td>Management of Medical/Surgical Conditions, Diagnostics, and Pharmacotherapeutics 4/4</td>
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<tr>
<td>DPT712</td>
<td>Foundations of Clinical Research II 2/2</td>
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<tr>
<td>DPT713</td>
<td>Clinical Research Seminar I 3/3</td>
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<td>DPT732</td>
<td>Integumentary PT Practice 3/3</td>
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<tr>
<td>DPT801-809</td>
<td>Electives 3/3 per course</td>
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<tr>
<td>DPT724</td>
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<td>DPT714</td>
<td>Clinical Research Seminar II 3/3</td>
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#### Summer (semester 9)

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<tr>
<td>DPT725</td>
<td>Clinical Practice VIII (April-June) 8/40</td>
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<tr>
<td>DPT810</td>
<td>Comprehensive Examination 1/2</td>
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<td><strong>TOTAL CREDITS/CONTACT HOURS</strong></td>
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DPT I COURSE DESCRIPTIONS

Course Number: DPT 500
Course Name: Gross Anatomy and Histology
Credit/Contact Hours: 5/6 (3 hours lecture/3 hours lab)
This course covers the study of human anatomical structures as they relate to movement, physiological demands of activity, and exercise. Specimens, models, and videos aid a regional approach to the study of structures. The course consists of both lectures and laboratory experiences with pro-section and cadaver dissection. This course also includes a comprehensive study of the microscopic and submicroscopic structure of mammalian tissues.

Course Number: DPT 501
Course Name: Development Through the Lifespan
Credit/Contact Hours: 4/4 (2 hours lecture/2 hours lab weekly)
This course provides a foundation for physical therapy practice with individuals from infancy throughout adulthood and into old age. It will cover the typical developmental process from infancy through older adulthood. Topics related to the psychosocial, motor and cognitive impact of lifespan development will be addressed. Particular emphasis is placed on the relationship between the developmental process, including aging, and realistic goal-setting for physical therapy intervention of clients throughout adulthood. The course begins with a review of embryology that is pertinent to growth and development and physical therapy practice.

Course Number: DPT 502
Course Name: Kinesiology
Credit/Contact Hours: 4/5 (3 hours lecture/2 hours lab)
This course is an in-depth study of the interaction between the muscular and skeletal systems to produce human movement. The student reviews the anatomy and physiology of the muscular system and learns the mechanical influence it has on the skeletal systems to produce joint movement. A study of posture and gait and functional activity is also included as well as an analysis of human posture and movement in normal and abnormal states. The course includes palpation of anatomical structures and study of the principles of biomechanics including arthrokinematics, osteokinematics, and kinetics.

Course Number: DPT 504
Course Name: Foundations of Physical Therapy
Credit/Contact Hours: 3/3 (3 hours lecture/discussion)
This course introduces the complex role of the physical therapist in today’s evolving healthcare environment. Content includes a discussion of the responsibilities of the physical therapist to clients, families, colleagues, the profession, and the community. A discussion regarding the interprofessional nature of clinical practice including a review of the responsibilities of every member of the clinical team will be included. The concept of clinical decision-making and reasoning and the focus on patient-centered outcomes and clinical expertise will be emphasized. Topics will include: Guide to Physical Therapist Practice, documentation, practice act, code of ethics, guide to professional conduct, altruistic service, entrepreneurialism, professional advocacy, respecting patients’ rights and autonomy, cultural competency, physical therapy as a doctoring profession, autonomous practice, physician-owned physical therapy practices, evidence-based practice, direct access, delegation and supervision, the role of PT in health, wellness, and prevention, professional development plans, Vision 2020, clinical specialization and board certification, organization and history of the American Physical Therapy Association.

Course Number: DPT 505
Course Name: Education and Communication in Physical Therapy
Credits/Contact Hours: 3/3 (3 online contact hours Week 1 through Week 4. Three contact hours of lecture, Week 5 through Week 10)
This course will explore the educational and communication role of physical therapist as learners and educators with a focus on the education of clients, families, peers, health professionals and community
members. Educational activities/roles for physical therapist, which include those within the classroom, clinic and beyond will be defined including community advocate, political action and pro bono work will be explored through active learning experiences. Emphasis will be placed on teaching, learning and motivation theories, learning styles and their applicability in the clinical, professional and academic environments. Students will focus on how to assess the needs of the learner, instructional design, instructional methods and evaluation of learning, including how to effectively educate others using culturally appropriate teaching method. This course is a blended course and will deliver 30%-75% of the content electronically which will allow for concurrent integration and reflect of education and communication activities while in a clinical setting. Students will participate in a community engagement project.

**Course Number:** DPT 508  
**Course Title:** Physical Therapy Procedures I  
**Credit/Contact Hours:** 4/5 (2 hours lecture/3 hours lab)

This course consists of basic physical therapy interventions administered by a physical therapist in a clinical setting. Students will be taught and practice basic interventions, which can be applied to all patient populations, from three major components that comprise all physical therapy interventions. These components include: 1) coordination, communication, and documentation, 2) patient/client–related instruction, and 3) procedural interventions. Specific interventions covered in this course are divided into 3 units and include: Unit One: Functional Training (Self-care, Home Management Prescription and Application of Devices and Equipment), Manual Therapy (including therapeutic exercise) and Physical Agents. Communication/collaboration (verbal and nonverbal) across disciplines and settings and documentation including electronic documentation will be covered throughout each unit. Physical agents include Cryotherapy (cold packs, ice massage, vapocoolant spray), Hydrotherapy (contrast bath, pools, whirlpool tanks), Thermotherapy (dry heat, hot packs, paraffin baths) and, gravity assisted devices (tilt table) and CPM. Manual Therapy includes PROM, therapeutic massage and an introduction to therapeutic exercise. Functional training includes activities of daily living training, device and equipment use and training, injury prevention, wheel chairs,and prescription and application of assistive devices. The application of these interventions will be explored through patient case examples. Lecture and laboratory components prepare students for direct patient care.

**Course Number:** DPT 509  
**Course Name:** Foundations of Clinical Examination and Evaluation  
**Credit/Contact Hours:** 4/4 (2 hours lecture/2 hours lab)

This course includes exploration into the concepts related to examination, evaluation, and the collection of clinical data. Course content includes the administration and interpretation of clinical tests and measures pertaining to various body systems, screening to determine the need for physical therapy services or referral to other practitioners, assessment of general health status, and functional capacity. An emphasis will be placed on clinical decision-making in the use of clinical data to construct a physical therapy diagnosis, develop an appropriate plan of care, and evaluate outcomes. More specifically, students will develop proficiency in: obtaining a relevant history and engaging in a subjective interview, examination of vital signs, measurement of joint motion, measurement of strength and muscle function, measurement of edema, identification of structural deficits, assessment of pain, administration and evaluation of disability questionnaires, functional examination, the use of standardized tests and measures, and dynamometry. The principles of clinical decision-making, differential diagnosis, goal-setting, and the development of a physical therapy plan of care based on data collected during the examination will be explored.

**Course Number:** DPT 516  
**Course Name:** Musculoskeletal Physical Therapy Practice I: Physiology and Pathophysiology  
**Credit/Contact Hours:** 4/4 (4 hours lecture/discussion)

This course begins with a clinical approach to normal functioning physiological systems that are most relevant to the practice of musculoskeletal physical therapy as the foundation for a discussion of pathophysiology. The course begins with a regional approach to normal clinical physiology of the musculoskeletal system and progresses into discussion regarding selected syndromes impacting the musculoskeletal system that range across the lifespan. Content will cover the incidence/prevalence, etiology, clinical signs and symptoms, differential diagnosis, diagnostic imaging procedures,
medical/surgical/pharmacologic management, as well as prognosis and potential for recovery of selected musculoskeletal conditions. The implications of each syndrome on Physical Therapy practice and evidence-based guidelines used in the management of these conditions will be reviewed. Using a regional approach, students will learn important features of selected conditions that will serve as the basis for future courses (DPT 616, DPT 617). Students will also be introduced to the concepts of exercise physiology that will be revisited within other courses throughout the curriculum.

Course Number: DPT 520
Course Name: Neuromuscular Physical Therapy Practice I: Neuroscience
Credit/Contact Hours: 4/4 (4 hours lecture weekly) Course Prerequisites: DPT 500, 501, 504, 508, 522
This course begins with a clinical approach to normal functioning physiological systems that are most relevant to the practice of neuromuscular physical therapy as the foundation for a discussion of pathophysiology. The course begins with a regional approach to normal clinical physiology of the neuromuscular system and progresses into discussion regarding selected syndromes impacting the neuromuscular system that range across the lifespan. Content will cover the incidence/prevalence, etiology, clinical signs and symptoms, differential diagnosis, diagnostic imaging procedures, introduction to medical/surgical/pharmacologic management, as well as prognosis and potential for recovery of selected neuromuscular conditions. The implications of each syndrome on Physical Therapy practice and evidence-based guidelines used in the management of these conditions will be reviewed. Students will learn important features of selected conditions that will serve as the basis for future courses (DPT 620, DPT 621).

Course Number: DPT 522
Course Name: Clinical Practice I
Credit/Contact Hours: 1/42 (2 hour lecture week 1,3, 5, 7, 14. Three hours clinic time Week 8-13)
The purpose of this course is to introduce and prepare the students for clinical experiences within the first academic year. Students will participate in pre-clinical activities focusing on legal regulations of clinical practice, personal and client safety, and personal health. Students will have an opportunity to explore their preferred learning styles and personality traits, which will help students to understand how they learn and process information and will enable them to develop strategies to enhance their learning potential. Students will have an opportunity to identify their individual personality traits in order to provide them with insight into their motivation, actions and communication approaches and to understand these aspects in others. In the clinical settings, students will work one-to-one with a supervisor to observe clinical practice and practice newly learned concepts. An emphasis is placed on professional behavior and self-assessment of one’s professional behavior. This is the first of four part-time internships and students will be placed inpatient or outpatient settings that emphasis physical therapy management of patients with musculoskeletal disorders.

Course Number: DPT 523
Course Name: Clinical Practice II
Credit/Contact Hours: 1/40  (Two hour lecture Week 1-7, 14. Three hours clinic time Week 8-13, Six distance education hours)
The purpose of this course is to provide students with opportunities to apply newly learned concepts and skills within the clinical setting. The focus of course is on clinical observation and supervised application of appropriate examination and intervention skills/procedures. An emphasis is placed on professional behavior and self-assessment of one’s professional behavior. This is the second of four part-time internships and students will be placed inpatient or outpatient settings that emphasis physical therapy management of patients with musculoskeletal disorders. Expectations for professional behavior and skills assessment will be commensurate with current course objectives.

Course Number: DPT 524
Course Name: Clinical Practice III
Credit/Contact Hours: 6/40
The purpose of this course is to foster the development of entry-level physical therapy skills in a non-specialized inpatient or outpatient setting. This is the first of four full-time clinical practice courses, which will occur in the third semester of the curriculum for 6weeks. Under the supervision of a clinical instructor, students will practice physical therapy examination, evaluation, PT diagnosis, prognosis, and intervention
DPT II COURSE DESCRIPTIONS

Course Number:  DPT 604
Course Name:  Health Care Policy and Issues in Physical Therapy
Credits/Contact Hours:  3/3 (3 hours lecture)
This course is designed to introduce students to current issues within the national health care arena that impact health care and the profession of physical therapy. Such topics include: cultural competency, entitlement, rationing, consent, confidentiality and HIPAA, chronic illness and disability, epidemiology, beneficence, autonomy, ADA, reimbursement, health disparity, and health care advocacy. This course will review issues and explore cases related to the ethical and legal dimensions of health care and standards that govern practice. Various aspects of health care policy will be explored, which include current legislation that is most relevant to healthcare and the profession of physical therapy. Current issues related to the practice of physical therapy will include: malpractice, direct access, delegation and supervision, legal issues and liability, documentation, quality assurance and outcomes assessment, evidence-based/informed practice, expertise and clinical specialization, and ethical dilemmas currently facing the physical therapist. In addition, the course will cover the concept of disability, including several models used to classify disability. A discussion regarding the impact of disability and disease on individuals, family, and society will provide a framework for students to appreciate the complex role of the physical therapist in managing clients as individuals with needs that go beyond the physical realm.

Course Number:  DPT 608
Course Name:  Physical Therapy Procedures II
Credit/Contact hours:  3/4 (2 hours lecture/ 2 hours lab weekly)
This course provides an investigation into the use of electrotherapy as a diagnostic and treatment agent and explores the principles and practices of physical agents in physical therapy. The principles of electrodiagnostics and electrical stimulation will be covered in depth. The electrotherapy unit includes a discussion of electrophysiology, the instrumentation and application of various types of electrical stimulation modalities, as well as low level laser, and biofeedback. Topics include electrical muscle stimulation, electrical stimulation for tissue repair, functional electrical stimulation, high voltage pulsed current, neuromuscular electrical stimulation, and transcutaneous electrical nerve stimulation. This unit is competency based, with ample practice time devoted to the appropriate utilization of electrotherapy as a treatment choice. As a continuation from DPT 508, the second half of this course includes instruction in the principles and practice of physical agents and modalities including such topics as: ultrasound, phonophoresis, infrared, laser, ultraviolet, compression bandages, garments, and taping, total contact casting, vasopneumatic compression devices, manual lymph drainage, diathermy, as well as intermittent, positional, and sustained mechanical traction.

Course Number:  DPT 612
Course Name:  Foundations of Clinical Research I
Credits/Contact hours:  3/3 (3 hours lecture)
This course focuses on the application of clinical research principles to physical therapy practice. Students will be introduced to the concepts of measurement, research design, analysis and communication of physical therapy related research. A primary objective is for students to acquire the knowledge, understanding and skill necessary to obtain and critically read research relevant for physical therapy practice. Students will begin to interpret and apply published research through an understanding of the statistics and different methods of research. Concepts of evidence-based practice, ethics in research, development of a research question, searching the literature, appropriate referencing, and scientific writing style will be explored.
Both quantitative and qualitative research designs will be introduced, however, an emphasis will be placed on exploring the nuances of quantitative research designs in physical therapy. Topics include: measurement theory, descriptive statistics, measures of variability, single subject designs, parametric and non-parametric statistics, inference, correlation and regression, reliability, sensitivity/specificity, and the use of SPSS software. The course focuses on the application of principles of clinical research to physical therapy practice. The student is expected to become proficient in the interpretation of published research by demonstrating knowledge of the application of statistics and different methods of research. The course also focuses on critically examining the psychometric properties of tests and measures of health status, body function, and structure, activity, and participation.

Course Number: DPT 616
Course Name: Musculoskeletal Physical Therapy Practice II: Extremities
Credit/Contact Hours: 4/5 (2 hours lecture/3 hours lab)
This course includes a regional approach to musculoskeletal examination, evaluation, diagnosis, and prognosis of musculoskeletal conditions of the upper and lower extremity. Students will utilize evidence-based examination procedures to establish a differential diagnosis that informs intervention. The intervention aspect of the course includes the theory and practical application of therapeutic exercise and manual interventions. The principles of range of motion, proprioceptive neuromuscular facilitation, mobilization, stretching, and progressive resistance activities are included, in addition to a review of adjunctive interventions. A review of common syndromes impacting the extremities throughout the lifespan will be reviewed with a discussion and practical application of a variety of proposed evidence-based physical therapy interventions.

Course Number: DPT 617
Course Name: Musculoskeletal Physical Therapy Practice III: Spine
Credit/Contact Hours: 4/5 (2 hours lecture/3 hours lab)
This course includes a regional approach to musculoskeletal examination, evaluation, diagnosis, and prognosis of musculoskeletal spinal conditions. Students will utilize evidence-based examination procedures to establish a differential diagnosis that informs intervention. The intervention aspect of the course includes the theory and practical application of therapeutic exercise and manual interventions. The principles of range of motion, proprioceptive neuromuscular facilitation, mobilization, stretching, and progressive resistance activities are included, in addition to a review of adjunctive interventions. A review of common syndromes impacting the spine throughout the lifespan will be reviewed with a discussion and practical application of a variety of proposed evidence-based physical therapy interventions. Additional topics will include women’s health, aquatic therapy, aerobic fitness training, and health, wellness, and prevention, and functional capacity evaluations and work hardening/conditioning. Throughout the course, an emphasis will be placed on evidence-based, clinical decision making. This course will also include a review of concepts related to exercise physiology.

Course Number: DPT 620
Course Title: Neuromuscular Physical Therapy Practice II
Credit/Contact Hours: 4/5 (2 hours lecture/3 hours lab)
This course will build on the content contained in DPT 520 and will focus on physical therapy examination and intervention of individuals with impairments of the central nervous system throughout the lifespan. Students will explore a variety of physical therapy management principles and procedures for individuals seen in the acute care, post-acute rehabilitation, skilled nursing, transitional care unit, and home health care practice settings with diagnoses of cerebral vascular accident, cerebral palsy and other pediatric neuromuscular disorders, Parkinson’s disease, disorders of the cerebellum, cognitive deficits and neglect, and other neuromuscular movement disorders. The principles of evidence-based practice will be applied to examination and intervention of individuals with neuromuscular impairments including NDT, constraint-induced therapy, CIT and partial weight gait training, management of spasticity, balance training, motor learning, advanced gait training.

Course Number: DPT 621
Course Title: Neuromuscular Physical Therapy Practice III
Credit/Contact Hours: 4/5 (2 hours lecture/3 hours lab)
This course will build on the content contained in DPT 520 and DPT 620 and will focus on physical therapy examination and intervention of individuals with impairments of the central nervous system. Students will explore a variety of physical therapy management principles and procedures for individuals seen in the post-acute rehabilitation setting with diagnoses of cerebral vascular accident, spinal cord injury, traumatic brain injury, and other neuromuscular movement disorders. The principles of evidence-based practice will be applied to examination and intervention including attention, memory, language, executive function, motor learning, and advanced wheelchair prescription, and principles of gait training and locomotion. This course will also include a unit on prosthetics and orthotics that includes evidence-based principles related to prescription, fitting, and training within the context of physical therapy.

**Course Number:** DPT 622  
**Course Name:** Clinical Practice IV  
**Credits:** 1 (1 hour lecture 6 weeks, clinical hours 6 Week 7-13)  
The purpose of this course is to provide students with opportunities to apply newly learned concepts and skills within the clinical setting. The focus of course is on clinical observation and supervised application of appropriate examination and intervention skills/procedures. An emphasis is placed on professional behavior and self-assessment of one's professional behavior. This is the third of four part-time internships and students will be placed inpatient or outpatient settings that emphasis physical therapy management of patients with musculoskeletal, neuromuscular and cardiovascular/pulmonary disorders. Expectations for professional behavior and skills assessment will be commensurate with current course objectives.

**Course Number:** DPT 623  
**Course Name:** Clinical Practice V  
**Credits:** 1  
This course is the final part-time clinical experience that takes place during the second year, spring semester for 6 hours a week for 5 weeks and is concurrent with the initial courses in the musculoskeletal, cardiopulmonary, and neuromuscular practice pattern series. The purpose of this experience is to provide students with opportunities to observe and apply newly learned concepts and skills within an outpatient orthopedic setting. This opportunity offers the student a chance to identify challenging areas within their foundational skills, reflect on their most effective learning style and provide ample time to strengthen areas of weakness prior to their next full time internship. To fulfill a primary objective of the program, this experience enables students to incorporate practice of professional behaviors with self, peer and supervisory feedback. Expectations for professional behavior and skills assessment will be commensurate with current course objectives.

**Course Number:** DPT 624  
**Course Name:** Clinical Practice VI  
**Credit/Contact Hours:** 6/40  
The purpose of this course is to foster the development of entry-level physical therapy skills in a non-specialized inpatient OR outpatient setting (which ever was not completed in DPT524). This is the second of four full time clinical internships and will occur in the sixth semester of the curriculum for 6 weeks. Under the supervision of a clinical instructor, students will practice physical therapy examination, evaluation, PT diagnosis, prognosis, and intervention procedures for individuals with musculoskeletal and neuromuscular disorders. Development of professional behaviors is an important component throughout the clinical practice series and students will have opportunities for self-assessment, self-reflection, peer and supervisory assessment. Students will be expected to perform at the Intermediate Performance and/or Advanced Intermediate Performance as assessed by APTA’s Clinical Performance Instrument.

**Course Number:** DPT 628  
**Course Name:** Cardiopulmonary Physical Therapy Practice I: Physiology and Pathophysiology  
**Credit/Contact Hours:** 3/3 (3 hours lecture/discussion/seminar/lab)  
Structure and function of the cardiopulmonary system which provides the foundation for the series of cardiopulmonary courses including histology and physiology with clinical application. This course will focus on the normal and abnormal physiology of the cardiovascular and pulmonary systems in the
practice of physical therapy across the lifespan. A review of principles related to exercise physiology and normal and abnormal cardiorespiratory response to exercise. A review of selected conditions of the cardiopulmonary system will address the incidence/prevalence, etiology, clinical signs and symptoms, differential diagnosis, diagnostic imaging procedures, medical/surgical/pharmacologic management, as well as prognosis and potential for recovery for selected conditions. This course is used to build a foundation for courses later in the curriculum which will address the examination, evaluation and intervention of patients with cardiovascular and pulmonary conditions.

**Course Number:** DPT 629  
**Course Name:** Cardiopulmonary Physical Therapy Practice II  
**Credit/Contact Hours:** 4/5 (2 hours lecture/3 hours lab)

Cardiopulmonary examination, evaluation, diagnosis, prognosis, and intervention. This course includes a regional approach to the physical therapy management of the cardiopulmonary system in a variety of practice settings ranging from acute care to outpatient that builds on DPT 628. This course will focus on developing and refining examination and intervention skills in patients with acute pathologies. The course will include a didactic and lab component intended to develop the students’ hands on ability in performing skills such as strength, ROM assessment, balance, coordination, proprioception, auscultation of the heart and lungs, chest wall excursion and breathing pattern. In addition, students will gain exposure to intervention skills, including not only functional mobility, but also airway clearance and chest wall mobility techniques. Cases encountered in this class will encompass the musculoskeletal, neuromuscular, integumentary and cardiopulmonary systems. A portion of the course will be devoted to the principles of exercise physiology and students will be exposed to principles and practices designed to evaluate the body’s response to exercise and implement interventions designed to improve cardiorespiratory and metabolic function through exercise.

### DPT III COURSE DESCRIPTIONS

**Course Number:** DPT 704  
**Course Name:** Administration and Management in Physical Therapy  
**Credits/Contact hours:** 2/2 (2 hours lecture)

This course exposes and introduces students to concepts related to the principles of management and supervision with special application to the physical therapy setting. Such topics will include: human resource management, billing procedures/reimbursement/software, business development and planning, entrepreneurship, organization of the work environment, risk management, material safety, employee feedback/mentorship/evaluation, student supervision, professional consultation, writing job descriptions, interviewing skills, ADA, patient bill of rights, financial management, quality assurance, HIPAA, marketing, workers’ compensation, documentation, private practice and clinic development, POPTS and competition and marketing, recruiting, licensure, OSHA/JCAHO/CARF guidelines and accreditation.

**Course Number:** DPT 708  
**Course Name:** Management of Medical/Surgical Conditions, Diagnostics, and Pharmacotherapeutics  
**Credit/Contact Hours:** 4/4 (4 hours of lecture, discussion, seminar)

This course is designed to introduce students to common medical and surgical conditions that may be encountered within the physical therapy setting. Lecture and discussion will focus on the etiology, pathogenesis, sequelae, clinical signs and symptoms, and prognosis for a wide range of common conditions impacting multiple body systems. A regional and systems-based approach will be adopted that allows students to appreciate the interdependence of body systems on one another. The impact of selected conditions on the physical therapy diagnosis, progression, outcome, and prognosis will be emphasized. The medical and surgical management of selected conditions will also be provided which emphasizes the impact of these procedures on physical therapy. Discussion will include a review of post-surgical protocols and precautions.

This course will also include instruction in a wide range of diagnostic testing procedures used in current medical practice. A variety of diagnostic imaging procedures will be discussed, including plain film
radiography, CT Scan, Scintigraphy, MRI, arthrography, angiography, EMG/NCV, lab values, among others, with an emphasis on the use of these procedures to assist in differential diagnosis. The diagnostic imaging component of the course emphasizes reading and interpreting films, identifying basic radiographic anatomy, and the correlation of findings in the context of clinical cases.

The pharmacology component of the course uses a case-based approach to studying the impact of pharmacotherapeutics on clinical decision making in physical therapy. The course is designed to develop a basic understanding of drug pharmacology and how to apply these concepts to the practice of physical therapy. Emphasis is placed on the mechanism of action of drugs, pharmacokinetics, side effects and therapeutic use. The overall goal is to foster an understanding of how pharmacological interventions may impact physical therapy care.

**Course Number:** DPT 712  
**Course Name:** Foundations of Clinical Research II  
**Credit/Contact Hours:** 2/2 (2 hours lecture/discussion)  
**Year, Semester:** DPT III, Fall (semester 7)  
This course is an introduction to qualitative research with an emphasis on the role that qualitative research fills in the evidence-based practice of physical therapy. The course will cover the assumptions of the qualitative paradigm, include a comparison to the quantitative paradigm, and discuss multimodal research where both paradigms are used together. Students will have opportunities to critically appraise the qualitative literature related to physical therapy.

**Course Number:** DPT 713  
**Course Name:** Clinical Research Seminar I  
**Credit/Contact Hours:** 3/3 (3 hours of group discussion/method development/literature review/data collection/independent study)  
This course provides students the opportunity to explore a specific research question related to physical therapy. In groups, students will have the opportunity to apply principles obtained in prior coursework to a specific research project in collaboration with a DPT faculty member. This course is the first of a two-part seminar series which guides students from the development of a research question, literature search, development of methodology, data collection, statistical analysis, and culminates in a presentation and/or publication.

**Course Number:** DPT 714  
**Course Name:** Clinical Research Seminar II  
**Credit/Contact Hours:** 3/3 (3 hours of group discussion/method development/literature review/data collection/independent study)  
This course provides students the opportunity to explore a specific research question related to physical therapy. In groups, students will have the opportunity to apply principles obtained in prior coursework to a specific research project in collaboration with a DPT faculty member. This course is the second of a two-part seminar which guides students from the development of a research question, literature search, development of methodology, data collection, statistical analysis, and culminates in a presentation and/or publication.

**Course Number:** DPT 724  
**Course Name:** Clinical Practice VII  
**Credit/Contact Hours:** 8/40  
DPT 724 Clinical Practice VII is a 12 week full-time clinical internship that occurs post didactic and is empowers (or facilitates) the student’s practice of entry-level physical therapy skills and enable a more accurate assessment of each student’s entry level proficiency. This internship will take place in either a rehabilitation setting where 40% or greater of patients have neuromuscular diagnosis or a specialized clinical setting of the student choice. Students will be placed in the alternative clinical setting for DPT 725. Students are expected to perform at the Advance Intermediate or Entry-Level levels as described in APTA’s Clinical Performance Instrument in a variety of setting with patient populations that range from generalized, complex and may include specialty areas.

**Course Number:** DPT 725
**Course Name:** Clinical Practice VIII  
**Credit/Contact Hours:** 8/40  
DPT 725 Clinical Practice VIII is a 12 week full-time clinical internship that occurs post didactic and is empowers (or facilitates) the student’s practice of entry-level physical therapy skills and enable a more accurate assessment of each student's entry level proficiency. This internship will take place in either a rehabilitation setting where 40% or greater of patients have neuromuscular diagnosis or a specialized clinical setting of the student choice. Students will be placed in the alternative clinical setting completed for DPT 724. Students are expected to perform at the Advance Intermediate or Entry-Level levels as described in APTA’s Clinical Performance Instrument in a variety of setting with patient populations that range from generalized, complex and may include specialty areas.

**Course Number:** DPT 732  
**Course Name:** Integumentary Physical Therapy Practice  
**Credits/Contact Hours:** 3/3 (3 hours lecture/lab)  
This course will explore physical therapy in the management of patients with integumentary conditions. This will include a study of normal and abnormal structures and function of the integumentary system and pathological alteration of structure and function. A general foundation in examination, evaluation, diagnosis, prognosis, interventions and outcomes for persons with various types of wounds will be provided. Application of specific tests and measures, their reliability and validity, and efficacy of treatment interventions will be covered. Clinical reasoning and decision making will be fostered through multiple case studies.

**Course Number:** DPT 801  
**Course Title:** Integumentary Physical Therapy Elective  
**Credit/Contact Hours:** 3/3 (3 hours combined lecture and lab weekly)  
This course provides specialized education on wound care practice for physical therapist. The course is intended for students who are interested in developing advanced knowledge and skill in all aspects of wound care. Content covered in this course will include but not limited to advanced modalities (mechanical, biological, pharmaceutical), up to date and evidence based interventions, and business and marketing (billing, coding, practice management). Students will also have an opportunity to additional observation and hands-on clinical practice.

**Course Number:** DPT 802  
**Course Name:** Pediatric Physical Therapy Elective  
**Credit/Contact Hours:** 3/3 (3 hours combined lecture and lab weekly)  
This course provides an in depth study of the practice of pediatric physical therapy. Tests and evaluations used in pediatric practice will be covered as part of a discussion of the entire evaluative process used in pediatrics. Physical therapy diagnosis and management of the broad array of clinical presentations seen in pediatrics will be discussed and practiced. The role of physical therapy in a variety of settings including home, clinical settings (out-patient and in-patient), educational environments and play environments will be discussed. Additional topics include the role of the family, use and procurement of special equipment, laws related to physical therapy as a related service and effective team membership.

**Course Number:** DPT 803  
**Course Name:** Orthopaedic Manual Physical Therapy Elective  
**Credit/Contact Hours:** 3/3 (3 hours combined lecture/discussion/lab)  
This course is designed to provide the student with an eclectic, entry-level knowledge of orthopaedic manual physical therapy strategies currently in use for the management of patients with musculoskeletal impairment. These strategies will range from soft tissue mobilization techniques to direct and indirect joint mobilization techniques for the spine and extremities. Lab activities, which will comprise the majority of the course, will focus on developing entry-level proficiency in a variety of techniques, including thrust and non-thrust mobilization, that may be immediately translated into direct clinical practice. Lecture will focus on providing the theoretical framework and scientific evidence to substantiate the use of each methodology covered. An emphasis will be placed on the integration of evidence-based manual techniques into a comprehensive physical therapy examination and intervention plan.
Course Number:  DPT 810
Course Name:  Comprehensive Examination
Credit/Contact Hours:  1/2 (2 hours/week of formal and informal preparation time/independent study)

This course is composed of the preparation and administration of a comprehensive examination. This examination is the culminating experience of the program, which reflects mastery of the didactic component of the physical therapy curriculum. The examination is 3 hours in duration and is comprised of 3 sets of 50 multiple choice questions. Passage of this exam is required for graduation.
Appendices
**Appendix A**

**ALVERNIA UNIVERSITY**

**DOCTOR OF PHYSICAL THERAPY PROGRAM**

**DPT Student Exit Survey**

Name: ____________________________________________ Graduation Year: _________  
Address: __________________________________________ Email: __________________  
Phone (Home): ______________ (Work): ______________ (Cell): ______________

**Instructions:** Please rate your overall learning experience within the DPT Program at Alvernia University by thoughtfully considering each of the following criteria. Please provide responses to the following statements/questions. Please also provide additional comments to help clarify your responses. Please be prepared to discuss your answers during your exit interview with a DPT faculty member with date and time TBD.

1. My educational experience in the DPT Program at Alvernia University helped me to understand the role of the Physical Therapist in today’s healthcare environment and encouraged me to develop collaborative relationships with healthcare professionals. (Goals: P-1, P-2, P-3, G-3)  
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

2. My educational experience in the DPT Program at Alvernia University was effective at connecting learning experiences with actual clinical care and has prepared me well for clinical practice. (Goals: P-1, F-1,F-2, G-1)  
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

3. My educational experience in the DPT Program at Alvernia University prepared me for entry-level clinical practice as a Physical Therapist in any practice setting. (Goals: P-2, G-1,G-2)  
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

4. My educational experience in the DPT Program at Alvernia University has prepared me to become a lifelong learner and has encouraged me to pursue new knowledge through continuing education and research. (Goals: P-2, F-4, G-4)  
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

5. My educational experience in the DPT Program at Alvernia University has prepared me to engage in evidence-based practice. (Goals: P-2, F-1, G-2)  
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree
6. My educational experience in the DPT Program at Alvernia University has encouraged me to maintain an active role in professional associations and to pursue professional autonomy. (Goals: P-2, F-3, F-4, G-3)
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

7. My educational experience in the DPT Program at Alvernia University has provided me with the resources needed to be culturally competent and respect the rights and dignity of others. (Goal: G-3)
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

8. My educational experience in the DPT Program at Alvernia University has provided me with the resources needed to communicate effectively with patients and families. (Goals: F-2, F-3, G-1, G-3)
   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

9. Briefly describe the aspects of the DPT Program at Alvernia University that you believe will have the greatest impact on your career in Physical Therapy.
   ____________________________________________________________________________________________
   ____________________________________________________________________________________________
   ____________________________________________________________________________________________

10. Briefly describe the aspects of the DPT Program at Alvernia University that you believe needs further development.
    ____________________________________________________________________________________________
    ____________________________________________________________________________________________
    ____________________________________________________________________________________________

11. In the future, which of the following areas would you like to become involved within the Alvernia DPT Program?
    ___ clinical instructor ___ lab assistant ___ guest speaker ___ admissions application reviewer
    ___ student research advisor ___ full-time faculty member ___ pro bono clinic supervisor ___ other

    If interested in becoming involved with the Alvernia University DPT Program, please attach your CV/resume
ALVERNIA UNIVERSITY
BACKGROUND CHECK POLICY – ACADEMIC PROGRAMS

It is the policy of Alvernia University’s academic programs to fully comply with Pennsylvania Laws related to criminal record and child abuse history clearances prior to entering any field/clinical educational setting that involves direct contact with children or older adults (defined as a person who is 60 years of age or older) and is associated with academic programs and/or service learning. Depending on the academic program, a repeated background check may be required prior to entering senior-level coursework.

Students in academic programs and/or service learning (if required by the facility) with convictions/charges documented on the background check reports will be advised on an individual basis. The student must understand and agree that Alvernia University may disclose the results of the background checks to the clinical/field facility where the student has sought to be placed. Certain types of clinical/field facilities have the right and/or responsibility to preclude students from the facility who have a history of criminal activity or child abuse.

Additionally, applicants to the Education and pre-license Health Programs (Nursing, Occupational Therapy, Social Work, DPT) must understand that in order to meet program outcomes they are obliged to directly work with children (Education and Nursing) and/or older adults (Nursing, Occupational Therapy, Social Work, and DPT). There are no alternatives to meet program outcomes. Such applicants/students with convictions/charges documented on the criminal* or child abuse reports will be denied acceptance into courses with associated clinical/field practice and therefore cannot complete the applicable program of study. Such applicants/students will be advised of other academic study options at Alvernia University.

* Convictions/charges documented on a PA Criminal Record Check report will be based on criteria outlined in Acts 169/13

Many professions require further licensing or certification beyond a college degree and applicants may be denied employment in certain occupations for misdemeanors and felony convictions, including alcohol related offenses. Refer to the Pennsylvania Liquor Control Board for a complete listing of criminal violations related to licensure www.lcb.state.pa.us/edu/.

Academic programs will include written statements regarding background checks in their marketing and catalog documents. Students will be advised of the background check policy during the admission process prior to service learning (if required by the facility).

The specific laws affecting background checks and the accompanying mechanism of checking are outlined on the following page.

PROCEDURES:
Students are responsible for obtaining the following clearances. The fees for the clearances are the responsibility of the students. A copy of the clearances will be maintained in the student’s file.
1. Act 34 – PA State Police Criminal Record Check
2. Act 114 – FBI Clearance (fingerprint clearance through the Cogent System)
3. Act 151 – PA Child Abuse History Clearance
4. The decision to not allow enrollment in a pre-license Health Program based upon a positive criminal or child abuse record check may be appealed by the student. See Alvernia University Student Grievance Policy and Process.
<table>
<thead>
<tr>
<th>Law</th>
<th>Description</th>
<th>Requirement</th>
<th>Mechanism of Checking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older Adults Protective Services Act</td>
<td>Affects employees/students in nursing homes, personal care homes, domiciliary care homes, adult daycare centers and home health care providers</td>
<td>Submit to a criminal record background check</td>
<td>PA Criminal Record Check</td>
</tr>
<tr>
<td>OAPSA Act 169 (1996) and Act 13 (1997) (<a href="http://www.aging.state.pa.us">www.aging.state.pa.us</a>)</td>
<td></td>
<td>Report the suspected abuse of any person who is receiving care from the agency regardless of age</td>
<td>For students who have not been residents of PA for two consecutive years immediately preceding the date of application, a Federal Bureau of Investigation (FBI) Criminal History Background check on the required Department of Aging Form (FD-258 and PDACBC-1) (8/31/07 Department of Aging Memo)</td>
</tr>
<tr>
<td>PA Department of Public Welfare Child Protective Services Law</td>
<td>Affects any individual with a significant likelihood of regular contact with children in the form of care, guidance, supervision or training.</td>
<td>Submit to PA Child Abuse History Clearance, PA Criminal Record Check, and FBI Criminal History Background Check</td>
<td>PA Child Abuse History Clearance Form (CY-113-UF)</td>
</tr>
<tr>
<td>Section 6344 Title 23 Pa. Chap. 63 Act 73 (<a href="http://www.dpw.state.pa.us">www.dpw.state.pa.us</a>)</td>
<td></td>
<td></td>
<td>FBI Criminal Record Check</td>
</tr>
<tr>
<td>PA Department of Public Welfare Child Protective Services Law</td>
<td>Affects any individual with a significant likelihood of regular contact with children in the form of care, guidance, supervision or training.</td>
<td>Submit to PA Child Abuse History Clearance, PA Criminal Record Check, and FBI Criminal History Background Check</td>
<td>FBI Criminal History Background Check via Cogent Systems</td>
</tr>
<tr>
<td>PA Department of Education Act 34 (1985) amended by Act 114 (2006) (criminal background) Act 151 (child abuse) Section 111 of Public School Code and Chapter 8 of State Board of Education Regulations (<a href="http://www.teaching.state.pa.us">www.teaching.state.pa.us</a>)</td>
<td>All student teachers participating in classroom teaching, internships, clinical, or field experiences; prospective employees of public and private schools, vo-tech, and intermediate units who have direct contact with children must provide a copy of PSP, FBI reports no more than 1 year old</td>
<td>Submit to PA Child Abuse History Clearance, PA Criminal Record Check, and FBI Criminal History Background Check</td>
<td>PA Child Abuse History Clearance Form (CY-113-UF)</td>
</tr>
<tr>
<td>PA Department of Education Background Checks (Act 114 and Act 24) Changes to Section 111 of School Code September 28, 2011 Act 24 of 2011 contains a number of significant changes to the PA School Code that are designed to enhance the safety of school children. Section 111 applies to all student teachers participating in classroom teaching, internships, clinical, or field experiences; prospective employees of public and private schools, vo-tech, and intermediate units who have direct contact with children.</td>
<td>Required reporting within 72 hours of any arrest or conviction of an offense listed in Section 111e that has occurred after September 28, 2011.</td>
<td>PA Child Abuse History Clearance Form (CY-113-UF)</td>
<td>PA Criminal Record Check</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>FBI Criminal History Background Check via Cogent Systems</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>PDE reporting form 6004</td>
</tr>
</tbody>
</table>
## Prohibitive Offenses Contained in Act 169 of 1996 as Amended by Act 13 of 1997

<table>
<thead>
<tr>
<th>Offense Code</th>
<th>Prohibitive Offense</th>
<th>Type of Conviction</th>
</tr>
</thead>
<tbody>
<tr>
<td>CC2500</td>
<td>Criminal Homicide</td>
<td>Any</td>
</tr>
<tr>
<td>CC2502A</td>
<td>Murder I</td>
<td>Any</td>
</tr>
<tr>
<td>CC2502B</td>
<td>Murder II</td>
<td>Any</td>
</tr>
<tr>
<td>CC2502C</td>
<td>Murder III</td>
<td>Any</td>
</tr>
<tr>
<td>CC2503</td>
<td>Voluntary Manslaughter</td>
<td>Any</td>
</tr>
<tr>
<td>CC2504</td>
<td>Involuntary Manslaughter</td>
<td>Any</td>
</tr>
<tr>
<td>CC2505</td>
<td>Causing or Aiding Suicide</td>
<td>Any</td>
</tr>
<tr>
<td>CC2506</td>
<td>Drug Delivery Resulting in Death</td>
<td>Any</td>
</tr>
<tr>
<td>CC2702</td>
<td>Aggravated Assault</td>
<td>Any</td>
</tr>
<tr>
<td>CC2901</td>
<td>Kidnapping</td>
<td>Any</td>
</tr>
<tr>
<td>CC2902</td>
<td>Unlawful Restraint</td>
<td>Any</td>
</tr>
<tr>
<td>CC3121</td>
<td>Rape</td>
<td>Any</td>
</tr>
<tr>
<td>CC3122.1</td>
<td>Statutory Sexual Assault</td>
<td>Any</td>
</tr>
<tr>
<td>CC3123</td>
<td>Involuntary Deviate Sexual Intercourse</td>
<td>Any</td>
</tr>
<tr>
<td>CC3124.1</td>
<td>Sexual Assault</td>
<td>Any</td>
</tr>
<tr>
<td>CC3125</td>
<td>Aggravated Indecent Assault</td>
<td>Any</td>
</tr>
<tr>
<td>CC3126</td>
<td>Indecent Assault</td>
<td>Any</td>
</tr>
<tr>
<td>CC3127</td>
<td>Indecent Exposure</td>
<td>Any</td>
</tr>
<tr>
<td>CC3301</td>
<td>Arson and Related Offenses</td>
<td>Any</td>
</tr>
<tr>
<td>CC3502</td>
<td>Burglary</td>
<td>Any</td>
</tr>
<tr>
<td>CC3701</td>
<td>Robbery</td>
<td>Any</td>
</tr>
<tr>
<td>CC3901</td>
<td>Theft</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3921</td>
<td>Theft By Unlawful Taking</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3922</td>
<td>Theft By Deception</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3923</td>
<td>Theft By Extortion</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3924</td>
<td>Theft By Property Lost</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3925</td>
<td>Receiving Stolen Property</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3926</td>
<td>Theft of Services</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3927</td>
<td>Theft By Failure to Deposit</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3928</td>
<td>Unauthorized Use of a Motor Vehicle</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3929</td>
<td>Retail Theft</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3929.1</td>
<td>Library Theft</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3930</td>
<td>Theft of Trade Secrets</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3931</td>
<td>Theft of Unpublished Dramas or Musicals</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3932</td>
<td>Theft of Leased Properties</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3933</td>
<td>Unlawful Use of a Computer</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC3934</td>
<td>Theft From a Motor Vehicle</td>
<td>1 Felony or 2 Misdemeanors</td>
</tr>
<tr>
<td>CC4101</td>
<td>Forgery</td>
<td>Any</td>
</tr>
<tr>
<td>CC4114</td>
<td>Securing Execution of Documents by Deception</td>
<td>Any</td>
</tr>
<tr>
<td>CC4302</td>
<td>Incest</td>
<td>Any</td>
</tr>
<tr>
<td>CC4303</td>
<td>Concealing Death of a Child</td>
<td>Any</td>
</tr>
<tr>
<td>CC4304</td>
<td>Endangering Welfare of a Child</td>
<td>Any</td>
</tr>
<tr>
<td>CC4305</td>
<td>Dealing in Infant Children</td>
<td>Any</td>
</tr>
<tr>
<td>CC4952</td>
<td>Intimidation of Witnesses or Victims</td>
<td>Any</td>
</tr>
<tr>
<td>CC4953</td>
<td>Retaliation Against Witness or Victim</td>
<td>Any</td>
</tr>
<tr>
<td>CC5902B</td>
<td>Promoting Prostitution</td>
<td>Felony</td>
</tr>
<tr>
<td>CC5903C</td>
<td>Obscene or Other Sexual Materials to Minors</td>
<td>Any</td>
</tr>
<tr>
<td>CC5903D</td>
<td>Obscene or Other Sexual Materials</td>
<td>Any</td>
</tr>
<tr>
<td>CC6301</td>
<td>Corruption of Minors</td>
<td>Any</td>
</tr>
<tr>
<td>CC6312</td>
<td>Sexual Abuse of Children</td>
<td>Any</td>
</tr>
<tr>
<td>CS13A12</td>
<td>Acquisition of Controlled Substance by Fraud</td>
<td>Felony</td>
</tr>
<tr>
<td>CS13A14</td>
<td>Delivery by Practitioner</td>
<td>Felony</td>
</tr>
<tr>
<td>CS13A30</td>
<td>Possession with Intent to Deliver</td>
<td>Felony</td>
</tr>
<tr>
<td>CS13A36</td>
<td>Illegal Sale of Non-Controlled Substance</td>
<td>Felony</td>
</tr>
<tr>
<td>CS13A37</td>
<td>Designer Drugs</td>
<td>Felony</td>
</tr>
</tbody>
</table>
Background Checks
Notification of Policy

(Initials in all boxes)

☐ I acknowledge receipt of the background check policy.

☐ I acknowledge that if convictions/charges are documented on the background check reports, it is my responsibility to notify the school/clinical/field facility of these infractions.

☐ I acknowledge my responsibility to make Alvernia University aware of any changes to my record after the initial background check is completed.

☐ I acknowledge that my failure to adhere to the background check policy, or to make the required disclosures to Alvernia University, shall subject me to disciplinary action up to and including dismissal from any academic program in which I am participating and my removal from the University.

☐ I acknowledge that I am aware of the provisions of Act 24 and that certain enumerated convictions result in an individual being prohibited from working in the Pennsylvania Educational System and that the prohibition may be for a period of years or even a lifetime ban from working in the educational field.

_________________________________________  ____________________
Student name printed      Date

________________________________________
Student signature
All full-time Alvernia University students are required to submit a completed Medical History Form and Physical Exam to the Health and Wellness Center.

Health records maintained by the Health and Wellness Center are confidential and will be released only with written permission. Students are responsible for completing the Authorization to Release Medical Information (below) and submitting it to the Health & Wellness Center (located in Veronica Hall) in order that information requested by clinical sites may be made available to them. Students are responsible for maintaining communication with the Director of Health Services and for assuring that current information is on file in the Health & Wellness Center.

Students and clinical sites may request information from:

Claire Murphy, MD                          Phone:  610-568-1467
Director of Health Services                     FAX:   610-796-8422
Alvernia University
400 St. Bernardine Street
Reading, PA  19607-1799

AUTHORIZATION TO RELEASE MEDICAL INFORMATION

I, ________________________________, give my permission to Alvernia University
Name of Student

Health and Wellness Center to release my medical information such as immunization records,
physical exams, ppd’s, and drug screens to my clinical site as requested.

Information shared with Teaching, Clinical or Internship sites becomes part of the student’s Educational Record under FERPA. This includes, but is not limited to immunization records, physical exams, ppd’s, and drug screens.

_________________________________________  __________________________
Student’s Signature                  Date

_________________________________________
Student’s Name Printed

Student ID number __________________________

Initial 5/11; Reviewed Annually
Appendix D

Exposure Incident Report
Alvernia University
Doctor of Physical Therapy Program
Student Form
(Please Print)

Student’s Name_________________________________   Date____/____/______
Date of Birth____/____/______               SS#____-____-_______
Telephone (Home)____________________              Telephone (Cell)____________________
Date of Exposure____/____/______   Time of Exposure _________AM___PM___
Hepatitis B Vaccination Status________________   Location of Incident__________________

Describe the circumstances under which the exposure incident occurred:
____________________________________________________________________________________________
____________________________________________________________________________________________

Name what body fluids, if any, you were exposed to:
____________________________________________________________________________________________

Describe the route of exposure (mucosal contact, contact with non-intact skin, percutaneous):
____________________________________________________________________________________________

Describe any personal protective equipment (PPE) in use at the time of the exposure incident:
____________________________________________________________________________________________

Did the PPE fail?______________ If yes, how?____________________________________
Identification of source individual(s) name(s): _______________________________________
Other pertinent information:_____________________________________________________

Physician/Health Care Provider Information
Name of physician/health care provider:_________________________________
Facility:_____________________________
Address:_____________________________________
Was the student treated in an emergency room? Yes_____     No_____
Was the student hospitalized overnight as an in-patient? Yes_____     No_____
Exposure Incident Post-Exposure Source Individual’s Consent Form
Doctor of Physical Therapy Program

Source Individual Name: ________________________________

Date: ___ / ___ / ______

_____ I hereby consent to blood collection to determine the presence of bloodborne pathogens, and to document my test results. This information will be provided confidentially to the individual(s) exposed to my blood.

_____ I do not presently consent to having my blood tested.

_________________________________    ____/____/______
Source Individual’s Signature              Date

_________________________________   ____/____/______
Athletics Administrator Signature              Date
Appendix E

ALVERNIA UNIVERSITY
DIVISION OF PROFESSIONAL PROGRAMS
Health Care Majors Mandatory Online HIPAA Education Session

POLICY:
It is the policy of Alvernia University Division of Professional Programs’ Health Care Students and Faculty (Physical Therapy, Athletic Training, Nursing, Occupational Therapy, Social Work) to participate in a mandatory online Health Insurance Portability and Accountability Act (HIPAA) Education Session prior to entering clinical field work with client contact.

PURPOSE:
The goal of this program is to identify HIPAA initiatives regarding patient privacy and data security and to help healthcare workers comply with the guidelines.

COURSE OBJECTIVES:
1. Describe the overall purpose and goals of the HIPAA.
2. Discuss the compliance issues with privacy reforms, including written notice, acknowledgement, prior authorization, and minimum disclosure.
3. Discuss compliance with data security reforms, including issues regarding workplace layout, information storage, and rules covering conversation.

PROCEDURE:
1. Access the online HIPAA for Healthcare Workers program by MEDCOM TRAINEX through the website: http://www.medcomrn.com/alvernia. Any computer with online access may be used.
2. Create an account following directions on the screen. There is not an Alvernia identifier, so use any ID and Password you wish.
3. Enter personal registration information following directions on the screen. Identify yourself having a License in PA and enter “RN” in the Type of License Window.
4. Proceed to program instructions. NOTE: you may need to install the free version of RealPlayer for the streaming video to work. There is a link on the screen.
5. Complete all three (3) programs:
   a. HIPAA for Nurses: An Overview
   b. HIPAA for Nurses: The Privacy Rule
   c. HIPAA for Nurses: The Security Rule
6. Complete all three posttests, program evaluations and print certificates.
7. Provide your department secretary with all three (3) program certificates by the due date given by your program.

FAQ:
1. What if I have already attended a HIPAA program?
   a. There are no exceptions to this policy; however, if you are competent in the HIPAA content, you may take the posttests without viewing the videos. Print certificates and submit to the department secretary.
2. What if I encounter problems with the online program?
   a. Contact the MEDCOM Technical support as directed on your screen
   b. If you have unresolved questions after working with the MEDCOM technical support staff, report the specific issues in writing to your department secretary.
## DPT Curriculum Assessment Matrix

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Measure</th>
<th>Time Frame</th>
<th>Source</th>
<th>Expected Outcome</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students will achieve entry-level performance by the completion of their final internships (DPT 724 and 725)</td>
<td>PT CPI Web</td>
<td>At completion of post-didactic 12 week internships (DPT 724 and 725) in final semester</td>
<td>Clinical Instructors, Students</td>
<td>100% of students will achieve a minimum score of entry-level or better for all criteria on the PT CPI Web</td>
<td>TBD</td>
</tr>
<tr>
<td>Students will report improvement in their clinical performance for each clinical practice course</td>
<td>Student Information Form (Appendix P-10,1)</td>
<td>At the completion of each part- and full-time clinical practice course</td>
<td>Students</td>
<td>75% or more of students indicate that they &quot;learned or improved upon specific skills&quot; and are no longer “concerned about” specific areas of practice previously described</td>
<td>TBD</td>
</tr>
<tr>
<td>Students will contribute to the development and completion of a capstone research project in collaboration with Faculty</td>
<td>Abstracts from DPT Annual Critical Inquiry event</td>
<td>Annually in May</td>
<td>Faculty</td>
<td>100% of students will complete an original research project and present their findings to faculty and their peers</td>
<td>TBD</td>
</tr>
<tr>
<td>Students will support their clinical decisions through the acquisition, analysis, and utilization of current evidence</td>
<td>Course grading rubrics</td>
<td>Throughout courses within the clinical practice pattern curricular track</td>
<td>Course syllabi, Faculty</td>
<td>90% of practice pattern courses will require an evidence-based project and 90% of students will successfully demonstrate the ability to apply evidence when completing this project</td>
<td>TBD</td>
</tr>
<tr>
<td>Indicator</td>
<td>Measure</td>
<td>Time Frame</td>
<td>Source</td>
<td>Expected Outcome</td>
<td>Results</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>------------------------------------------</td>
<td>-------------------------</td>
<td>--------------------------------------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>Students will report that they are prepared for entry-level practice</td>
<td>DPT Student Exit Survey (Appendix P-4,8) and Interview</td>
<td>Final semester prior to graduation</td>
<td>Students</td>
<td>90% of students will indicate a rating of SA or A on all criteria</td>
<td>TBD</td>
</tr>
<tr>
<td>Students will perform at or above the level of students from other programs</td>
<td>Full-Time Internship Midterm Check-In Form (Appendix P-11,1)</td>
<td>Mid-Term during each of the full-time clinical internships (DPT 524,624,724,725)</td>
<td>Clinical Instructors</td>
<td>75% of clinical instructors rate students as being equal to or better overall than other students at the same level of education from other programs</td>
<td>TBD</td>
</tr>
<tr>
<td>Students will satisfactorily perform clinical practice skills at a level commensurate with his/her place in the Program</td>
<td>Part-Time Clinical Experience Instrument (Appendix P-11,2 and P-11,3)</td>
<td>Throughout part-time clinical practice courses (DPT 522,523,622,623)</td>
<td>Clinical Instructors</td>
<td>90% of students will perform satisfactorily on every clinical skill during lab skill checks and practical exams</td>
<td>TBD</td>
</tr>
<tr>
<td>Graduates will demonstrate satisfactory performance on the NPTE</td>
<td>FSBPT Reports</td>
<td>Annually after completion of the NPTE by all graduates</td>
<td>Federation of State Boards of Physical Therapy</td>
<td>95% of all graduates will pass the NPTE and achieve licensure, 85% will pass the NPTE the first time.</td>
<td>TBD</td>
</tr>
<tr>
<td>Graduates will report that the Program prepared them well for clinical practice</td>
<td>DPT Graduate Survey (Appendix P-4,8)</td>
<td>1 year, 3 years, 5 years post-graduation</td>
<td>Program graduates</td>
<td>75% of respondents will indicate a rating of SA or A on all criteria</td>
<td>TBD</td>
</tr>
<tr>
<td>Employers will report that Program graduates perform at or above the level of other therapists</td>
<td>Employer Survey (Appendix P-4,9)</td>
<td>1 year post-graduation</td>
<td>Employers of Program graduates</td>
<td>75% of respondents will indicate a rating of SA or A on all criteria</td>
<td>TBD</td>
</tr>
</tbody>
</table>
**Appendix G**

**ALVERNIA UNIVERSITY**

**DOCTOR OF PHYSICAL THERAPY PROGRAM**

**DPT Graduate Survey**

Name: _____________________________________________ Graduation Year: _________

Address: ___________________________________________ Email: __________________

Phone (Home): ________________ (Work): ________________ (Cell): ________________

**Instructions:** As you reflect back upon your time within the DPT Program at Alvernia University, please thoughtfully consider each of the following criteria and provide responses to the following statements/questions. Please also provide additional comments to help clarify your responses.

---

2. My educational experience in the DPT Program at Alvernia University helped me to understand the role of the Physical Therapist in today’s healthcare environment and encouraged me to develop collaborative relationships with healthcare professionals. (Goals: P-1, P-2, P-3, G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

---

3. My educational experience in the DPT Program at Alvernia University prepared me for entry-level clinical practice as a Physical Therapist in any practice setting. (Goals: P-2, G-1, G-2)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

---

3. My educational experience in the DPT Program at Alvernia University has prepared me to engage in evidence-based practice. (Goals: P-2, F-1, G-2)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

---

4. My educational experience in the DPT Program at Alvernia University has prepared me to become a lifelong learner and has encouraged me to pursue new knowledge through continuing education and research. (Goals: P-2, F-4, G-4)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

---

5. My educational experience in the DPT Program at Alvernia University has prepared me to engage in evidence-based practice. (Goals: P-2, F-1, G-2)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree
6. My educational experience in the DPT Program at Alvernia University has encouraged me to maintain an active role in professional associations and to pursue professional autonomy. (Goals: P-2, F-3, F-4, G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

7. My educational experience in the DPT Program at Alvernia University has provided me with the resources needed to be culturally competent and respect the rights and dignity of others. (Goal: G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

8. My educational experience in the DPT Program at Alvernia University has provided me with the resources needed to communicate effectively with patients and families. (Goals: F-2, F-3, G-1, G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

9. Briefly describe the aspects of the DPT Program at Alvernia University that you believe will have the greatest impact on your career in Physical Therapy.

   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________
   __________________________________________________________________________________________

10. Briefly describe the aspects of the DPT Program at Alvernia University that you believe needs further development.

    __________________________________________________________________________________________
    __________________________________________________________________________________________
    __________________________________________________________________________________________
    __________________________________________________________________________________________

EMPLOYMENT:

11. When did you get your first job offer as a physical therapist? How long after graduation?
   Please describe: ________________________________

12. Have you been employed continuously since graduation? ____ YES   ____ NO

13. Which of the following best describes your current employment? ____ acute care hospital  ____ transitional care  ____ rehabilitation hospital  ____ skilled nursing facility  ____ school-based  ____ private practice  ____ outpatient  ____ research institution  ____ academic institution  ____ home health care
PROFESSIONAL ACTIVITIES:

14. Are you a member of the APTA?     ____ YES   ____ NO
15. Have you served on an APTA committee at the district, chapter, or national level since graduation?
   ____ YES   ____ NO   Please describe: ______________________________________________________
16. Have you been involved in other professional associations since graduation?
   ____ YES   ____ NO   Please describe: ______________________________________________________
17. Have you been involved in community service since graduation? (ie.church or civic organizations)
   ____ YES   ____ NO   Please describe: ______________________________________________________
18. Have you provided pro bono physical therapy services since graduation?
   ____ YES   ____ NO   Please describe: ______________________________________________________

EDUCATION, SPECIALIZATION, and RESEARCH:

19. Have you attended a continuing education seminar/workshop since graduation?
   ____ YES   ____ NO How many? ____ Please describe: ______________________________________
20. Have you achieved board certification through the ABPTS? (ie. OCS, GCS, NCS, etc.)
   ____ YES   ____ NO   What year/specialty? __________________________________________________
21. Have you achieved specialized certification through another organization? (ie. ATC, NDT, CSCS, etc.)
   ____ YES   ____ NO   Please describe: ______________________________________________________
22. Have you engaged in peer-reviewed presentation or publication since graduation? (ie. approved by editorial
    board)   ____ YES   ____ NO   Please describe: ______________________________________________
23. Have you engaged in non-peer-reviewed presentation or publication since graduation? (ie. invited speaker,
    published editorial, etc.)   ____ YES   ____ NO   Please describe: __________________________________

ALVERNIA DPT PROGRAM PARTICIPATION:

24. Have you been involved in some capacity with the Alvernia DPT Program since graduation?
   ____ YES   ____ NO   Please describe: ______________________________________________________
25. In which of the following areas would you like to become involved within the Alvernia DPT Program?
   ____ clinical instructor   ____ lab assistant   ____ guest speaker   ____ admissions application reviewer
   ____ student research advisor   ____ full-time faculty member   ____ pro bono clinic supervisor   ____ other

*If interested in becoming involved with the Alvernia University DPT Program, please attach your CV/resume*

Please provide any additional comments.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
### Employer Survey

**Clinic Name:** __________________________________

**Type of Facility:** ____________________________

**Person completing survey:** ____________________________________________________

**Address:** ____________________________

**Email:** ____________________________  **Phone:** ____________________________

---

**Instructions:** Please consider any of your past or present employees who graduated from Alvernia University’s DPT Program and provide responses to the following statements/questions. Please provide additional comments to help clarify your responses.

1. **Our facility has hired the following number of Alvernia University DPT graduates:**
   - _____ None (please skip to statement #18.)
   - _____ 1-5
   - _____ 6-10
   - _____ More than 10

2. **Our facility has hired the number of Alvernia DPT graduates noted above primarily because:**
   - _____ limited # of graduates have applied
   - _____ our facility was not hiring
   - _____ I have been pleased with Alvernia DPT graduates as employees
   - _____ I have been pleased with Alvernia DPT students
   - _____ I am a graduate of Alvernia’s DPT Program
   - _____ I have not been pleased with Alvernia DPT students/graduates

3. **Alvernia University DPT graduates** understand the role of the Physical Therapist in today’s healthcare environment and successfully develop collaborative relationships with other healthcare professionals. (Goals: P-1, P-2, P-3, G-3)
   - _____ 5 – Strongly Agree
   - _____ 4 – Agree
   - _____ 3 – Neutral
   - _____ 2 – Disagree
   - _____ 1 – Strongly Disagree

4. **Alvernia University DPT graduates** are prepared for entry-level clinical practice as a Physical Therapist. (Goals: P-2, G-1, G-2)
   - _____ 5 – Strongly Agree
   - _____ 4 – Agree
   - _____ 3 – Neutral
   - _____ 2 – Disagree
   - _____ 1 – Strongly Disagree

5. **Alvernia University DPT graduates** demonstrate the desire to become lifelong learners and engage in scholarly pursuit. (Goals: P-2, F-4, G-4)
   - _____ 5 – Strongly Agree
   - _____ 4 – Agree
   - _____ 3 – Neutral
   - _____ 2 – Disagree
   - _____ 1 – Strongly Disagree
6. **Alvernia University DPT graduates** consistently engage in, and demonstrate the importance of, evidence-based practice. (Goals: P-2, F-1, G-2)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

7. **Alvernia University DPT graduates** maintain an active role in professional associations and pursue professional autonomy. (Goals: P-2, F-3, F-4, G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

8. **Alvernia University DPT graduates** demonstrate cultural competence and consistently respect the rights and dignity of others. (Goal: G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

9. **Alvernia University DPT graduates** communicate effectively with patients and families. (Goals: F-2, F-3, G-1, G-3)

   ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

10. **Alvernia University DPT graduates** are among the top 10% of all employees in overall performance.

    ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

11. **Alvernia University DPT graduates** are among the top 10% of all employees in the specific area of **clinical competence**. (Goals: P-2, G-1,G-2)

    ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

12. **Alvernia University DPT graduates** are among the top 10% of all employees in the specific area of **cultural consciousness** (understanding their responsibility to the local community and profession). (Goal: G-3)

    ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree

13. **Alvernia University DPT graduates** are among the top 10% of all employees in the specific area of **professionalism** (respects the rights of others and understands their role as a doctorally-trained professional). (Goals: P-2, F-3, G-3)

    ____ 5 – Strongly Agree   ____ 4 – Agree   ____ 3 – Neutral   ____ 2 – Disagree   ____ 1 – Strongly Disagree
14. The **Alvernia University DPT Program** is a valuable educational resource for the local Physical Therapy community by providing consultation, continuing education, and advocacy. (Goals: P-3, F-3, G-3)

____ 5 – Strongly Agree ____ 4 – Agree ____ 3 – Neutral ____ 2 – Disagree ____ 1 – Strongly Disagree

15. The **Alvernia University DPT Program** has become a resource for health promotion and education designed to improve the quality of life for individuals of the community. (Goals: P-3, F-3, G-3)

____ 5 – Strongly Agree ____ 4 – Agree ____ 3 – Neutral ____ 2 – Disagree ____ 1 – Strongly Disagree

16. Briefly describe the aspects of the DPT Program at Alvernia University that you believe are the strongest and most closely resemble contemporary PT practice.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

17. Briefly describe the aspects of the DPT Program at Alvernia University that you believe needs further development.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

18. Have you been involved in some capacity with the Alvernia DPT Program?

____ YES ____ NO  Please describe: ______________________________________________________

19. In which of the following areas would you like to become involved with the Alvernia DPT Program?

____ clinical instructor ____ lab assistant ____ guest speaker ____ admissions application reviewer

____ student research advisor ____ full-time faculty member ____ pro bono clinic supervisor ____ other

*If interested in becoming involved with the Alvernia University DPT Program, please attach your CV/resume*

Please provide additional comments including ways in which the Alvernia DPT Program may become a better resource for you and may better serve the local community.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________