

# 2018 - 2019 Bellin College

Doctor of Science in Physical Therapy - Handbook and Catalog





Welcome from the President



Dear Bellin College Student,

It is a pleasure to welcome you to Bellin College. Since 1909, the College has provided a rich and stimulating environment that promotes learning in every student who enters our program. You'll learn and grow beyond your expectations. Personally, I have been a part of the College for over 25 years and truly enjoy all that Bellin College has to offer the students.

Our Bellin College Mission is to prepare healthcare professionals by providing an intellectually stimulating environment focused on leadership, community service, and lifelong learning that promotes excellence in healthcare. The College values of Excellence, Integrity, Community, and Caring are clearly seen in all of our work and interactions with our students, board members, alumni, friends, and the community.

The faculty, staff, and administration are committed to the academic success of our students. Our faculty members prepare students for the healthcare profession and provide multiple opportunities for them to learn the latest innovations through classroom, lab, and clinical settings. These learning experiences enrich the students' application of critical thinking, which is necessary for success in today's evolving healthcare world. In the end, a Bellin College education has prepared its graduates to deliver an excellent patient experience. We are proud to say Bellin College graduates make a difference in their profession, the community, and society at large. Our graduates are able to reach their goals through lifelong learning and as leaders in healthcare.

I invite you to tour our website and visit our beautiful campus located in Green Bay, Wisconsin. There is always something new and exciting at Bellin College!

Positively,

Dr. Connie J. Boerst

Connie J. Boerst, EdD, RN President/CEO Professor of Nursing

**January 2018** if discrepancies exist between official Bellin College Doctorate of Science Physical Therapy Guide Handbook & Catalog, printed materials, and electronic information, the most current digital copy of the Guide available on the College website shall have precedence unless other sources specifically state that they are the official source in lieu of the digital copy of the Guide.

The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog is not intended to create or represent a contractual relationship between the College and any student. The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog, in conjunction with other official College documents such as Financial Aid Policies and Procedures, is intended to provide a student reference for rules, regulations, policies and procedures governing student behavior and the College's expectations of its students. The College reserves the right to change the requirements published in this Guide at any time. The College reserves the right to change the program of study as needed to fulfill state approval and national certification requirements.

Students are responsible to become familiar with information in all of the listed College documents and adhere to the policies contained in these documents. Bellin College reserves the right to make changes in its policies and procedures as conditions warrant.

# The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog 2018-2019

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# Introduction to Bellin College

# **Mission Statement**

Bellin College is dedicated to preparing healthcare professionals by providing an intellectually stimulating environment focused on leadership, community service, and lifelong learning that promotes excellence in healthcare practice and the advancement of the profession.

# Values

- Excellence being the best
- Integrity honest and ethical behavior
- Community partnership and shared participation
- Caring empowering relationships based on empathy and respect

## Vision

Bellin College will be the best health science College in the state of Wisconsin.

## **College Purposes**

- To provide excellent educational programs which are responsive to the community.
- To create an intellectually stimulating environment for students, faculty, and staff.
- To contribute to the community's well-being through faculty, staff and student services.
- To stimulate a climate of quality improvement.

# Philosophy of Teaching and Learning

Bellin College faculty are facilitators, role models, and resources in the learning process. We provide an environment that supports a diverse student population. We pursue excellence in education by assisting students to develop critical thinking skills with a commitment toward the College values of Excellence, Integrity, Community, and Caring.

Teaching/learning is a dynamic process of discovery attained through interaction and engagement. Faculty members implement cooperative teaching strategies in partnership with students to achieve program outcomes. Students share the responsibility of achieving their learning goals through participation in the education process. As co-creators of their learning, students have a responsibility to develop a scholarly approach to learning through assimilation and integration of new knowledge, utilization of technology, and life experiences.

Graduates of Bellin College are prepared to function in leadership roles and affect social, ethical, political, and economic issues surrounding healthcare.

# **Programs Overview**

The fellowship program is designed to advance the skills of physical therapy practitioners in application of evidence-based research and advanced orthopaedic manual physical therapy techniques with a goal of improving the outcomes of patients with musculoskeletal conditions.

The DScPT degree program expands on the knowledge, skills, and abilities obtained from the fellowship certificate with emphasis on research, educational leadership, and advanced practice.

Students may choose to complete only the fellowship component or may choose to continue to complete the DScPT degree. Successful completion of an orthopaedic manual physical therapy fellowship is required to complete the DScPT program.

# Fellowship Certificate Program Goals

- Provide an innovative and cutting edge educational environment consistently, across all clinical settings, and for all fellows-in-training, through integration of state of the art learning tools with advanced professional clinical practice.
- Admit and develop physical therapists that value the principles of evidence-based practice and behave accordingly in their daily practice.
- Develop practitioners skilled in the integration of eclectic orthopaedic manual physical therapy techniques and evidence-based practice principles into an advanced clinical decision-making framework for the management of patients with musculoskeletal conditions.
- Develop practitioners who confidently and professionally interact with physical therapy colleagues and other healthcare providers (general physicians, surgeons, nurse practitioners, physician assistants, etc.), and provide leadership in evidence-based care for musculoskeletal conditions.
- Develop fellows who are prepared to step into initial leadership roles in clinical practice, education, clinical research, and/or the business of physical therapy and in professional service through the APTA (local chapters, state chapters, and national association), the AAOMPT, and physical therapy practices throughout the United States.
- Provide an efficient route for physical therapists from all areas of the country, including rural environments, to access and matriculate through post-professional fellowship training.
- Ensure consistent, high-quality, post-professional development for all of our participants in the fellowship program.

# Fellowship Certificate Program Outcomes

Upon completion of the program, the graduate is able to:

- Integrate the principles of evidence-based practice into clinical practice.
- Incorporate an advanced clinical decision-making framework for the management of patients.
- Demonstrate confidence and skills in teaching/collaborating with intra and inter-disciplinary colleagues.

# **DScPT Program Goals**

- Develop clinical scientists with the ability to complete advanced clinical-based research, advancing the profession of physical therapy.
- Develop educational leaders who excel at mentoring, instilling professional values, and serving as a role model to their colleagues and students.

# **DScPT Program Outcomes**

Upon completion of the program, the graduate is able to:

- Advance the science of physical therapy through the use of translational research to improve patient outcomes and health care systems.
- Serve as a practice leader in the design, direction, and evaluation of systems to advance evidence-based practice.
- Apply transformative leadership skills to influence health policy designed to advance the profession and improve outcomes through the advancement of cost effective, evidence-based care.
- Demonstrate competence in teaching through curriculum development, assessment and evaluation, incorporating sound pedagogical and andragological principles.
- Demonstrate oral and written communication skills required to present and publish scholarly work.
- Collaborate intra and interprofessionally to address complex practice, system, and policy issues.

# American Physical Therapy Association (APTA) Guide for Professional Conduct and Code of Ethics:

#### Preamble

This Code of Ethics of the American Physical Therapy Association sets forth principles for the ethical practice of physical therapy. All physical therapists are responsible for maintaining and promoting ethical practice. To this end, the physical therapist shall act in the best interest of the patient/client. This Code of Ethics shall be binding on all physical therapists.

Principle 1:	A physical therapist shall respect the rights and dignity of all individuals and shall provide compassionate care.
Principle 2:	A physical therapist shall act in a trustworthy manner towards patients/clients, and in all other aspects of physical therapy practice.
Principle 3:	A physical therapist shall comply with laws and regulations governing physical therapy and shall strive to effect changes that benefit patients/clients.
Principle 4:	A physical therapist shall exercise sound professional judgment.
Principle 5:	A physical therapist shall achieve and maintain professional competence.
Principle 6:	A physical therapist shall maintain and promote high standards for physical therapy practice, education, and research.
Principle 7:	A physical therapist shall seek only such remuneration as is deserved and reasonable for physical therapy services.
Principle 8:	A physical therapist shall provide and make available accurate and relevant information to patients/clients about their care and to the public about physical therapy services.
Principle 9:	A physical therapist shall protect the public and the profession from unethical, incompetent, and illegal acts.
Principle 10:	A physical therapist shall endeavor to address the health needs of society.
Principle 11:	A physical therapist shall respect the rights, knowledge, and skills of colleagues and other health care professionals.

# Academic Calendar

Please see the Bellin College website at <u>www.bellincollege.edu</u> under Campus Life. Click on calendar for the full academic calendar.

# Add/Drop Dates

Please see the Bellin College website at <u>www.bellincollege.edu</u> for the listing of program and course add/drop dates. Click on calendar for the full academic calendar.

# **Directory of Faculty and Staff**

Please see the Bellin College website at <u>www.bellincollege.edu</u> for the full directory of faculty and staff. Click on About Bellin College, Directory.

## **Directory of Board of Trustees**

Please see the Bellin College website at <u>www.bellincollege.edu</u> for the full listing of the Board. Click on About Bellin College, Governance.

# ► College Information

# The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog Effective Dates

This Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog is in effect for the current academic year. Any changes that may occur throughout the academic year will be reflected in the Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog on the Bellin College website until it is superseded by a new Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog.

# Abbreviations

References to Bellin College may be listed as BC or the College throughout this document. In addition, abbreviations for Doctorate of Science in Physical Therapy (DScPT) and Fellows in Training (Fits) are included throughout the Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog.

# **Type of College**

Bellin College is an independent, accredited, coeducational institution, baccalaureate, and master's degree with pending approval for a doctorate degree.

# **Degrees Conferred**

- Doctorate of Science in Physical Therapy (DScPT)
- Certificate: Fellowship of Orthopaedic Manual Physical Therapy (OMPT)

# Accreditation

The College is accredited by the following agencies:

- The Higher Learning Commission (HLC) 30 North LaSalle Street, Suite 2400 Chicago, IL 60602-2504 Phone: (800) 621-7440 www.hlcommission.org
  - Bachelor of Science in Nursing
  - Master of Science in Nursing
  - Bachelor of Science in Radiologic Sciences
  - Bachelor of Science in Diagnostic Medical Sonography
  - Approved for Distance Education Courses and Programs

#### • Commission on Collegiate Nursing Education (CCNE)

655 K Street NW Suite 750 Washington, DC 20001 Phone: (202) 887-6791

ccneaccreditation.org

- Bachelor of Science in Nursing
- Master of Science in Nursing
- Joint Review Committee on Education in Radiologic Technology (JRCERT) 20 N. Wacker Drive, Suite 2850 Chicago, IL 60606-3182 Phone: (312) 704-5300 www.jrcert.org
  - o Bachelor of Science in Radiologic Sciences accreditation
- Wisconsin Board of Nursing, Wisconsin Department of Safety and Professional Services 1400 East Washington Avenue Madison, WI 53703 (608) 266-2112 <u>http://dsps.wi.gov</u>

## **Memberships**

- Administrators of Nursing Education of Wisconsin (ANEW)
- American Association of Colleges of Nursing (AACN)
- American Association of Collegiate Registrars and Admissions Officers (AACRAO)
- American Health Sciences Education Consortium (AHSEC)
- National Association of College Admissions Counselors
- National Association of College and University Business Officers
- National Association of Student Financial Aid Administrators
- National League for Nursing Accrediting Commission, Inc. (NLNAC)
- North Central Association of Colleges and Schools
- SARA (State Authorization Reciprocity Agreement) Distance Learning
- Wisconsin Association of Collegiate Registrars and Admission Officers (WACRAO)
- Wisconsin Association of Independent Colleges and Universities (WAICU)

# Affiliations

## Clinical/Practicum

Weekend intensives are held at vast array of physical therapy clinical sites throughout the country.

# **Our History**

Bellin College has a long, rich history and a distinguished reputation as an excellent educational institution. In 1909, the college began as a diploma school when it enrolled three students. The name was the Deaconess Sanitarium Training School for Nurses. Many changes occurred over time and though the commitment to providing an excellent education for healthcare providers continues. While the first students practiced in a small building that accommodated only 17 patients, the current students have many varied experiences in four large hospitals and more than 85 clinical agencies including nursing homes, home health, and a variety of community settings.

In 1925, the name of the hospital was changed from Deaconess to Bellin Memorial Training School in honor of its founder, Dr. Julius Bellin. In 1942, the School became known as Bellin Memorial Hospital School of Nursing. Over time, the school would take on many title changes, but Bellin would always be a component of the name. A new nurse's residence was built and annexed as the north wing of the hospital. More classrooms were added and clinical experiences were expanded. The first graduates of the Cadet Nurses Corp graduated in 1944. Accreditation by the State of Wisconsin occurred in the 1930's and by the National League for Nursing in 1953.

The school closed in 1953 for the purpose of building a new nurses' facility which opened as the Charlotte Fowler Residence in 1955. The building housed not only 80 students, but also included a skills laboratory, library, lounge, and classrooms. At the same time, the curriculum became less task-oriented with greater emphasis upon theory and scientific rationale. Students began attending the University of Wisconsin Extension at Green Bay for general education courses. In 1958, the first male student was admitted to the program and graduated in 1961. It would be another 12 years before another male student entered the nursing program.

In 1984, the school became a four-year BSN program and admitted its first baccalaureate students. After years of planning, a new curriculum was implemented that addressed the new trends in healthcare and education. The school's name changed to Bellin College of Nursing to better reflect the new independent status of the educational institution. While many students still took most of their general education courses at the University of Wisconsin-Green Bay, courses from other accredited institutions were accepted for transfer, making it easier for students from greater distances to enroll in the nursing program. The College relocated to a newer building in 1994 located at 725 S. Webster Avenue and the Charlotte Fowler Building was demolished. In 1997, the accelerated transfer option (21month nursing program was developed to stay with the trends in nursing education and in 2001, the sophomore transfer option was developed to allow students with prior general education credits to join the nursing program.

A comprehensive needs assessment in 2002 confirmed the need for a graduate nursing program in northeast Wisconsin. The Higher Learning Commission (HLC) conducted an accreditation review of the College in 2004 and granted permission for the College to begin offering a Master of Science degree in nursing with specialty tracks in administration and education. The first graduate students were admitted in August 2004. The Commission for Collegiate Nursing Education (CCNE) accredited the baccalaureate program in 2003. A CCNE visit was completed in 2008, with accreditation received for an additional 10 years. The nursing program is also approved by the Wisconsin State Board of Nursing. The first class of MSN graduates received their degrees in 2007. January of 2008 marked the first cohort of students entering the 15 Month option, where students complete all of their general education courses and receive their nursing degree in 15 months.

With the growth and changing needs of higher education, the college broke ground in 2008 for a standalone campus located at 3201 Eaton Road, Green Bay, WI. The Higher Learning Commission granted the college approval to offer a Bachelor of Science in Radiologic Sciences (BSRS) and the ability to offer general education courses on campus. The college moved to its new location in 2009 and the name officially changed to Bellin College to signify degrees beyond nursing. In 2009, the college also celebrated its 100<sup>th</sup> year anniversary.

The Radiologic Sciences program had a long-standing history at Bellin Hospital. The Bellin School of Radiologic Technology was inaugurated in 1957, founded by Dr. Lyle Edelblute to alleviate the critical

technologist shortage that existed in the field of x-ray technology. Two students were admitted to the class in 1957. The program was a two-year certificate. The bachelor's program offered a 4-year program of study that provided graduates with additional knowledge and skill in leadership plus 2 of 3 specialties: CAT scan, MRI, and/or Women's Imaging which included mammography and DEXA (bone densitometry). The first class graduated in 2013.

In 2011, the Board of Trustees granted approval to begin offering a Family Nurse Practitioner option at the master level. The first class entered in 2013. In 2015, the first class of family nurse practitioner students graduated.

In 2014, in partnership with Bellin Health, to help meet their need to have an 80% BSN nursing staff by 2020, the college collaborated to create a RN to BSN program. The first class graduated in 2017 and now the program is open to the public. The curriculum is unique and supports the needs of the working RN. In 2014, additional unfinished space in the Health Sciences Resource Center (HSRC) was completed to enhance the Center to include simulation spaces for labor and delivery, the operating room, critical care, as well as primary care exam rooms to meet the changing needs of simulation and inter-professional education.

A demand for sonographers was noted and the college explored offering a bachelors of Science degree in Diagnostic Medical Sonography (BSDMS). The board approved this option and in 2016, the Higher Learning Commission granted permission for the college to start this program. It is a three-year program, with students attending year-round to earn their degree. The first class was admitted in fall of 2016. Additional space was completed in the HSRC area to accommodate a lab and two high end technology classrooms.

Growth continues for all programs as well as new initiatives. In 2016, the first nursing assistant program was offered to a local high school to support the needs for more opportunities for students with the healthcare field. The programs continue to be a popular option for high school students. Another method to attract and attain high school students for health professions in the Hands on Healthcare Initiative. This program is offered to high school students to spend a day at the college learning about the different options in healthcare. Students rotate through seven stations and gain knowledge through hands on experiences. In fall of 2017, this program was expanded by offering a mobile Hands on Healthcare unit via an ambulance, bringing this experience to students within their school.

In 2017, The Board of Trustees approved the exploration of offering a Doctor of Science in Physical Therapy. This program is being developed to help secure the educational faculty needed for physical therapy education.

Bellin College has provided educational programs for the region since 1909 and has a distinguished history in Northeast Wisconsin. The College has been responsive to the changing trends in education and healthcare as well as the needs of the community. Bellin College continues to grow and expand program offerings to meet the future needs of the communities it serves.

# Campus Information

# Bellin College Campus – Quick Reference

Bellin College administrative offices, classrooms, library, computer laboratory, Health Science Resource Center (skills and simulation labs) are located at 3201 Eaton Road, Green Bay, WI 54311.

#### First Level

- Academic Affairs
- Admissions
- BC Express Cafe' and Vending Area
- Business and Finance
- Classrooms
- Conference Rooms
- Dean of Allied Health Sciences
- Dean of Nursing
- Dean of Student Services
- Information Technology
- Academic Program Directors
- Reception Desk (Student Concierge and Security station)
- Reflection Room
- Student Activities Area/Student Lounge
- Student Mailboxes
- Student Services One Stop Shop (Departmental Assistant, Registrar, Bursar, Advisor and Career Services Coordinator, Director of Financial Aid, Information Technology and Student Services Coordinator)
- Vice President of Business and Finance

#### Second Level

- Board, Executive, Faculty Conference Rooms
- Computer Resource Room
- Development, Public Relations, and Alumni Offices
- College Assessment Program (CAP) Director
- Faculty, Adjunct Faculty Offices
- Library (including group study rooms/testing rooms)
- Presidential Suite
- Wellness Center

#### Lower Level

- Advance Practice/Procedure Room
- Birthing Suite
- CT/MRI Simulator Classroom
- Debriefing Room
- Diagnostic Medical Sonography Lab
- Four (4) Bed Simulation Labs
- Four (4) Exam Room
- Health Assessment Labs
- Health Science Resource Center Coordinators
- Health Sciences Resource Center Technology
   Specialist

- ICU/Pediatric/Emergency Suite
- Mammography Simulation Lab
- Medication Rooms
- Practice Lab
- Radiology Labs
- Simulation Control Rooms
- Skills Lab
- Staff Offices
- Student Lounge
- Surgical Suite
- Two (2) High Tech Classrooms

#### Parking

- Staff/Faculty Parking: Back of building
- Student Parking: Front or Back of building
- Visitor Parking: Front or Side of building

All students are responsible for transportation to and from the Bellin College campus, the general education campus, field trips, and clinical experiences. On campus parking is available free of charge. While attending clinical, students must adhere to the parking regulations specific to the clinical locations.

# **Student Access to Building**

- Students can enter and exit the College via the main entrance or back entrances.
- The College Main Entrance will be open to students and staff from 7:00 am 4:30 pm (M-F).
- Access with personal ID badge is required after 4:30 pm until closing at 8:00 pm (M-F).
- The College Main Entrance door is open to the public during regular business hours from 8:00 am 4:30 pm (M-F).
- Personal ID badge is always to be worn and is required to access back doors.
- Individual college department hours of operation are 8:00 am 4:30 pm (M-F). Students will not have access via ID swipe cards before or after regular business hours.
- Hours are subject to change, particularly during holiday and summer months.

Please see calendar for hours. <u>https://www.bellincollege.edu/campus-</u> life/calendar/action~month/exact\_date~1504242000/request\_format~html/

Card Access to Building	Hours of Operation
Monday-Friday	7:00 a.m. – 8:00 p.m. Students must leave building by
	8:00 p.m.
Saturday & Sunday	Hours Vary

# **Counseling and Support Services**

Professional, personal, financial, and academic counseling are available through the staff of Bellin College and the Employee Assistance Program (EAP) of Bellin Health System.

The EAP program is designed to help the individual with issues before it affects the person's health, family life, or performance level. There is no cost for initial assessment and short-term counseling. EAP can be contacted at: 920-433-7483.

#### **Bellin College Wellness Center**

The Bellin College Campus has a Wellness Center accessible to students and college employees. The use of the exercise equipment and facilities are available at designated times. Showers and lockers are available. There is no membership cost associated with the use of the Bellin College Wellness Center.

# **Bellin Health Fitness Center**

The Bellin Health Fitness Centers offer membership to Bellin students at a pro-rated cost. Students register and pay for their membership at any location. Membership includes free participation in group fitness classes. Specialty classes and group personal training programs are available at a pro-rated cost.

#### **Fitness Center Locations:**

- Fitness Center Ashwaubenon
- Fitness Center Bellevue
- Fitness Center Oconto (Bond Community Center)

# Smoke Free/Tobacco Free Campus

Bellin College is a smoke and tobacco free campus. All areas of the College are designated as non-smoking/non-tobacco areas. This policy is consistent with the Bellin Health System Mission and Vision to engage individuals in their lifelong journey towards optimal health.

# **Food Service**

Food service is available at the college campus. The "BC Express" is the café available that provides choices such as sandwiches, soups, salads, snacks etc. The hours of operation are posted at the College. Access to vending machines, microwaves, and refrigerators are always available.

# **Student Lounge**

A Student Lounge area is located adjacent to the atrium on the first floor of the College. Student mailboxes are located here, along with a conference room and lounge designated for student use. There are multiple locations throughout the building that also serve as areas to lounge, relax, and socialize. The Student Lounge is open during the hours that the campus is open for student use.

# **Emergency Student Contact**

#### Contacting students

Students should inform their families that calls of an urgent or emergency nature are to be directed to the Bellin College Student Services One Stop Shop Office at (920-433-6699). Office personnel will attempt to locate the student as soon as possible.

#### **Emergency contact numbers**

It is important that student emergency contact information remain up-to-date. Students can update the emergency contact information via the "My BC" portal.

## **Emergency Procedures**

Bellin College is equipped with emergency phones and call buttons. The emergency phones in the parking lots can be identified by their blue lights. The Colleges emergency phones access external 911 emergency services. There is also an emergency call button located in the campus Wellness Center. Pressing this button will access 911 emergency services immediately.

The College has a cardiac arrest mobile unit (AED or Automated External Defibrillator) located at the concierge desk in the Atrium.

During any type of drill all students and employees are expected to vacate the building. Students should familiarize themselves with the Bellin College campus emergency evacuation plans posted throughout the building.

Students are encouraged to monitor the College website, their student email, and personal cell phone for information in the event of a campus emergency has taken place.

# Individual(s) Needing Medical Assistance

Personnel on the Bellin College Campus must provide assistance to all persons experiencing a medical need on Bellin College premise.

The procedure to assist is as follows:

- 1. If an individual is unresponsive, call 911 first.
- 2. Notify security of all persons requiring medical assistance
  - a. Assess for pulse and breathing, perform basic life support (BLS) until EMS arrives.
  - b. Fill out Safety Zone report and Student Performance Notification.
- 3. Check the person for life-threatening conditions and give necessary care, by following these guidelines:

- a. Do no further harm.
- b. Monitor the person's breathing and consciousness.
- c. Help the person rest in the most comfortable position.
- d. Keep the person from getting chilled or overheated.
- e. Reassure the person.
- f. Give any specific care as needed.
  - 1. Basic first aid kits are available on each floor
    - I. Lower Level: Room L-12 Nurses desk
    - 2. First floor: Concierge Desk
    - 3. Second floor: Cabinet in back of Computer Lab
  - 2. Automatic Electronic Defibrillator (AED) is located on the first floor at the Concierge Desk
- g. Determine if there is a RN, NP, MD, DO, or PA available that can by licensure assess the individual and assist person as appropriate.
- h. If the individual requires additional medical evaluation/intervention beyond basic first aid, recommend the individual obtain further medical evaluation.
  - I. If the individual refuses, complete documentation in Safety Zone noting refusal offurther medical care.
  - ii. If the individual agrees to further medical evaluation, assist in arranging transportation to medical facility. Complete documentation in Safety Zone.
- 1. Security will notify administration, College President, and the Leader of Security as to the incident.
- 4. Security will:
  - a. Assess the scene, contact needed community resources as needed, escortany further resources to the scene or delegate to another individual as needed.
  - b. Notify administration as appropriate to the incident.

# **Campus Safety and Security**

Providing a safe learning environment is important and Bellin College is committed to the safety and security of all students, faculty, staff, and visitors. Campus safety and security is a shared responsibility between the College and its campus community members.

Security is provided during regular hours of operation that the students have access. During the school year, security personnel patrol the campus after regular business hours, and will have a primary desk area in the main floor atrium. The campus is defined as the College building, grounds, and parking lots. During regular business hours safety concerns and/or suspicious activity should be reported to the Bellin Security Officer onsite 920-433-4301 or the Student Services One Stop Shop Office by calling 920-433-6699.

When contacting Security or Student Services One Stop Shop, students should be prepared to provide the following information:

- Full name
- Location of the incident being reported
- A description of the scene and suspects
- A description of any vehicles involved in the incident, especially a license plate number

Suspicion is the only reason needed for contacting security. Please do not assume that someone else has reported criminal activity.

If a student witness's suspicious activity, suspects that a crime is being committed or has been committed, or any other emergency on campus whether the individual is the victim, a witness, or person information was shared with, please contact Student Services - One Stop Shop or security immediately.

Bellin College is required to publish campus crime and security information on a yearly basis. The 2016-2017 Security Report showed zero arrests, violations, or criminal incidents on campus.

The College campus is also a weapon-free environment. No weapons are allowed in any of the College buildings.

For more information visit https://www.bellincollege.edu/campus-life/safety-and-security .

# **Inclement Weather/Class Cancellations**

A declaration of inclement weather is a time identified by appropriate local/regional authorities in which warnings are posted and made available to the public advising of non-essential travel restrictions due to weather conditions.

Should the hours of College operation be altered (cancellation of weekend intensive classes, labs, and/or clinicals) details will be communicated via the College's School Messenger, website, student email notifications, and/or local radio and television stations. Students are encouraged to monitor the College website as well as their student email and personal cell phone for messages in the event of inclement weather or that a campus emergency has taken place.

#### Website:

Check www.bellincollege.edu for cancellations.

# College and Academic Resources

#### Library Resources/Photocopying and Printing

The Phil and Betsy Hendrickson Library is located on the second floor of Bellin College and offers a variety of electronic and print resources covering health-related subjects. During orientation new students are provided information regarding library policies and procedures, resources, and literature searching.

#### Hours

The library is open in alignment with college hours located on the college website.

#### Phone:

(920) 433-6659 Email: library@bellincollege.edu

#### **Research Assistance**

Library staff is available to assist with locating information, using electronic and print resources, and operating library equipment. Research assistance is also available via the phone, email, and by appointment.

#### **Electronic Resources**

The library provides access to a variety of electronic resources including databases, books, full text articles, videos, and point-of-care resources. These resources along with the library catalogs and instruction guides are accessible by clicking the **Library** link located either under Quick Links on the Bellin College web site <u>or</u> in Learning Management System on any course page.

#### **Course Reserves**

Faculty may place required readings on reserve. These readings may be available electronically or in print format. Electronic reserves are accessible via the Learning Management System. Print reserves are available at the circulation desk and may not leave the library or computer resource center.

#### **Computers/Laptops**

Students may use the computers located in the library and the computer resource center when it is not reserved for testing. The library has four (4) laptops that may be checked out at the circulation desk for inlibrary use only.

## Writing Resources – APA Style

The American Psychological Association style (APA) is the common method of documentation. The APA style provides basic guidelines about preparing papers for submission. APA style also uses parenthetical citation within the text to identify source material and uses a reference list at the end of the work to give detailed information about sources cited in the paper.

The APA Publication Manual is the required text utilized by Bellin College. The current edition of this Manual is available in designated College resource areas and the Library. Refer to the applicable Textbook and Supply Lists or appropriate course syllabus for resources required which may include the APA Manual.

The APA Manual provides examples of citations of references and answers to frequently asked questions. Students are to submit papers using APA style. Paper submission format (electronic, hard copy, single-sided, double sided) will be at the discretion of the course faculty. Information pertaining to such requirements will be communicated to students verbally at the start of each semester and will also be published in paper/project guidelines and/or the course syllabi.

Students are encouraged to consult with the faculty for clarifications or seek assistance from the writing mentor.

# Information Technology – Student Technology Requirements

Microsoft Office 2013 along with Microsoft Office 365 are the current versions of Office used by Bellin College. All submitted documentation for courses must be submitted in a Microsoft Office format.

Microsoft Office is available to download and install for all students for the duration of their enrollment at Bellin College. Once that enrollment has ended, the student will lose access to the software, and need to either uninstall Microsoft Office, or purchase their own license.

# Information Technology – Acceptable Use Policy

#### Introduction

The College provides technology resources for the primary purpose of supporting the academic, administrative, business, and communications needs of the College. All users of technology resources must exercise responsible, ethical behavior when using these resources and are expected to abide by College policies and local, state, and federal laws regarding their use. This policy defines the acceptable use of these technology resources.

"Technology Resources" refers to all computers, servers, switches, firewalls, software, wiring, network components, devices, and services managed, whether owned or leased, by the College.

#### Scope

This policy applies to all users of Bellin College technology resources. A "user" is defined as any individual who logs into, uses, or attempts to log into or use, a College system; or any individual who connects to, or attempts to connect to or traverse, the College network, whether by hardware or software or both, whether on campus or from a remote location.

#### Policy

Access to Bellin College technology resources is a privilege granted to guests, contractors, faculty, staff, and students. This privilege is predicated on the user's acceptance of and adherence to all College Information Technology and Services policies. The College reserves the right to limit, restrict, or extend access to technology resources. Access to technology resources will be documented on the Network

Access Request Form for all guests, contractors, faculty, staff and work study students. Please note: This form is not required for students except for work study students requiring access to an administrative system. The Bellin College technology resources are a private system. As such, the information stored on its computers and servers are the property of the College with the exception of material expressly developed by users for publication. Copyright and ownership of such content must be expressly and clearly stated in such works. Individuals who place content owned by others on College systems under their use accept full responsibility for maintaining compliance with copyright laws. The use of technology resources for personal purposes is allowed as long as the following occurs:

- The use is minimal and of short duration.
- Use does not interfere with the user's duties and responsibilities or that of others.
- Personal use does not violate any College policies and local, state, or federal laws.
- Use does not interfere with the primary purposes of the system.
- The use does not adversely affect technology resources.

#### **User Responsibilities**

User responsibilities and expectations include but are not limited to:

- All student work is to be submitted using a Microsoft Office compatible format.
- Abide by applicable laws, College policies, contracts and licenses.
- Use only those technology resources and data for which you have authorization for and only in the manner and to the extent authorized.
- Respect the copyright and intellectual property rights of others, including the legal use of copyrighted material.
- Use technology resources only for their intended purpose.
- Protect the access and integrity of technology resources.
- Maintain privacy and security by keeping all passwords confidential.
- Respect the privacy and personal rights of others.
- Delete old and unused email and files on a regular basis.
- Maintain the accuracy of personal email distribution lists.
- Develop adequate proficiency in the tools and technologies appropriate to his/her needs.

#### Inappropriate Network Usage

The following uses, while not all inclusive, are considered inappropriate and unacceptable:

- Misuse, abuse or otherwise cause damage to technology resources.
- Employ the use of software or hardware designed to disrupt or circumvent the security of any technology resource.
- Engage in any activities designed to spy on network traffic or to access passwords, user IDs, files or programs of other users.
- Impersonate another network user.
- Access, or attempt to access, College business or another individual's data or information without proper authorization, even if not securely protected.
- Use College technology resources for non-College related activities beyond that of which the above policy states.
- Install or use any software or network hardware not approved by the Director of Technology
- Engage in software piracy or copyright infringement. Please note: All software installed on College computers must be used in conformance with the license granted by the developer. Unlicensed products will be removed immediately from College computers.
- Provide access to Bellin College technology resources to individuals, groups or businesses outside the College community, except as authorized in writing by the President, a Dean or Vice President, or the Director of Technology.
- Exchange proprietary information or any other privileged, confidential, or sensitive information without proper authorization.
- Participate in email chain letters, spamming, junk mail, email bombing attacks, or virus hoaxes
- Knowingly forward an email message or otherwise introduce a virus-infected file by other means into the College network.

- Send, store, print or solicit receipt of email messages, files or programs that contain fraudulent, harassing, racist or obscene language, visual, or audio material or content. The College reserves the right to determine the appropriateness of such material and content.
- Use the College technology resources for illegal behavior or activities as defined by federal, state and/or local laws.

#### **Enforcement Procedures**

The College retains the right, without restriction, to monitor, authorize, control, or stop the use of any technology resource found on its computers or networks. Violations of any College policy will be referred to the appropriate Administrator for action through the established disciplinary processes of the College. The results of such referral may include but is not limited to:

- Files and/or programs may be deleted.
- User accounts may be disabled.
- User access privileges may be withdrawn.
- Users may be suspended, expelled or terminated from College employment.

#### Administrative Systems

The privacy of student record information and the rights and responsibilities of handling the information is federally governed by the Family Educational Rights and Privacy Act of 1974 (FERPA). All employees of Bellin College are required to abide by FERPA regulations and College policies regarding access to and use of College student, alumni development, or financial information.

# Information Technology – Electronic Mail Policy

#### Introduction

Electronic Mail (email) is a tool provided by Bellin College to complement traditional methods of communications and to improve academic and administrative efficiency. Users have the responsibility to use this resource in an efficient, effective, ethical, and lawful manner. Use of the College email system implies consent to all College IT policies and practices. Violations of the policy may result in restriction of access to the College email system and/or other appropriate disciplinary action. The purpose of this policy is to ensure the proper use of the College's email system by its students.

# Students who graduate will have their Bellin College email account transitioned to an alumni email account two weeks after graduation. Instructions will be sent prior to the transition.

#### Scope

This policy applies to all users of Bellin College technology resources. A "user" is defined as any individual who logs into, uses, or attempts to log into or use, a College system; or any individual who connects to, or attempts to connect to or traverse, the College network, whether by hardware or software or both, whether on campus or from a remote location.

#### Policy

The Bellin College Microsoft Exchange email system is the only recognized email system used to communicate between faculty, staff and students. This is necessary to ensure the delivery and receipt of official communications. Email messages regarding College matters sent from an administrative office, faculty, or staff member to students is considered to be an official notice and should be treated as such by the student.

#### Acceptable Use

Reference the Acceptable Use Policy for guidance on acceptable use, inappropriate use, and user responsibilities. Users must exercise caution when forwarding messages, either internally or externally. Sensitive information such as social security numbers, addresses, age, gender, etc. must not be forwarded to any party outside of the College without the prior knowledge or approval of that particular individual.

#### **User Responsibility**

Users are expected to read email on a regular basis and manage their accounts appropriately.

Sharing of passwords is strictly prohibited. Each user is responsible for his/her account, including the safeguarding access to the account. All email originating from an account is deemed to be authored by the account owner and it is the responsibility of that owner to ensure compliance with these guidelines.

#### Privacy

Bellin College will make every attempt to keep email messages secure; however, privacy is not guaranteed and users should have no general expectation of privacy in email messages sent through the College system. Users must be aware that email can, depending on the technology, be forwarded, intercepted, printed, and stored by others. Email that is not encrypted can be viewed by people other than the intended recipient, while it is in transit or on mail servers. Because messages can be stored in backup systems, email actually may be retrievable when a traditional paper letter would have been discarded or destroyed.

#### **System Monitoring**

Bellin College collects statistical data about its email systems consistent with generally-accepted business practices. The College monitors the use of email to ensure the ongoing availability, reliability, and security of the system. The College may employ, at any time, tools to analyze statistical information to detect unauthorized usage, denial of service attacks, capacity planning, and network problems. Under certain circumstances, it may be necessary for the IT staff or other appropriate College officials to access email files to maintain the system, to investigate security or abuse incidents, or violations of this or other College policies. Such access will be on an as-needed basis and any email accessed will only be disclosed to those individuals with a need-to-know or as required by law.

#### **Mailbox Size Limits**

The College has the right to restrict the amount of user space on the email server as necessary and to revise the size restrictions as necessary with appropriate. Mailbox quotas are set at 2GB for all users.

#### **Records Retention**

Individuals are responsible for saving email messages as they deem appropriate. Messages are automatically purged from folders in order to save storage space. Automatic purge amounts are as follows:

- Sent 365 days
- Deleted Items 90 days
- Junk 30 days

Inbox items are not automatically deleted. Individual users are responsible for deleting unneeded email in order to stay within their mailbox quota.

#### **Email Size Limits**

A 100 megabyte size restriction for all email is enforced whether being sent or received. This is necessary to preserve network bandwidth and mailbox storage resources.

#### **Email Signature**

Email signatures indicating name, job title, address, contact info, and other particulars are strongly recommended for all email messages whether sent to internal or external receivers.

#### Data Backup

The email system is backed up on a nightly basis and stored for 30 days.

#### **Supported Mail Clients**

Microsoft Outlook and Outlook Web Access (through Internet Explorer) are the officially supported methods for accessing email. Use of an alternate method, such as the Outlook Express or OWA via Chrome or other Internet browser is not supported by the College.

#### SPAM and Virus Protection

Bellin College employs the following products to prevent spam and virus-infected email from user inboxes:

- **Barracuda SPAM and Virus Firewall** used to block known SPAM sources by domain or address and also scan incoming messages to identify and quarantine virus-infected messages. A spam quarantine summary is sent to all users receiving spam on a daily basis. Users can whitelist, deliver, and delete legitimate emails from their summary.
- **AVG virus protection software** installed on Microsoft Exchange server to prevent the introduction of viruses on the email system. Users should use proper care and actions to prevent the spread of viruses. Virus-infected email often appears to be sent from a friend or coworker and will contain an attachment. This attachment is the virus carrier and, by opening the attachment, the virus code is executed. Attachments should be opened only when you are sure of the sender and message.

IT Services will make every effort to prevent these types of messages from entering our system. Contact the Helpdesk if any doubts exist; <u>helpdesk@bellincollege.edu</u>; 920-433-6666.

## Information Technology – Online Verification

When a student initially enroll in Bellin College, they will participate in an orientation that includes an informational technology orientation.

All coursework submitted (be it online, in person, or by mail) must be an original representation of the student's work. The student who registers for Bellin College courses must be the same person who participates in, completes, and receives the academic credit. Any violation will be subject to the College Academic Misconduct policies.

# Student Services and College Policies

# Accommodations Request for Students with Disabilities

Bellin College is in compliance with the Americans with Disabilities Act (ADA) to provide all students with the appropriate, necessary, reasonable, and affordable accommodations for those with documented disabilities. If a student anticipates requiring any auxiliary aids or services, he/she should contact the Advisor and Career Services Coordinator who acts as the College's Accommodations Specialist, prior to the beginning of each academic year to discuss their needs and what documentation is required. Prior accommodations will be re-evaluated before the beginning of each academic year to determine if alterations are needed.

Accommodations are determined as a result of self-disclosure by the student of their disability. This is completed in confidentiality to the Accommodations Specialist. This is followed up with a comprehensive individualized assessment and review of the required documentation from a licensed medical professional. The following are the written documentation requirements:

- Current diagnosis (testing must be within three years).
- Submitted by a licensed clinician qualified to make the diagnosis in the area of specialization.
- Clearly stated diagnosis.
- Names and scores of psychological and psycho-educational instruments used in arriving at the diagnosis.
- How the diagnosis impacts the students functioning.
- Recommendations for accommodations.
- Any related supporting medical or academic documentation.

# **Change of Demographic Information**

It is an important student responsibility to maintain up-to-date and accurate demographic information. Changes can be submitted electronically via the student information system. The following demographic changes should be reported as soon as changes occur to the One Stop Shop in Student Services.

- Change of address (local and/or permanent).
- Change in phone number.
- Name change (requires official documentation to be submitted to the Student Services One Stop Shop).
- Emergency contact.

# Graduation

Graduation dates are established as the last day of the semester session or the date of Commencement.

An Intent to Graduate Form must be completed by all graduate students prior to graduation. Upon receipt of the form, the Registrar's office performs a degree audit to verify that all requirements for graduation have been met. The due date will be communicated, but students must submit this form in the semester prior to their last semester of study. Forms can also be obtained via the website.

# **College Logo**

Bellin College logo are the property of Bellin College. Anyone wishing to use these logos must obtain written permission from the Marketing Director in the Development and Public Relations Office.

The logo may not be altered or embellished. With permission, the words "Bellin College" or "BC" may be used in place of a logo. This policy applies to all items that may be offered for sale through Bellin College student organizations. Items to be sold by student groups with reference to the Bellin College name or logo must have prior approval from the Marketing Director.

**Note:** Logos are available in multiple file formats as well as single color versions. Please contact the Development and Public Relations department for more information.

Primary Bellin College Logo



# **Social Networks Advisement**

Facebook, Twitter, and other social networking websites are great innovations which enable users to express themselves and create opportunities to form or maintain friendships over a distance. Due to the nature of this forum, it allows users to make choices about disclosure of their identity and how they represent themselves to the public at large. Students are reminded that pictures and information posted on the internet via programs such as Facebook and Twitter are public information, and permission must be granted for use of the Bellin College logos in any self-initiated communication on any social sites.

Pictures and/or information from these sources that describe/document behavior, that is brought to the attention of the College and which reasonably suggest that behavior violating College policy or code of conduct has taken place on campus or at a College sponsored function off-campus, is subject to further investigation and verification by the College. **Students are reminded of the importance of upholding the standards of confidentiality as they progress through community, lab/simulation, patient, and clinical experiences**. Any College policy violations that are documented as a result of such an investigation will result in appropriate disciplinary action by the College.

# Title IX

Title IX of the Education Amendments of 1972 Implementing Regulations at: 20 U.S.C. §1681 & 34 C.F. R. Part 106, is a Federal civil rights law that prohibits discrimination on the basis of sex in educational programs and activities. Sex discrimination encompasses all forms of sexual violence and sexual harassment by employees, students, or third parties against students, employees, or third parties. For more information, <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/title-ix/</u>

# Sexual Violence, Harassment, and Discrimination

Bellin College's policies and procedures are intended to afford a prompt response to reports of misconduct, to maintain confidentiality and fairness consistent with applicable legal requirements, and to impose appropriate sanctions on violators of College policy. Bellin College promptly and thoroughly investigates and resolves complaints alleging sexual violence, discrimination, and/or harassment.

Bellin College believes that each individual should be treated with respect and dignity and that any form of sexual violence, harassment and/or discrimination is a violation of human dignity. The College condemns sexual violence, harassment and discrimination and maintains a "zero-tolerance" for sexual violence, harassment and/or discrimination. Students, faculty, and staff have the right to work and learn free of sexual violence, harassment and discrimination. The College will take all reasonable efforts to prevent and promptly correct instances of sexual violence, harassment or discrimination. Additionally, students, faculty, and staff have the right to a structured process for resolving problems, complaints, or grievances relating to the execution of institutional policies. For more information visit <a href="https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/">https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/</a>.

# **Complaint Process Policy**

Bellin College seeks to resolve all student concerns in a timely and effective manner. To that end, this complaint process serves as an ongoing means for students to discuss concerns or register formal complaints that pertain to alleged violations of State consumer protection laws that include but are not limited to fraud and false advertising; alleged violations of State laws or rules relating to the licensure of postsecondary institutions; and complaints relating to the quality of education or other State or accreditation requirements. Academic Affairs, Student Services, Admissions, Bursar, Registrar, and Financial Aid all provide specific administrative means to address and resolve most, if not all of the questions and concerns you may have. For more information on the complaint process, student grievance procedure, and appropriate forms visit <a href="https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/">https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/</a>.

# **Non-Discrimination Policy**

It is the policy of Bellin College to be nondiscriminatory because of race, color, creed, national and ethnic origin, religion, age, gender, gender identity, sexual orientation, marital status, or disability in the admission of students, in student programs, and in the employment of College faculty and staff.

In conformance with applicable federal and state regulations, Bellin College is committed to nondiscrimination, equal opportunity, and affirmative action in its educational programs and employment policies. Inquiries concerning this policy may be directed to the Dean of Student Services. For more information visit <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures</u>

# **Anti-Harassment Policy**

Bellin College does not tolerate or condone any form of harassment including sexual harassment and non-sexual harassment. Harassment is defined as unwelcome, gender-based verbal or physical conduct which is sufficiently serious that it unreasonably interferes with, limits or deprives someone of the ability to participate in or benefit from the institution's educational program. The unwelcome behavior may be based on power differentials, the creation of a hostile environment, or retaliation.

The Bellin College environment should be one of positivity, civility and collaboration. Bullying/harassment in any of its forms can have a negative impact on the College environment. College administration, faculty and staff are to treat students and co-workers respectfully in every interaction.

Harassment can also come in various forms of bullying. Anti-bullying provision defines bullying as:

- Verbal, mental and/or physical abuse.
- Threatening, humiliating, or intimidating conduct towards another person.
- Sabotage or interference that prevents completion or performance of one's academic or work responsibilities.
- Exploitation of a known psychological or physical vulnerability.
- Belittlement of others.
- Asserting superiority over others.
- Excluding others.
- Making condescending remarks to others.

These behaviors may decrease work output, decrease motivation, decrease satisfaction, damage organizational culture, and increase turn-over or attrition. Students of the College who believe they are or have been the object of such conduct outlined above should contact the Dean of Student Services or another member of the College's administration.

Depending upon the severity, discipline for sexual and other forms of harassment may include verbal or written reprimand, law enforcement involvement, and/or up to and including dismissal from the College, depending upon the severity of the harassment.

Deliberately making a false report about bullying/harassment for the purpose of getting another individual reprimanded will not be tolerated. Deliberately making false reports may result in disciplinary action. For more information visit <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/</u>.

# Retaliation

The College prohibits any form of retaliation against a complainant. Any allegations of retaliation will result in an immediate investigation and appropriate action consistent with the College's due process procedures.

# **Student Behavior**

Students are expected to follow Bellin College rules and conduct themselves in a manner compatible with its values. Violations of College rules, including violations of the American Physical Therapy Association Code of Ethics, will be handled administratively and may result in disciplinary action such as monitoring, probation or dismissal.

Any student who shows behavior which is undesirable or has a detrimental influence on other students, clients, and/or the values of the College which violate College policies will be disciplined based upon the severity of the offense.

The student has an obligation to conduct herself/himself in a manner compatible with the College's values. Therefore, the student has the following responsibilities:

#### **Responsibilities Related to Persons**

Students shall:

- Never act in a manner that would pose a threat to the health (physical and/or mental) or safety of a member or members of the College community.
- Never conducts self in a disorderly, lewd, indecent, or obscene manner on College controlled property or at College sponsored or supervised functions.

- Always conducts self appropriately to reflect a professional healthcare provider. When engaging in College activities, students should project a professional image in both their attire and demeanor.
- A consensual dating or sexual relationship between any College employee and a student is deemed unprofessional and is therefore prohibited, unless the two persons are married. A violation of this policy may result in disciplinary action including dismissal for unprofessional conduct.

#### **Responsibilities Related to Classroom/Coursework**

All coursework submitted must be an original representation of the student's work. Plagiarism, unauthorized collaboration, and/or submission of another person's work are not permitted.

• The student who registers for Bellin College courses must be the same person who participates in and completes and receives the academic credit.

## **Responsibilities Related to Property**

Students shall:

- Never forge, alter, or misuse College documents, records and/or other College or hospital/healthcare agency records.
- Never steal or damage property belonging to the College, the hospitals, community, or an individual.
- Only use College or practicum facilities as authorized and appropriate.

## **Responsibilities Related to Operation of the College**

Students shall:

- Be honest in all activities relating to the education program.
- Never obstruct or disrupt teaching activities, administrative functions, or other College or practicum activities.
- Always uphold the rules, regulations and College policies.
- Always comply with the directions of College personnel acting in the performance of their responsibilities.
- Always uphold rules of any college or university or any medical, hospital or community facility associated with the College.

# Responsibilities Related to Welfare, Health and Safety

Students shall:

- Never use, possess, or distribute narcotics, hallucinogens, mind or body altering drugs, controlled substances, or dangerous drugs except as expressly permitted by law.
- Never consume, possess, distribute, or be under the influence of alcoholic beverages in violation of Wisconsin State Law or College policy.
- Never misuse fire and fire emergency equipment such as alarms, emergency phones or call buttons, fire extinguishers, hoses, etc.
- Never possess or use firearms, explosives, dangerous weapons, or other articles/substances
  potentially injurious to persons or property while on Bellin College, Bellin Health or clinical site
  property.
- Never smoke or use tobacco on Bellin College property, and adhere to such policies of clinical agencies.

Students not in compliance with these responsibilities are subject to disciplinary action including: monitoring, probation, or dismissal. An immediate suspension may result when the student's behavior threatens the health or safety of others. This suspension will be in effect until the incident has been investigated by the President's Cabinet and results in the student's return to good standing, probation or dismissal.

# **Student Bill of Rights**

Students have a right to engage in a sustained and independent search for truth, utilizing good judgment.

- Because freedom to teach and the freedom to learn are inseparable facets of academic freedom, students should exercise their right to learn and to teach in a responsible manner.
- Students have a right to be admitted to a particular institution regardless of their race, color, religion, national and ethnic origin, creed, age, gender, marital status, sexual orientation or physical disability.
- Students are free to take reasoned exception to the data or views offered in any course of study, reserving judgment about matters of opinion.
- Students have a right to protection through orderly procedures against prejudiced or capricious academic evaluation.
- Students have the assurance that information about their views, beliefs, and political associations which instructors acquire in the course of their work is considered confidential and is not released without their knowledge or consent and should not be used as a basis of evaluation.
- Students have a right to a responsible voice in the determination of the curriculum.
- Students have a right to examine their permanent education records and be aware of the conditions governing its disclosure, according to the established school policy.
- Students and student organizations are free to examine and discuss all questions of interest to them, and to express opinions publicly and privately.
- Students have a right to invite and hear any person of their own choosing within the College's acceptable realm.
- The student body has a right to participate in the formulation and application of institutional policy affecting academic and student affairs.
- Students have a right to be informed of standards of behavior guidelines set by the institution which it considers essential to its educational mission and its community life.
- Students have the right to belong or refuse to belong to any organization of their choice.
- Students have a right to a voice in the establishment of the dress code.
- Students have a right to periodically review grading systems with faculty for clarification and better student-faculty understanding.
- Students have a right to provide input into the evaluations of courses and faculty.
- Students have the right to participate in an educational environment at Bellin College free of harassment or intimidation.

# **Dress Code Policy for Students**

The purpose of this policy is to provide direction for appropriate appearance/professional image in the lab setting.

# Lab Activities

It is the general understanding that clothes worn on campus are appropriate to wear in a classroom setting and are not provocative in nature.

#### **General Lab Guidelines**

Clinical agency policies take precedence. Where there is no policy, the following dress code is to be followed:

Hair, Nails, and Make-Up:

- Hair length and style should not interfere with performance of the required activities.
- Hair should be neatly styled, clean and drawn back from the face.
- Hair should not be extreme in color or style.
- Beards, sideburns, and mustaches must be neatly trimmed.
- Any make-up should be conservative in color and style and natural-looking.
- Artificial nails are not allowed to be worn.
- Natural nails should be well-maintained, clean and short; not to exceed 1/4 inch past the fingertip.
- Clear, fresh, non-chipped nail polish is allowed.

Jewelry, Body Piercings, Tattoos:

- Acceptable jewelry is a smooth wedding band (minimal or no stones), conservative earrings, and a conservative, plain wristwatch (no ornamental stones).
- Unacceptable jewelry includes: dangling earrings, fashion rings, necklaces, and bracelets.
- In an effort to promote safety and facilitate effective communication, students are not allowed to wear body-piercing jewelry or other apparatus on the tongue or any visible body part.
- All visible tattoos must be covered.

General Considerations:

- Students are expected to practice good hygiene.
- No scents should be worn as many patients are sensitive to various odors.
- No gum is allowed in patient care areas.
- All attire worn in clinical agencies must be professional.
- Hats/caps are not to be worn in any clinical setting or in an exam situation.
- Religious headwear is exempt.

#### **Consequences and Exceptions**

Students who fail to comply with the dress code policy may be subject to disciplinary action including dismissal from the lab site and the potential for an unsatisfactory evaluation.

## **Alcohol and Drug Policy**

The purpose of this policy is to provide an alcohol and drug-free environment for faculty, students, administration and support staff at Bellin College in order that the College may carry out its mission and comply with the Drug-Free Workplace Act of 1988.

The College does not oversee the personal lives of College community members on or off campus. However, everyone is expected to be responsible for his/her own conduct and abide by all state laws and follow College policies and guidelines. The unlawful manufacture, distribution, dispensing, possession, use or being under the influence of a controlled substance or alcohol is prohibited within the Bellin College building, on the campus grounds or in other settings in which the faculty, staff, or students may be carrying on the business of the College. Any exceptions to the College policy of not serving alcoholic beverages at College-sponsored events must be approved through the President's Office. Consumption of alcohol at such events must be in moderation.

For more information visit <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/alcohol-and-drug-policy</u>

#### Leave of Absence

A student may apply for a Leave of Absence from Bellin College. An approved leave entitles the student to waive the re-admission process.

Requests for Leave of Absence must be approved prior to departure on leave, with the exception of bereavement and certain personal necessity leaves. Supporting documentation must accompany the request for leave (i.e., military orders, medical documentation, jury duty notification, etc.) Leave of Absences are not allowed for students to attend another academic institution.

Students should contact the Bellin College Academic Office when requesting to return from a leave of absence. Students must provide supporting documentation will differ for each situation (i.e., medical release from a licensed healthcare professional, etc.), before permission to return from a leave of absence is granted. The official return date and course program of study will be discussed prior to the return date.

# Family Educational Rights and Privacy Act (FERPA)

Bellin College complies with the Family Education Rights and Privacy Act (FERPA). Once enrolled, all students have a right to inspect and review most of their educational records maintained about them by Bellin College under FERPA of 1974 (as amended). Under most circumstances, no personally identifiable data, (non-directory) will be released to a third party without the written consent of the student. Students may challenge information in their records which they believe to be inaccurate, misleading, or inappropriate, and request a revision.

The College implements all provisions of FERPA as amended. For purposes of general records accountability, a file system has been established for all student records under the control and supervision of the Registrar of Bellin College. Exceptions for record release under FERPA include the following:

- Release of directory information. (Please see below for what is considered directory information.)
- Instances when state or federal agencies request information essential to fulfill legal requirements for accreditation.
- Requests from agencies or organizations from which students have received financial aid.
- Requests in accordance with a lawful subpoena or court order.
- Requests from College officials with legitimate educational interests if the need to review an education record is in order to fulfill her/his professional responsibility. (Please see below for the definition of a College official.)

A College official is defined as a person employed by the College in an administrative, supervisory, academic, research, or support staff position (including law enforcement unit personnel and health staff); a person or company with whom the College has contracted (such as an attorney, auditor, or collection agent); a person serving on the Board of Trustees; or a student serving on an official committee, such as a disciplinary or grievance committee, or assisting another College official in performing his or her tasks. Bellin College has defined the following as directory information:

- Name
- Address
- Email Address
- Cell phone number
- Date of Birth
- Confidential recommendations to which the student has in her/his records prior to January 1, 1975
- Dates of attendance, year in college, and enrollment status.
- Academic honors
- Previous institutions attended
- Participation in officially recognized activities
- Photograph

**Please Note:** Students wishing to keep confidential some or all of the "directory information" must complete a form available in the Student Services - One Stop Shop Office. Students must be aware that placing a FERPA "Hold" on all records includes limiting the College's ability to provide reference requests. Within our student information system, students are able to select the transparency of the specific information visible to other students.

Students can request access to records files, documents, and other materials directly related to them which are maintained by the College by appointment with the Registrar or the Dean of Student Services. Students may not have access to:

- Personal information of College employees
- Employment records
- Medical, psychiatric, or similar records used solely for treatment purposes and available only to recognized professionals in connection with such treatment, although students would be able to have such records inspected by a doctor or appropriate professional of their choice.

- Financial records of their parents used for financial aid purposes.
- Confidential letters and statements of recommendations placed in their records prior to January 1, 1975 and/or confidential recommendations to which the student has given prior written waiver of access and which are used for job placement, admissions, or award purposes.
- Records accumulated prior to enrollment (admission records).

#### Student and Exchange Visitor Information System

FERPA permits institutions to comply with information requests from the Department of Homeland Security (DHS) and its Immigration and Customs Enforcement Bureau (ICE) in order to comply with the requirements of Student and Exchange Visitor Information System (SEVIS).

# Family Educational Rights and Privacy Act- Procedure for Review of Records

Students wishing to review their files will need to follow the procedures below:

- Submit a written request to the Registrar identifying the records they wish to inspect. Although FERPA allows the College to act on the request within 45 days of the day they receive a request for access, Bellin College will usually be able to make arrangements for access within 10 business days. The Registrar will notify the student of the time and place where the records may be inspected.
- Allow a College official (Registrar or Dean of Student Services) to be present when the record is reviewed.
- Sign a required waiver of responsibility of the College for further confidentiality if copies of any information are made and given to the student.

Students have the right to seek deletion or modification of information contained in their education records that they believe is inaccurate or misleading. Academic or clinical grades given in individual units and/or courses are an exception. Students should write the College official responsible for the record. In the communication, clearly identify the part of the record they want changed and specify why it is inaccurate or misleading. If the College decides not to amend the record as requested by the student, the College will notify the student of the decision and advise the student of his or her right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing.

The student has the right to file a complaint with the U.S. Department of Education concerning alleged failure by Bellin College to comply with the requirements of FERPA. The name and address of the office that administers FERPA is:

Family Policy Compliance Office U.S. Department of Education 600 Independence Avenue, SW Washington, DC 20202-4605

For more information visit <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/ferpa/</u>

# Student Health and Safety Policies

#### Fitness for Class, Lab, and Clinical

All students are to report to class, lab, and clinical free of impairment from the use of alcohol and/or drugs, and are thereby judged as fit for class, lab, and clinical. The following procedural steps will be followed when there is reasonable suspicion of impairment:

 When a student/faculty member/College staff suspects that a student may be unfit for class/lab/clinical, she/he should report their observations to the person supervising the student. Observed behaviors must be documented by supervising person and witnesses prior to leaving class/lab/clinical that day.

- Any student suspected of not being fit for duty, based on personal observation of appearance, behavior, speech, or breath odor will be requested to undergo a drug and alcohol test by their faculty member or appropriate Administrative member of the College at the time of the observed behavior.
- The student will be removed from class, lab, or clinical with assistance from the faculty and/or Administrative member. Students will not be allowed to leave unescorted.
- A voluntary signature will be obtained on a consent and release form prior to any specimen collection. Refusal to sign the consent to release information form and/or to undergo a drug and alcohol test, when there is reasonable cause for testing, will result in presumed positive test results and an immediate suspension from class or clinical pending further disciplinary action. (Further disciplinary action may include possible dismissal from the College, independent and regardless of the results of any subsequent drug and alcohol test).
- Transportation home of the student involved in a reasonable cause circumstance, whether tested or not, will be arranged by the faculty member or appropriate Administrator to prevent the student from attempting to operate her/his own vehicle while under the possible influence of drugs and/or alcohol. These efforts may include contacting law enforcement officials if necessary.
- Any faculty member or other person who has reasonable cause to suspect that a student is under the influence of drugs and/or alcohol will submit a written statement of all observations made.
- When a student's drug/alcohol screening is positive and an Employee Assistance Program referral is made, the student's return to school will be based on the following:
  - 1. Evidence of ongoing compliance with the recommended treatment plan as outlined by the Employee Assistance Program
  - 2. Signed return to school contract, as coordinated by the Dean Of Student Services which may include additional drug and/or alcohol testing prior to return to class or clinical, as well as additional drug and/or alcohol tests, without notice, at anytime, within 24 months from the date.
  - 3. Successful completion of the Employee Assistance Program.

Please note: Positive test results for any of the above drug and/or alcohol testing, will render the student subject to discipline, up to and including dismissal from Bellin College.

Confidentiality and privacy rights of Bellin College students will be protected. Test results and/or the identities of any student participating in a rehabilitation program will not be revealed by Bellin College to anyone outside this policy without the express written consent of the student.

# **Injury Reporting**

If injured or underwent surgery, the student should inform her/his course faculty. The student must provide a report from their healthcare provider documenting any restrictions and/or any prescription medications. The appropriate Program Director will provide clearance to participate in coursework; including lab and clinical experiences.

A student who has been absent for a significant health problem (surgery or injury with crutches, brace, or cast) is required to submit a licensed healthcare provider's statement to the Academic Office indicating any restrictions and/or if the student is able to resume classroom, lab, and/or clinical activities.

All students must have current emergency contact information on the back of the student ID along with current contact information in the Student Services One Stop Shop Office.

# **Malpractice Insurance**

The College recommends that students evaluate the malpractice issue and obtain coverage if desired. All students should seek this coverage independently as it is typically required for participation in 1:1 mentoring in another clinician's clinic.

# ► Tuition and Fees – 2018-2019

# 2018-2019 Tuition

#### **Tuition Costs**

- Cost of per credit tuition is posted on the Bellin College website under Future Student or Current Student; Tuition and Fees.
- Students have access to their account information via the student information system and can also inquire at the Bursar's Office.
- Charges reflect the College program option and year within the program, and will vary depending on the curriculum schedule.
- Book costs are not included in the tuition and fees charges. See the website <u>Textbook and</u> <u>Supply List.</u>

#### **Fellowship Tuition**

• The 2018-19 tuition charge for graduate courses is \$280 per credit.

#### **DScPT** Tuition

• The 2018-19 tuition charge for graduate courses is \$800 per credit.

# **Out-of-State Tuition**

Bellin College does not discriminate between in or out-of-state students when determining tuition and fees costs.

#### **Veteran Applicants Tuition**

#### **Federal Veteran Benefits**

The Bursar is the Veterans Administration (VA) representative for Bellin College students. To receive veterans' educational benefits, student-veterans must be certified. Students eligible for federal programs such as the Montgomery GI Bill, Post 9/11 and other VA programs, must be certified by both the VA and the Bellin College Bursar's Office. All VA benefits are subject to the soldier's specific length of duty and the benefits of the program. Since the College is a private institution, they are subject to the tuition cap set by the Department of Defense for each program.

It is the applicant's/student's responsibility to understand their eligibility for federal and state veteran's benefits and adhere to program requirements. The number for individual educational inquiries is 1-888-422-4551 or 1-888-GI-BILL1. The website is <u>www.gibill.va.gov</u>.

Please refer to the <u>Department of Veterans Affairs</u> website for further clarification on eligibility for the following programs:

- Chap. 30 Montgomery GI Bill Active Duty (MGIB-AD) Servicepersons and Veterans)
- Chap. 31 Montgomery GI Bill More information at Vocational Rehabilitation Program
- Chap. 33 Post 9/11 GI Bill Individuals with at least 90 days of aggregate service on or after 9/11/2001
- Chap. 35 Montgomery GI Bill Survivors' and Dependents' Educational Assistance Program (DEA)
- Chap. 1606 Montgomery GI Bill Selected Reserve (MGIB-SR)
- Chap. 1607 Montgomery GI Bill Reserve Educational Assistance Program (REAP)
- VA Tutoring Program
- National Testing Fee Reimbursement

Additional Information:

- Visit <u>Federal Veteran's Benefits</u> for more information
- Contact your local County VA Representatives

It is extremely important that all veterans adhere to their specific chapter requirements so that tuition can be paid promptly along with any stipend or housing allowance.

A DD214 along with a letter from your branch of service is required for certification of tuition benefits. The letter can be obtained from the local county VA Office.

For more information on Federal Veteran's Benefits, visit <u>www.va.gov</u>.

# **Application Fee**

There is no charge for online applications to any of the Bellin College programs. A non-refundable \$50 fee is charged for hardcopy applications to Bellin College.

Please note: Application and other fees charged by another college or university where general education courses are to be completed must be paid directly to that college or university, not through Bellin College.

# **Reservation Fee**

Upon acceptance into the College, a reservation fee of \$100 is required. For all programs, the reservation fee is applied to the student's first semester's tuition at the College. If an applicant fails to enroll, this fee is nonrefundable.

# **Mandatory Fees**

Fees and charges will be dependent upon program option and enrollment term. Please note: The following fees are included on the tuition bills:

- Technology Fee includes the support for computers, media supplies, and web-based features.
- Doctoral Project Fee applies when students participate in the doctoral project courses.
- Comprehensive Exam Fee applies when students participate in the comprehensive exam

# **Course Audit Fee**

The tuition fee for auditing a course is one-third the regular charge for that course.

# **Credit for Prior Learning Fee**

Students who wish to have prior life experiences evaluated to determine if the course outcomes have been met, will pay an up-front fee of \$100 to have the portfolio reviewed. If credit is granted, the student will pay an additional \$25 fee per credit granted.

# **Graduation Fee**

In the semester prior to graduation, the student will be charged a \$225 graduation fee. This fee helps to defray the costs related to the: diploma, caps and gowns, announcements, programs, speaker, room, musicians, commencement reception, class picture-sitting fee, and processing of student records, storage, and maintenance for future reference. Attendance at the commencement ceremony is encouraged, but not mandatory. Non-participation in the commencement ceremony does not affect the \$225 graduation fee.

Class picture packages are not included in this fee but will be available for purchase from the photographer.

# Payment Policies and Procedures

# **Billing Statements**

Billing (tuition and fees) statements are available in the student information system before the enrollment term. Billing statements are also mailed to all students. Payment in full or partial payment with the selection of the installment payment plan must be made by the due date specified on the bill. Failure to do so may result in a \$25 late fee and class attendance restrictions will be placed on the student until satisfactory payment arrangements have been made.

# **Payment Methods**

Payments are due by the date specified in the billing statement, unless a payment arrangement has been initiated with the Bursar. Payment due dates are specified on the College website in the academic calendar. Payment(s) to Bellin College may be made via cash, personal check, certified check, or money order. MasterCard, Visa, Discover, and American Express will be accepted with an additional charge of 2.45% of transaction.

# **Overpayment of Account**

If you are utilizing financial aid and have borrowed excess funds, your account balance will show in brackets (100). When an account is overpaid, the Bursar will immediately apply to the Bellin Health System for a check made payable to the student account. Refund checks are available for pick up in the Bursar's office no later than 14 days from the date of the overpayment. In most cases, these checks are available within a three (3) day period. Checks can also be mailed to the students billing address upon request. The Bursar notifies each student when the check is available to be picked up or mailed via Bellin College email. In some cases students elect to leave all overpayments on account until the following semester. Because most overpayments are a result of financial aid loans and grants, all students wishing to leave funds on their account will notify the Bursar of their intent via Bellin College email.

# **Installment Payment Plan**

Bellin College offers an installment payment plan each semester. This plan allows the student to pay tuition over the semester in three (3) equal payments. The student must pay the first payment on the original payment due date and sign additional paperwork to implement the plan. There is no interest or finance charges for the plan, however there is a \$10 per semester processing fee. Any student defaulting on a payment plan will not be offered the plan in subsequent semesters and their account will immediately be placed on HOLD until the installment payment is received by the Bursar.

# Institutional Withdrawal Due to Nonpayment of Tuition and Fees

If a student fails to make payment or initiate the installment payment plan by the tuition due date, the student may be institutionally withdrawn from the Bellin College program. If a student has not made adequate payment arrangements they will not be allowed to attend any classes and a "Hold" will be placed on all records. The student will be notified of the withdrawal via certified letter.

The student may appeal this decision five (5) working days of the receipt date of the certified letter. To appeal, the student must make a written request to the Vice President of Business and Finance for reinstatement.

Satisfactory payment arrangements must be agreed upon before the student will be allowed to return to Bellin College classes. Tuition and fees charges will be based upon the tuition and fee schedule for semester charges plus the applicable late fee(s) and deferred payment fee. Institutional withdrawal decisions will be made in a fair and equitable manner by the Vice President of Business and Finance in conjunction with the Registrar, Bursar, Financial Aid Director, and other applicable College personnel.

## **Installment Plan Extension for Time**

Extension of payment due dates may be granted for extremely unusual circumstances. To request an extension of time or for an installment payment plan, please contact the Bursar before 4:00 pm on the day payment is originally due. If granted, extensions will be for a specified length of time. If the payment or installment payments are not made by the due date, the student may be charged a \$25 late fee and the student will be subject to the <u>institutional withdrawal policy</u>.

Students who have previously demonstrated a tendency for late payments may not be granted exceptions and will be charged the applicable late fee(s).

## **NSF Checks (Non-Sufficient Funds)**

If any Bellin College charges are paid (e.g. tuition and fees) via a personal check from the student or the student's parent(s) and the check is returned because there are not adequate funds on deposit in that account to cover the amount of the check, Bellin College will complete the following:

- Notify the student, in writing, of the returned NSF check via certified mail.
- Assess the student a \$25 NSF penalty fee.
- Require the student/parent to submit payment in full by the date designated in the certified letter. Please note: Failure to make this payment by this date will result in a late payment fee and student may be subjected to the institutional withdrawal policy.
- Require the student/parent to make all current and future payments to Bellin College by cashier's check or certified check/money order. Personal checks from any party will not be accepted.
- If payment arrangements are not met, a collection agency will be utilized. This may result in a notation on the student's credit record. All students' College records will remain on "hold" until the situation is fully resolved.

### **Tax Benefits**

If you pay for both college tuition and taxes in the same year, you may qualify for federal and state education tax benefits. While Bellin College does not provide individual tax advice, information may be obtained through a licensed tax professional or you can request information via the following website: <u>IRS</u> <u>Publication 970</u>.

This IRS publication provides a comprehensive explanation of the federal education tax benefits available to you. Such programs may include Hope Credit, Lifetime Learning Credit and/or Student Loan Interest Deduction. You can access this publication online at <u>www.irs.gov</u>.

## Financial Aid Policies and Procedures

Students enrolled in graduate level and/or post-graduate level programs may qualify for Federal Direct Stafford Loans to help offset the costs of their educational expenses. Students interested in applying for any federal student loans must file a Free Application for Federal Student Aid (FAFSA) at www.fafsa.gov. Bellin College's FAFSA school code is 006639.

## **Enrollment Status and Financial Aid**

Generally, 'enrollment status' refers to a student's credit load (full-time, <sup>3</sup>/<sub>4</sub>-time, <sup>1</sup>/<sub>2</sub>-time, etc.). Federal student loans and most other aid programs require a student be enrolled at least half-time in order to receive aid. Half-time is defined as at least five credits enrolled in a given academic term (semester) for graduate level programs.

No aid may be received in a semester or term in which the student is not enrolled.

#### **Financial Aid Documents and Forms**

Financial aid applicants may be required to submit certain documents to the financial aid office. If a document is required or requested, the student will be notified via e-mail or mail.

## **Agency Forms**

Students receiving funds from outside agencies such as tribal organizations, workforce development, an employer, etc. may be required to submit a form to the Bellin College financial aid office or the bursar's office. These forms are available through the awarding agency and are required to verify the student's eligibility for financial assistance. It is the student's/agency's responsibility to submit the appropriate form to the financial aid office in a timely manner.

## **Financial Aid Awards**

The Director of Financial Aid reviews the results of the Free Application for Federal Student Aid (FAFSA). Students to be awarded aid by Bellin College are assigned a standard cost of attendance budget based upon anticipated costs for tuition and fees (based on program of study and curriculum plan), housing, transportation, books and supplies, and other miscellaneous expenses. The result of the FAFSA, the expected family contribution (EFC) is subtracted from the budget; the remainder is defined as financial need. There are some forms of financial aid which can only be awarded to a student with financial need and the total of all awards of need-based aid cannot exceed an individual student's calculated financial need. Aid programs which are restricted to students with financial need are referred to as need-based aid. Those aid programs which can be awarded in excess of a student's financial need are called non-need-based aid. The total of need-based and non-need-based aid cannot exceed a student's cost of attendance budget.

## **Entrance and Exit Counseling for Federal Direct Stafford Loans**

Before a Federal Direct Stafford Loan (unsubsidized) will be processed for a student, an entrance counseling session must be completed at www.studentloans.gov. Prior to graduation or upon termination of at least half-time enrollment at Bellin College, an exit counseling session must be completed at www.studentloans.gov. Failure to complete an exit counseling session will result in a 'hold' being placed on all official records at Bellin College; including transcripts.

## **Financial Aid Award Letter**

When the student's eligibility for financial aid programs has been determined, the Director of Financial Aid will print a Financial Aid Notification Letter and mail it to the student's billing address. An email notification will also be sent to the student with instructions to view aid in the MyBC portal. The student should review the aid awards in the portal and has the option to accept/decline any portion of the aid awarded. There may be forms or documents which the student will need to complete and return to the financial aid office for aid to be fully processed. It is the student's responsibility to read all enclosures and follow all instructions.

## Satisfactory Academic Progress for Financial Aid Recipients

Federal regulations require that each college establish and consistently apply both a qualitative and quantitative method of measuring a student's progress toward degree/program completion. Students are required to meet such standards in order to maintain continued eligibility for federal aid programs. These standards measure a student's performance in the following three areas: completion rate, cumulative Bellin GPA, and maximum time allowed. The following is the SAP policy applied to all graduate level students enrolled at and receiving financial aid from Bellin College effective for all enrollment terms beginning on or after January 1, 2007. It should be noted that SAP standards for financial aid are separate from academic standards set by the College for all enrolled students.

#### **General Guidelines**

All graduate students, unless otherwise noted, are subject to the standards set forth in this policy SAP will be checked by the Director of Financial Aid at the end of each enrollment term, including summer and interim terms.

A student may be placed on financial aid warning or probation but not on academic probation or visa versa. See Student Handbook for more information on Academic Probation.

#### **Financial Aid Warning**

A student who fails to meet one or more of the SAP requirements noted in this policy will be placed on financial aid warning for the following enrollment term. The student will be sent a letter from the Director of Financial Aid informing her/him of the warning status within five business days of the date it is determined that the student did not meet SAP standards. While on financial aid warning, the student will remain eligible for federal financial aid (provided all other eligibility requirements are met). A student is allowed only one consecutive enrollment term while on financial aid warning. If SAP standards are met at the end of the warning enrollment term, the student will again be considered in good standing.

#### **Financial Aid Probation**

A student who fails to meet SAP standards at the end of the financial aid warning enrollment term, will be placed on financial aid probation. The student will not be eligible to receive federal financial aid until all SAP requirements are again met. The student will be sent a letter from the Director of Financial Aid informing her/him of the probation status within five business days of the date it is determined that the student did not meet SAP standards. **PLEASE NOTE:** If the warning/probation status is primarily due to a deficiency in GPA, it is important to note that the Bellin GPA can only be improved by courses enrolled and earned at Bellin College.

## **Completion Rate**

Following each enrollment term, a student's academic progress will be measured by comparing the cumulative number of attempted credits with the cumulative number of earned credits. This will include any course for which the student has remained enrolled past the Add/Drop period. A student will be expected to earn at least 67% of the cumulative credits attempted in order to maintain satisfactory academic progress.

#### The following will be considered when evaluating a student's completion rate:

- Withdrawals, incompletes, and failures are considered attempted but not earned.
- Passing credits received for pass/fail courses are considered attempted and earned credits; failing grades in pass/fail courses are considered attempted but not earned.
- Repeated courses are included in the calculation of both attempted and earned credits.
- Audited courses are not considered credits attempted or earned.
- Transfer credits used to meet Bellin College degree requirements are included in the number of attempted credits. Courses accepted for transfer into Bellin College at the time of admission to the program will be counted as attempted and earned credits. General education courses attempted while enrolled at Bellin College will also be included in the completion rate calculation.
- Periods of enrollment when a student does not receive federal aid (such as less than half-time or on financial aid probation) are included in the SAP calculation (Bellin College or transfer courses).
- Students who re-enter Bellin College will be reviewed for SAP based on all courses (transfer and previous Bellin College courses) accepted toward their degree program at the time of readmission; the Bellin College GPA will be used. Therefore, it is possible that a student who has been readmitted to Bellin College may be immediately placed on financial aid warning or probation.

#### **Cumulative Bellin GPA**

The Financial Aid SAP standards for GPA mirrors the expectations of Bellin College Academic Standards. Every student's cumulative Bellin GPA will be checked at the end of each enrollment term.

Graduate Students: All graduate students will be expected to maintain a minimum cumulative Bellin GPA of 3.0 in order to meet satisfactory academic progress standards.

#### Maximum Time Frame for Program Completion:

A student will not be eligible to receive federal financial aid once she/he has attempted more than 150% of the normal credits required for her/his degree program. Transfer credits attempted and used to meet Bellin College degree requirements will be included in the maximum time frame calculation. PLEASE NOTE: There is no financial aid warning term under this rule; a student will become ineligible for aid for the term in which the student is scheduled to reach or exceed the maximum number of credits of eligibility.

#### Appeal of Financial Aid Probation:

To appeal a financial aid probation, a student must submit a signed and dated letter of appeal to the Director of Financial Aid within 14 calendar days of notification of the probation. The letter must explain why the student failed to meet SAP standards and how the student plans to improve upon her/his academic performance if financial aid eligibility is allowed to continue. Factors which may be considered when reviewing a student's appeal may include (but are not limited to): personal or immediate family illness, death in the family, natural disaster, or other extraordinary circumstances. Documentation verifying the situation may be required. The Director of Financial Aid and the Dean of Student Services will review the request and a decision will be made within ten business days of receipt of the letter and supporting documentation (if applicable). The student will be notified in writing of the decision. If the appeal is granted, the student will be allowed one additional enrollment term of financial aid warning. Only one suspension appeal will be allowed; no further appeals will be accepted. The decision of the Dean of Student Services and Director of Financial Aid is final.

#### **Return of Unearned Aid Due to Withdrawal**

When a student withdraws from Bellin College prior to completing an enrollment period (semester, session, term), the College must determine the amount, if applicable, of financial aid the student earned as of the student's withdrawal date in accordance with Section 668.22 (e) of the Higher Education Act. If the total amount of aid that the student earned is less than the amount of assistance that was disbursed to the student, the difference must be returned to the aid programs from which they originated in accordance with Section 668.22 (g), (h), and (l). The student is not eligible to receive any additional disbursements of aid, if applicable, for that term of enrollment.

Bellin College will return (within 30 days of the College's determination that the student withdrew) unearned aid on behalf of the student up to the amount of refunded tuition and fees charges paid by the student. Any additional aid returns become the responsibility of the student. Under federal regulations, any student who fails to return federal funds as required will remain ineligible for further federal financial aid until the total amount of funds has been returned or the student enters into an agreement with the US Department of Education Secretary to repay the unearned aid.

Unearned aid will be returned to sources in the following order:

- 1. Unsubsidized Federal Stafford Loan
- 2. Federal Grad PLUS Loan

There will be no return of financial aid funds nor reduction of charges for students who have completed at least 60% of the enrollment term as of the date of withdrawal.

### Withdrawal Date Determination for Non-Attendance

In accordance with Section 668.22 of the Higher Education Act, the withdrawal date for a student who ceases attendance at Bellin College prior to the end of an enrollment period (i.e., semester) will be: The date, as determined by the College, that the student began the withdrawal process prescribed by the College policy.

The date, as determined by the College, that the student otherwise provided official notification to the institution or its representative, in writing or orally, of her/his intent to withdraw.

The mid-point of the enrollment period, if the student ceases attendance without providing official notification to the College of her/his intent to withdraw unless the College can document the student's last date of attendance at an academically-related activity (please see term definition below).

The date the College determines is associated with the circumstance, if the student failed to provide official notification of the intent to withdraw due to illness, accident, or grievous personal loss, or other such circumstance beyond the student's control.

#### Academically-Related Activity

An academically-related activity includes, but is not limited to, an exam, a tutorial, computer-assisted instruction, academic counseling, academic advisement, turning in a course assignment, or attendance of class or clinical meetings.

## Admissions Policies and Procedures

#### **Admissions Policy**

It is the policy of Bellin College to be nondiscriminatory because of race, color, national and ethnic origin, religion, age, gender, gender identity, sexual orientation, marital status, or disability in the admission of students, in student programs and in the employment of College faculty and staff.

Bellin College evaluates applicants on a combination of educational, personal, and health qualifications for admission. Bellin College reserves the right to withdraw an offer of admission if an admitted student engages in behavior that brings into question his or her honesty, maturity or moral character.

Students currently enrolled are held to meet the qualifications and requirements of The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog on which they entered. If a student exits the College and then re-enters, he/she will be bound by the qualifications of The Bellin College Doctorate of Science in Physical Therapy Guide Handbook & Catalog in effect **at time of re-entry**.

For more information visit https://www.bellincollege.edu/admissions/

#### **Doctorate of Science in Physical Therapy Admissions Requirements**

The Doctorate of Science in Physical Therapy is available to physical therapists who hold a current license to practice in a US state. This license must not be suspension, revocation, probationary status, or subject to disciplinary proceedings or inquiry. Applicants must have at least one year of post-professional Orthopaedic clinical experience, and if enrolling on or after Jan 1<sup>st</sup>, 2019 must have the Orthopaedic Certified Specialist certification through the ABPTS. The program can be completed in approximately 48 to 60 months part-time. Official entry level college transcript required.

## **Educational Resources & Required Materials**

*Physical Therapy (through APTA membership)*, Open Door and PTNow (<u>http://www.ptnow.org/Default.aspx</u>). Online resources on the Bellin College website and/or Learning Management System (including a video library for fellows-in-training/faculty).

#### **Musculoskeletal Materials**

The required materials are provided for each resident and FiT and are paid for by each resident/fellow's "materials fees". Details on each respective program's fees and payment terms are available in the Residency/Fellowship Application, as well as by specific request from current or prospective residents/fellows. Resources are re-evaluated and updated annually, so understand that changes to the below needed resources may change.

- Boyles RE, Flynn TW, Whitman JM, Wainner RS, Mintken PE. Spinal & Extremity Manipulation: The Basic Skill Set (2nd ed.). Evidence In Motion, LLC. (2012). E-Book.
- Bradberry, Greaves (2009). Emotional Intelligence 2.0. San Diego: TalentSmart.
- Flynn T, Cleland J, Whitman J. The Users' Guide to the Musculoskeletal Examination: Fundamentals for the Evidence-based Clinician. Evidence In Motion, LLC (2008).
- Louw, A., Puentedura, E., (2013) Therapeutic Neuroscience Education: Teaching Patients About Pain- A Guide for Clinicians. 1st Edition. International Spine and Pain Institute (USA) 2013
- Management of Mechanical Neck Pain. Evidence In Motion, LLC. (2012). E-Book.
- Maitland's Vertebral Manipulation: Management of Neuromusculoskeletal Disorders Volume 1 8e; Elly Hengeveld.

Recommended Musculoskeletal Materials

- Ciccone, CD. (2007) Pharmacology in Rehabilitation. (4th Ed) Philadelphia: FA Davis.
- Goodman C, Snyder T. (2007) Differential Diagnosis for Physical Therapists: Screening for Referral. (4th Ed) St Louis: Saunders.
- Guyatt, G., Rennie, D. (2008). Users' guides to the medical literature. Essentials of evidence-based clinical practice (2nd ed.) Chicago: AMA Press.

## **Final Admission for All Stated Programs Above**

Final admission to the College is contingent upon receipt of all *official* transcripts (for any courses in progress at the time of application). Meeting minimum program requirements does not guarantee admission.

## **Non-United States Citizens**

Non-US citizens are encouraged to contact the Admissions Department for details. The application process remains the same per program of interest. However, the following additional documents are required:

- Proof of immigration status.
- Providing evidence of English proficiency via the TOEFL (Test of English as a Foreign Language).
- Providing official transcripts evaluated by the ECE (Educational Credential Evaluators) (if course is taken at a University/College outside of the United States).

## Registrar Policies and Procedures

## **Credit Hours Equivalency**

Credit Hours equate to the amount of instruction time assigned to a class. The amount of time allotted per credit varies for theory and lab courses (see table below). The total instructional hours for a course are distributed across the session. In addition to instruction time, students should anticipate spending a minimum of two hours per credit hour per week in out-of-classroom preparation and study.

Courses are reported in credits according to the following values:		
Classroom:	1 credit = 15 hours	
Lab:	1 credit = 30 hours	
Practicum:	1 credit = 85 hours	

## **Grade Point Average**

Grade point average (GPA) is a quantitative measure of academic achievement and is computed on the basis of credits earned and grades achieved. Only grades for courses taken at Bellin College are used to

compute the GPA each semester. GPAs are computed at the end of each semester and summer session for all courses taken at Bellin College during that period. The GPA is on a 4.0 scale.

## **Course Add Procedure**

A course "add" is defined as enrolling in a class after the first day of the course. Students planning to add a course(s) must complete the following:

- Consult the Advisor and Career Services Coordinator Advisor to determine the impact on the program of study.
- An "Add" Form must be completed by the student and Advisor and Career Services Coordinator and returned to the Registrar. Add dates will be computed from the date that the official form is dated. This is the date for determination of implications of grade and tuition adjustment.

\*Check dates of the academic calendar to identify final dates to add courses and the ramifications that adding courses has on applicable grades/transcripts/tuition and applicable refunds.

## **Course Drop Procedure**

A course "drop" is defined as canceling a class after the first day of the course. Students planning to drop a course(s) must complete the following:

- Consult the Advisor and Career Services Coordinator to determine the impact on their program of study and ability to progress in the curriculum plan.
- A "Drop" Form must be completed by the student and Advisor and Career Services Coordinator and returned to the Registrar. A drop date is identified on the official form. This is the date for determination of implications for grade, tuition, adjustment and/or possible refund.

\*Check dates of the academic calendar to identify final dates to drop courses and the ramifications that dropping courses has on applicable grades/transcripts/tuition and applicable refunds.

## Incompletes

No more than two (2) incompletes in courses can be granted in any one semester or grading period. Incompletes in more than two (2) grading periods will result in automatic dismissal from Bellin College. Students with extenuating circumstances may appeal to their Program Director.

It is the responsibility of the student to request an incomplete and make arrangements with the appropriate course facilitator/faculty to complete the required work. Incompletes must be removed within four (4) weeks of the last day of the course, or the incomplete becomes an "F".

## Transcripts

Bellin College transcripts are the official record of all course work attempted by a student at the College from the date of enrollment to the date of graduation or exit/withdrawal. Courses are recorded on the transcript with a letter grade 4.0 scale; not P/E and are included with the semester/cumulative grade point average (GPA).

Bellin College requirements that have been completed at another institution are recorded on the Bellin College transcript. These courses are not included within the grade point average (GPA) at Bellin College, but are recorded with the letter grade.

## **Transcript Requests**

Requests may be completed via the link found on the Bellin College website or from the Student Services - One Stop Shop. Transcripts are typically completed and mailed within 1-4 working days.

Official transcripts bear a watermark and the signature of the Registrar. Official transcripts released directly to the student are so noted on the transcript and are placed in a sealed envelope.

The charge for an Official Transcript is based upon the time for requested delivery. The fee scale is available on the Registrar webpage for Bellin College, under "Transcripts". Unofficial transcripts are available for currently enrolled students free of charge via the student information system. Transcripts are not released to students or graduates with a "Hold" on their records.

## **Exit/Withdrawal Policy**

Exit from the College is defined as canceling or withdrawing from all credits for the semester/session/term. Students may electively withdraw or may be dismissed by the College.

Students exiting the College for any reason, elective or due to College policy, must confer with the Program Director to assure that all necessary procedures and paperwork are completed to meet institutional, state, and federal requirements. This will include contact with the appropriate Program Director, Financial Aid personnel, and the Bursar. Failure to meet with the appropriate personnel within five (5) work days will result in a "Hold" placed on all Bellin College records of the student.

The Program Director will assist the student with the exit process.

- If a student notifies the College that he/she will be withdrawing at the end of an enrollment period (semester/session/term), it is permissible for them to complete the Official Exit Form on or before the last day of the enrollment term. The student may meet with the designated College personnel before the last day of the enrollment period in anticipation of the exit.
- If the student completes the Official Exit Form prior to the end of the enrollment period but is electing to finish specific courses, the Program Director will initiate the completion of an Add/Drop Form for each course the student is dropping. This Add/Drop Form must be completed at the time the student notifies the College of plans to drop specific courses.
- If a student is withdrawing from the College before the end of the enrollment period (session/semester), an Official Exit Form must be completed at that time.
- If a student does not complete the Official Exit Form or fulfill the withdrawal requirements, the student will be automatically withdrawn and a "Hold" will commence the day of the official exit date.
- If applicable, the student must request from any college/university where taking general education courses to forward an official transcript to Bellin College. Bellin College transcripts cannot be completed until this transcript is on file.

Students are advised to check dates of the academic calendar to identify the final dates to withdraw from courses, and understand the ramifications that withdrawal from courses has on applicable grades/transcripts/tuition and any applicable refunds.

## **Determination of Official Exit Date**

A student may electively exit or withdraw from Bellin College at any time. The College requires the student notify the College of her/his intent to withdraw in writing. The only exception to this is a personal emergency in which a verbal intent to withdraw will be accepted. This written notification should identify the student's intended last date of class attendance, which will be the official exit date. Notification must be made to the Program Director, the Dean of Allied Health Sciences, the Dean of Student Services, and the appropriate Program Director or her/his representative. If a student withdraws from the program without completing that enrollment term, the exit date will be the date the notification is received from the student.

A student may decide to exit the College prior to the end of an enrollment period and remain enrolled through the end of that session/semester/term. In this situation, the student will identify the last day of the enrollment period (session/semester/term) as the official exit date. Students may meet with the Program Director to complete required paperwork and related responsibilities before the last day of the enrollment period. If necessary, a follow-up appointment may be scheduled for the end of the session/semester/term in order to complete the exit process.

If a student is dismissed from the College due to academic performance issues, the official exit date will

be the date the Academic Department determines the student is no longer eligible to continue in the program.

If a student is dismissed from the College due to academic or non-academic misconduct the official exit date will be determined by the appropriate academic Dean (for academic misconduct) or the Dean of Student Services (for non-academic misconduct).

If a student fails to make payment or initiate satisfactory payment arrangements by the tuition due date, the student may be institutionally withdrawn. If a student has not made adequate payment arrangements he/she will not be allowed to attend any subsequent Bellin College classes and a "Hold" will be placed on all College records of the student. The official exit date will be the last day of the enrollment period for which the charges were incurred.

If a student did not begin the official exit process or provide notification of her/his intent to exit (ceased attendance), the official exit date will be the date the College became aware that the student ceased attendance.

The official exit date must be a College business day. If notification is received on a non-business day, the official exit date will be the first business day after notification.

## **Re-Entry of Former Bellin College Graduate Students**

Applicants who were dismissed from the Bellin College Graduate Program have 1 calendar year from the dismissal date to apply for re-entry. The ability to re-apply does not stipulate a guarantee, promise or other agreement concerning acceptance to the program, option placement, academic plan or transfer of credits. Former students who exited Bellin College for reasons other than dismissal will follow the standard admission policy and procedures.

### **Procedure for Re-Entry**

- 1. Complete an "Application for Re-Entry after Dismissal: Graduate Program" form, providing supporting documentation as needed. The form is submitted to the Admissions office. The reentry application should include:
  - Personal statement highlighting any extenuating circumstances leading to the dismissal, behavioral changes that will contribute to goals for success, etc.
  - Contact information such as address, home telephone and cell phone numbers, and email address.
  - Official transcripts of academic performance since exit from the College.
- 2. The application for re-entry is reviewed by the Enrollment Review Workgroup and all applicants will be interviewed by the Enrollment Review Workgroup.
- 3. The student will be notified of the Workgroup's decision. All decisions are final. The Workgroup will decide one of two options:
  - Accept re-entry application
  - Deny re-entry application
  - Defer re-entry application decision
- 4. If the Enrollment Review Workgroup denies re-entry, the student's opportunities for readmission are exhausted.
- 5. If the Enrollment Review Workgroup accepts re-entry, the student will be admitted with the probationary requirement that all program course work must be completed at Bellin College and the failure to meet a passing grade of AB in any course would result in permanent dismissal from the College.
- 6. Applicants who are re-admitted will have a plan of study developed according to current policies, procedures, and timelines. It is the responsibility of the applicant to meet with the DScPT Program Director to discuss the plan of study. Failure to meet this requirement will result in automatic denial of the re-entry application.

 The date of re-entry is determined by the Workgroup based on classroom and lab resources. Students will be bound by the qualifications of The Bellin College Doctorate of Science in Physical Therapy Guide – Handbook & Catalog in effect at time of re-entry.

## College Credits – Earning, Evaluation, and Transfer

#### **Credit Evaluation**

Students who have completed or in the process of completing an American Board of Physical Therapy Residency and Fellowship Education program (ABPTRFE) approved fellowship or residency program can request a evaluation to indicate accepted courses and credits as transferable to satisfy Bellin College DScPT requirements. The factors for determining transferability are as follows:

- Accreditation status of the previous institution(s) attended.
- The quality of the student's achievement.
- Course content.
- The dates the courses were completed.

Applicants may request an unofficial evaluation before application to the College. This is optional, as applicants will receive an official evaluation as part of the application process. An applicant having courses in-progress (IP) at the time of the evaluation must provide official transcripts once courses are completed.

An applicant having courses in-progress (IP) at the time of credit evaluation, application or acceptance to the College must provide official transcripts once courses are completed. The 3.5 GPA requirement and grades of "AB" or above in each course must be met to remain a viable applicant.

## **Credit for Military Experience**

Applicants who are veterans may receive credit or from the C.C.A.F (Air Force) for military experience. Applicants must request an official transcript at: <u>http://jointservicetranscript.com</u>. In granting credit, Bellin College follows the American Council on Education (the ACE Guide) recommendations and College policies. Prior military credits are evaluated by the Registrar. Bellin College has also entered into a Memorandum of Understanding (MOU) agreement with the Department of Defense.

In part, applicants or students who are able to provide one of the documents in evidence of veteran status will receive satisfaction of the credits for the program's Diversity requirement.

- Joint Services Transcript (JST),
- Community College of the Air Force (CCAF) Transcript, or
- Certificate of Release or Discharge from Active Duty, DD Form 214.

The Registrar will review and make the final determination. There is no additional fee for this review and determination.

#### **Credit for Prior Learning**

Individuals who have a combination of prior coursework or life experiences which appear to fulfill a required course in the academic plan may seek Credit for Prior Learning (CFPL). It is the individual's responsibility to provide supporting evidence which may include, but is not limited to portfolio: narrative, syllabi, course outlines, position description, and resume or curriculum vita. If CFPL is granted by Bellin College, the individual is excused from taking the course. Credit for the equivalent course will appear as Prior Learning (PL) on the transcript.

Applicants should contact the Admissions Office for further details and eligibility requirements.

Current students should contact the Program Director for further details and eligibility requirements. A fee is charged for evaluation of CFPL.

## External Independent or Correspondence Study Courses

Students may register for independent study courses at other colleges and universities to fulfill Bellin College curriculum requirements provided they are credit and content equivalent to the Bellin College required course. For the purposes of financial aid and records management, the course will be recorded as transfer credit on the transcript for the semester of initial registration.

Students must complete the course within the semester in which they have registered for it. The policy for transfer credit applies to external independent study. There must be an official transcript on file with the Registrar verifying course completion at least two (2) weeks prior to graduation for all independent study courses taken in the final semester of the senior year.

## **Independent Study Courses**

Independent study allows a student to pursue an area of particular interest with a Bellin College course facilitator that can enhance or augment the current curriculum plan.

Students may register for independent study course(s) for additional credits in one of the physical therapy areas of study. Independent study courses on a selected topic can provide additional credits for activities not in the current curriculum plan. With approval and advisement, students can demonstrate self-direction by planning, implementing, evaluating, and reporting an independent learning experience.

General Guidelines:

- Independent study opportunities will not be approved for an enrolled student who would miss course sessions (theory, lab, clinical).
- Independent study courses must be completed before the last semester/last two (2) sessions of study.
- Students must complete the course within the semester in which they have registered.
- The student may accumulate up to three (3) independent study credits within their academic career at Bellin College.
- The time frame for the implementation for the study should equate to at least 30 hours per lab/clinical credit and 15 hours per theory credit.
- The DScPT Program Coordinator will assist students with the Independent Study Proposal Form, guidelines, and procedures.
- Fees for independent study will be based on the current Bellin College academic per credit fee schedule.

## **Transfer Credits**

A maximum of fifty (50) semester credit/hours (three course units or their equivalents) may be approved for transfer credit. Transfer credits will be considered if the course(s) is similar in content and rigor to the Bellin College Doctorate of Science in Physical Therapy curriculum, and the grade must be at least an "AB". Grades of "B", "B-", "B/C", "C", "C/D", "D", or Pass/Fail are not accepted. Only courses taken from a comparable, nationally accredited institution are acceptable. The following restrictions apply:

• Courses with a clinical component in which the clinical hours are counted for purposes of the regulatory and credentialing bodies are not acceptable for transfer.

The student must submit an official transcript, description of the course taken, and possibly the syllabus if requested, to the DScPT Program Director for evaluation if the student believes the course is equivalent to a Bellin College graduate course. Bellin College DScPT courses are transferrable from one program to another; however, students must apply and be accepted to each selected program.

Transfer credit decisions are at the discretion of the Program Director. If approved, the transfer credit will appear on the transcript but will not be calculated into the student's GPA.

## Transfer Credits – Credit Evaluation for Course Equivalency

Students who enter with prior course work from a college or university, accredited by an appropriate accrediting association, which appear to fulfill a required course may seek a course equivalency. The student requesting this process must contact the program's Program Director for review of prior course work. If granted, the course credits are applied toward the graduation requirements. Transfer students will receive a copy of the credit evaluation identifying the courses and credits that fulfill Bellin College requirements.

An applicant who has been out of school for several years is encouraged to contact the Bellin College Admissions Office regarding eligibility.

## Student Submission of Transfer Course Grades

Students completing courses outside of Bellin College must submit proof of completion (official transcripts with final grades) at the end of each semester/session/term; including the summer semester. All applicants to Bellin College must provide official transcripts.

A Bellin College transcript cannot be fully completed for students until an official transcript from the "other" college/university has been received for courses taken at that institution.

The deadline for submission of official transcripts reflecting any completed general education courses must be received no later than four (4) weeks after the last day of semester taken.

## Academic Policies and Procedures

## **Course Delivery**

The purpose of this policy is to provide clear expectations for faculty and students regarding course delivery options. Bellin College recognizes expanded opportunities online learning environments provide students and instructors to engage in active, meaningful learning through the appropriate use of technology.

Online components are a part of each and every course at Bellin College. The following are the definitions of the three delivery options:

**Face-to-Face:** Course activity is organized around scheduled class meetings in that instruction and learning activities occur in a physical classroom setting. Face-to-Face courses may also include web-enhanced course activities which complement in-person classroom sessions without reducing the number of class meetings.

**Hybrid:** Course activity is organized around a blend of scheduled face-to-face meetings and online instruction. Typically, between 30-70% of the course activities occur online; those activities can be either synchronous or asynchronous.

**Online:** All course activity is completed online; those activities can be either synchronous or asynchronous.

Asynchronous online and hybrid courses are not completed at your own pace. Students are required to follow the course schedule and complete activities and assignments by the designated due dates. The Academic Deans/Directors and the Instructional Design Specialist will provide faculty with guidance, oversight, and approval throughout the online and hybrid course development process. All courses will utilize the College's standard Learning Management System (LMS) templates.

## Academic Advising – DScPT

All DScPT students are advised by the DScPT Program Director/DScPT Program Coordinator upon entering the DScPT program until a chair is identified for the DScPT Doctoral Project.

## Audio/Video Recording of Faculty Lectures/Conferences

All individuals wishing to record faculty lectures and/or conferences presented as part of the Bellin College curriculum must obtain verbal approval prior to the lecture and/or conference from the specific teaching faculty member.

Frequently, speakers will give permission for the recording of a presentation; however, a faculty member has the right to refuse permission unless an accommodation for disability is approved.

In the event the faculty member approves the audio/video recording, the obtaining and utilizing of the recorder and the audio/video is the student's responsibility. It is further understood that the recording is to be used for current educational purposes only.

In accordance with the above policy, all students should be aware that any classes, and discussions held therein, are subject to being recorded.

## **Grading Policies**

The following grading system is used to determine course achievement in classes in one's major program:

	Letter Grade	Grade Points per Credit	Numeric Grade Equivalent
	A	4.0 points	93-100
BELLIN COLLEGE MINIMUM PROGRESSION REQUIREMENT	AB	3.5 points	90-92
	В	3.0 points	85-89
	BC	2.5 points	82-84
	C	2.0 points	77-81
	D	1.0 point	70-76
	F	0.0 points	Below 70

Each course is graded in its entirety. A student must be successful in all course components (i.e. class, lab, and/or clinical) to receive a passing grade. The course outcomes are represented in all course components.

The grade calculation process will be consistent across the Bellin College curricula. For all program offerings, within each course individual assignments/projects/exams will be recorded up to two decimal places without rounding-up (for example, 92.578 will be recorded as 92.57). The final composite course grade rounds up to the nearest 100<sup>th</sup> place (for example, a 92.578 will display as 92.58). The whole number without rounding is used for the letter grade (for example, 92.58 receives a letter grade of AB). It is the policy of Bellin College to not offer extra credit in undergraduate major courses.

AU	Course Audit	No effect on GPA		
EX	Credit by Exam	Course credit achieved by exam.		
Ι	Incomplete	No effect on GPA until four (4) weeks after the end date of course. Grade becomes "F" if letter grade is not received within the four (4) week period or formal arrangements for completion are not made.		
IP	In Progress	Represents the course in which the student is currently registered.		
Ν	No Report or In Progress	No grade report received or course in progress.		

## **Grades without Associated Grade Points**

Р	Pass	Represents work was completed at or above the passing standard in a pass / fail course but is not included in the GPA calculation.
F*	Fail	Represents work was completed at lower than the passing standard in a pass / fail course but is not included in the GPA calculation.
PL	Credit for Prior Learning	Credit achieved by demonstrated learning experience.
R	Repeated Course	Designates a course repeated for grade betterment. The prior grade is removed from cumulative GPA calculation.
Т	Transfer Credit	Transfer credit from a course taken at another institution of higher learning that is accepted at Bellin College.
WF	Withdrawal/Failing	Withdrawal from a course after the sixth week of a 15- week semester or after 40% of the course has been completed.
W	Withdraw	Dropped course before 40% of course is completed. No effect on GPA.

All courses require a final grade of AB or better. The grade of B is below satisfactory achievement.

For the DScPT academic program, any grade earned at an accredited institution must be that of an "AB" or higher for it to be accepted by the College and student to receive course credit.

## **Course Grade Reports**

Bellin College grade reports will be available for student self-service access through the student information system at the end each semester/session/term. This occurs approximately 10 working days after the last day of the semester/session/term.

## **Grade Appeal Policy**

A student may appeal a grade for computation or interpretive error. No grades will be reviewed after 20 working days from official Registrar posting unless it can be demonstrated that a grade was incorrectly recorded or that it was impossible for the student to initiate review during the designated time period.

#### Procedure

The grade appeal procedure is as follows:

- The student must contact the course facilitator within 10 working days of the grade return.
- The course facilitator will review with the student how the grade was determined based on written criteria in the course outline.
- If the issue is not resolved, the student should contact the appropriate Program Director within five (5) working days. The student must present in writing the reasons she/he believes the grade should be changed. If the Program Director is also the course facilitator in the appeal, a different Program Director must handle the appeal process for review of information and final decision. The appropriate academic Dean will assign a different Program Director to the appeal.
- The appropriate Program Director will request and review a written explanation of the grade from the course facilitator. This explanation must be submitted within two (2) working days.
- The appropriate Program Director's decision on the grade appeal is final.

## Audit Course Policy

Any Bellin College course may be audited with the exception of clinical, project, or practicum courses. The plan to audit a course must be approved by the Program Director. Audited courses are subject to the following guidelines:

- Auditing of course must be approved by faculty.
- The audit option is only available if course is not at enrollment limit.

- An audited course carries no credit value or letter grade (AU).
- Students auditing a course are not required to complete any assignments or exams.
- Auditing a course will not replace a previous course grade, or affect GPA.
- An audited course will not satisfy degree requirements.
- Students may not audit courses to maintain continuous enrollment at BC.
- Any student (degree seeking or non-degree seeking) may audit.
- Once the course begins, students cannot switch enrollment status (audit to graded, or vice-versa).
- Audit permission form must be completed.
- Cost is 1/3 of tuition, with appropriate fees (e.g. technology).

## **Confidentiality of Protected Health Information**

Clinical experience requires students to access protected health information about clients. The Health Insurance Portability and Accountability Act (HIPAA) requires health information about clients to be secured and kept confidential. As a student, there is a legal and ethical need to protect a client's right to privacy. Client information will not be shared in any form or medium, including written, verbal or electronic methods, with anyone other than those who are directly responsible for the patient's care and treatment. Patient identifiers include, but are not limited to: name, medical record number, and visit number, dates including birth date, date of admission and date of discharge. Patient care information will be discussed only in patient care areas, and with acute awareness of who is within hearing range.

While students may write down essential information for the preparation and care of clients, information that identifies a client in any way may not be taken from the clinical site. No records may be photocopied for any reason. It is unlawful to disclose all individually identifiable information. This relates to information about past, present and future:

- Physical and mental health.
- Provision of healthcare to the client.
- Payment for the client's healthcare.

Violation of this policy may result in clinical and/or disciplinary probation, dismissal, and/or legal and financial consequences.

## Student Performance Remediation and Due Process

## **Student Performance Notification (SPN)**

Academic success is essential for progression in the program. The purpose of the Student Performance Notification is to provide the student with notice of academic (inclusive of label) or professional performance issues. This allows for student consultation with appropriate College personnel to determine steps for success.

SPN's are completed by faculty in consultation with the Program Director to address academic and / or performance issue(s). Examples of SPN categories include, but are not limited to:

- Academic Performance
  - Failure to meet course outcomes.
- Professional Performance (inappropriate or unsatisfactory professional performance) Examples include, but are not limited to:
  - o Late work.
  - Tardiness or absence from lab/clinical.
  - Violations of the Dress Code Policy.
  - Unethical or illegal behavior.
  - Repeated infractions of College policies.

• Persistent negative responses toward constructive feedback.

### SPN Category

SPN's are leveled based on pattern and/or severity of the issue, resulting in either Monitoring or Probation.

#### **Classroom and Clinical Monitoring**

A student who is not making satisfactory progress toward specific classroom, lab, and/or clinical outcomes, may be placed on monitoring at any point during their program of study. The duration will be determined by the Program Director.

- Classroom monitoring may occur when student behaviors are not conducive to classroom outcomes and student success.
- Lab or clinical monitoring may occur when student behaviors lead to a negative outcome or injury (incident) or when skills, behaviors and actions are not conducive to course outcomes and success.
- Refer to the medication calculation policy for students who are unsuccessful on the medication calculation tests.

Failure to meet the terms of classroom/lab/clinical monitoring will result in probationary status. Each situation is evaluated on a case-by-case basis.

#### **Probations – Overview**

A student may be placed on academic and/or disciplinary probation. A student may be placed on probation as a progression of monitoring, or may be placed directly on probation depending on the severity of the infraction.

- Probations are typically a period of one (1) year.
- The student is expected to fulfill the terms of the probationary status as outlined in the Student Performance Notification (SPN).
- A student on probation (academic and/or disciplinary) is not eligible for Dean's List status.
- A student who does not meet the terms of probation as defined on the SPN is subject to dismissal from the program.

#### **Academic Probation**

A student is placed on Academic Probation when failing to meet the appropriate course grade or lab/clinical requirements or in some cases of academic performance. The following results in automatic academic probation:

- Failure to attain an "AB" or better in a required courses.
- Receipt of an unsatisfactory final clinical evaluation.
- Failure to meet the terms or expected outcomes of classroom/lab, and/or clinical monitoring.

Each case is reviewed individually. The nature and gravity of the incident, the motivation underlying the behavior, the student's academic, performance and disciplinary history, precedent in similar cases and other mitigating circumstances will be considered in determining the appropriate action(s). Repeat cases of violations of the College values may result in more severe penalties. Based on the type of infraction, the College cooperates with local, state, and federal law enforcement authorities as appropriate.

The College reserves the right to immediately terminate any student from the program when that student's behavior, health, and/or performance jeopardize the safety of the clients, other students, or College faculty, staff, visitors, guests, and/or property.

Students are required to sign the SPN form when placed on clinical monitoring or academic probation. The form provides written evidence of present status, recommendations for improvement, expected outcomes, timelines, and consequences. The signed form becomes part of the student's official file. A copy of the signed SPN is provided to the student.

#### Grade and Progression Policy Grade Requirements

All courses require a final grade of AB or better. The grade of B is below satisfactory achievement.

When a final grade of less than "AB" is earned, the course facilitator is to notify both the student and DScPT Program Director in writing (an email is acceptable) within one (1) week of assigning the grade. The student will then receive a letter from the DScPT Program Director informing them of the Repeat and Progression Policy.

#### **Repeat and Progression Policy**

<u>One</u> Graduate course can be repeated <u>once</u> in an effort to remove the unsatisfactory grade from the individual's GPA computation. Students requesting to repeat a course (second attempt at the same Bellin College course) must submit a writing appeal to the DScPT Program Director.

Repeating a course will require a modification to the student's plan of study and will, in most circumstances, result in a delay of anticipated graduation date. Subsequent course enrollment will be dependent upon meeting prerequisite or corequisite requirements of the course.

No repeats will be allowed when final grades are below AB due to ethical, legal, moral, or competency standards.

### **Academic Remediation**

For Non-credentialed Program Students, an unsatisfactory grade for a course must be remediated. The initial grade will be changed to an AB following a successful remediation of the course. Grades of F for a course may only be remediated if, based on the opinion of the respective program director, there are extenuating circumstances. These cases will be handled on a case-by-case basis.

For lab sessions, non-attendance will result in an incomplete grade. This must be remediated by attending the next available lab session. Tardiness or partial attendance for lab sessions will need to be addressed by the respective lead faculty member. Students must make up any missed work to receive a passing grade.

The process of remediation begins no later than the first week following receipt of the substandard grade. A remediation plan will be developed using the following remediation process:

A meeting occurs between the appropriate faculty member and the student to discuss the required minimum standard of performance and the student's current level of performance.
 The faculty member will make the respective Program Director aware of the student's situation.
 A plan is discussed and developed between the student and faculty member re: further study to improve the understanding necessary to improve performance, the necessary practice to improve performance and a timeline for this plan.

4) A further plan is established for re-evaluation of the student's performance which will include:

- The method of re-examination i.e. written test, practical examination, additional coursework, or combinations of these methods the date that this shall occur.
- The person that will administer and grade the re-examination or additional coursework. Due to the nature of on-line learning, the student will repeat the course in question at the first available opportunity.

5) A written or electronic (email) agreement is established and signed by the student and the faculty member and a copy sent to the Program Director.

6) Communication between the student and the respective Program Director will be completed following examination to discuss:

- The student's performance on the remediation
- o Impact of the remediation process on overall timeline of the program
- Proposed plan to modify schedule if necessary

If this first process fails to improve the performance of the student to acceptable level for passing then the secondary level will be enacted:

1) A meeting occurs between the student, faculty member and the Program Director to discuss the current standard of performance and the student's level of performance.

2) A plan will be discussed and developed between the faculty member, Program Director and the student re: further study and practice to improve performance and a timeline.

3) A further plan is established for re-evaluation of the student's performance which will include:

- The method of remediation
- The date of the remediation which will be established by the faculty member and Program Director

4) A written agreement is established and signed by the student, faculty member and Program Director.

5) A follow up meeting between the student, faculty member and Program Director will be completed following examination to discuss:

- The student's performance on the second re-examination.
- o Impact of the remediation process on overall timeline of the program.
- Proposed plan to reorganize the schedule and extension of the residency to enable successful completion.

6) A follow up meeting between the Program Director and appropriate faculty members to discuss possible reasons behind initial failure of the student and possible changes necessary to curriculum to prevent future difficulties with current student as well as future students.

If this second attempt at remediation fails to improve the student's performance to established guidelines for passing then the student will be dismissed from the program, as applicable.

## **Misconduct Review Process**

The faculty member and/or responsible supervisor suspecting that unsafe behavior or unprofessional conduct in a clinical or academic setting exists will inform the program participant of the charges against him/her and notify the respective Program Director. If, in the judgment of the Program Director, the nature of the conduct or behavior warrants, the participant may be suspended from the program or clinical area until the review process described below has been completed. Following a preliminary review of the evidence available in a case, the Program Director shall schedule a hearing with the program participant to review the charges. The hearing may be conducted face to face, telephonically, or via webcam connectivity. If the participant fails to appear at the hearing and the failure of appearance is not excused by the Program Director for good cause as determined in the discretion of the Program Director, the charges shall be deemed unchallenged and the participant shall be deemed to have waived his/her rights to a hearing. In such case, the Program Director will determine the appropriate sanctions and initiate execution of the sanctions.

At the hearing, the Program Director or designee shall:

1) Provide the participant with copies of all written reports regarding the circumstances and facts of the case. The resident/fellow shall have an opportunity to give his/her reactions to the reports and to offer any additional information relevant to resolving the case.

2) Interview involved parties, including the participant, about the facts of the case. The participant shall have the right to hear any testimony related to the case that may adversely affect him or her and to question persons giving such testimony.

3) Allow the participant to present witnesses on his/her own behalf and to be accompanied by one advisor who is not a party to the case. Such advisors must be members of Bellin College.

Following the hearing and consultations deemed necessary with program faculty or committees, the Program Director or designee shall make a determination of the facts of the case and sanctions if appropriate. Sanction options include, but are not limited to, expulsion or suspension from the program, probation, warnings, or failure of a course. Notification of the results of the review by the Program Director or designee shall be provided in writing by regular mail to the student's last known address and/or vie electronic communication as identified in the records of Bellin College. The program participant shall have three (3) working days from receipt of the letter/email to appeal the decision of the Program Director.

Notification of the results of the review shall be provided in writing by mail or email to the program participant with a copy to the Program Director or designee. The decision of this review is final.

## **Causes for Dismissal from Bellin College**

A student may be dismissed from the College as a result of academic-misconduct, non-academic misconduct, academic performance reasons and/or for behaviors that are not in accordance with College policies or values.

The following situations result in an automatic dismissal from Bellin College:

- Failure to fulfill or resolve academic or disciplinary probation requirements via breech of contract.
- A student who is unsuccessful in two (2) major courses will be dismissed (see Progression Policy). Exceptions may apply to students in their last session/semester.
- A student who is unsuccessful in three (3) general education courses will be dismissed (see Progression Policy which also states students may repeat a failed course one time only).
- A failure in any course in any session within the 15 Month Option as all courses must be completed in sequence.
- Receipt of an incomplete in more than two (2) enrollment sessions or two (2) incompletes in one (1) semester or grading period.
- If a student is not able to progress in their curriculum plan due to space or course availability.
- Failure to pay tuition/fees by the prescribed deadline unless arrangements are made with the Bursar.
- Failure to complete the degree within 150% of enrollment term.
- The College reserves the right to dismiss any student from the program when that student's health, performance, and/or behavior jeopardize the safety of patients, other students, or College faculty, staff, visitors, and/or guests.

## Appeal of Dismissal

A student who believes their dismissal from the College has occurred in error may appeal the dismissal. The student appeal must be communicated in writing, and the appeal must:

- Be received within 10 working days of receipt of notice of dismissal.
- Include a detailed narrative, along with any supporting documentation, explaining why the student believes the dismissal was made in error.
- Include student's contact information; address, home telephone and cell phone numbers, and email address.

Submit the appeal to the appropriate Dean as outlined below.

#### Reason for Dismissal:

Academic Misconduct Non-Academic Misconduct Reasons outlined in "Dismissal from Bellin College" **Student writes appeal to:** Dean of Student Services Dean of Allied Health Sciences Dean of Allied Health Sciences

## **Student Grievance Procedure**

A grievance is an individual student's claim of unfair and/or non-equitable treatment regarding established policies, procedures, and regulations of Bellin College. A student has a right to express a grievance without prejudice, penalty, or reprisal. The College believes in resolving issues at the lowest level possible. If there is more than one student involved, each student must file a separate grievance. A grievance submitted by a group of students will not be accepted.

To provide students with a direction to voice their concerns, a four (4) step grievance procedure has been established for an individual student to express problems, concerns, or disagreements relative to their experiences at the College. If resolution is obtained in any given step, that resolution is considered final. The procedural steps outlined below need to be completed sequentially within the timeframes outlined in each step.

All aspects of the Student Grievance Procedure are confidential. All parties, student and employees, are required to exercise confidentiality and privacy in relation to all verbal and written communications.

**Conflict of Interest:** In the event of any conflict of interest which will be identified through self-declaration by any of the members regarding a particular potential grievance, the individual will remove him or herself from the Student Grievance process. The Dean of Student Services (or designee) will rule on any challenges regarding conflict of interest.

#### **Step 1: Informal Grievance Process**

The student speaks to the College employee (faculty or staff member) to whom he/she has the concern with about the believed infringement of unfair and/or non-equitable treatment regarding established policies, procedures, and regulations of Bellin College. The concern must be articulated in a manner that is specific to the infringement and/or unaccepted treatment. This is to occur within one (1) business day of the incident. The College employee completes the Student Grievance Procedure Step 1 Form.

Possible following outcome:

- The issue is resolved.
- The issue is unresolved and proceeds to Step 2.

#### **Step 2: Informal Grievance Process**

The student speaks to the administrator (Dean, Vice President, or President/CEO) of the College faculty or staff member. This is to occur within 2 business days following Step 1. Should the student need to identify the appropriate administrator, the student is to consult the <u>employee directories</u> on the College website or inquire to the Advisor and Career Services Coordinator. The student completes the Grievance Procedure Step 2 Form.

The administrator is accountable to:

- Provide the student with the name of the employee's immediate supervisor.
- Notify the involved employee of the situation via a face-to-face meeting.
- Arrange and meet with the involved employee, their supervisor, and the student within 3 business
  days of the notification of the dispute to attempt to resolve the concern at the lowest level
  possible.

Possible following outcome:

- The issue is resolved.
- The issue is unresolved and proceeds to Step 3.

#### **Step 3: Formal Grievance Process:**

If the student is not satisfied with the outcome of Steps 1 & 2, the student may begin a formal grievance process by documenting his/her grievance and the steps that have been taken to resolve the situation. The student completes the Student Grievance Procedure Step 3 Form located in the Advisor and Career Services Coordinator office.

- Student name, address, phone number, and College email address.
- Date of situation/incident.
- Description the situation or incident to include the name of the College employee involved.
- Steps that have been taken to resolve the situation.
- Outcome of prior steps and communications with those involved.
- Expectations for resolution.
- Provision (attachment) of any supporting documentation related to the grievance.
- Student signature and date to certify that the student has reviewed the Student Grievance Procedure, and understands their rights, obligations, and responsibility to the process.

The documented Student Grievance Form is submitted to the involved College employee with copies submitted to the employee's immediate supervisor and within three (3) business days of Step 2. The College employee has three (3) business days from receipt of the formal grievance to respond in writing to the student. A copy of the response should be provided to the employee's immediate supervisor. The

immediate supervisor will provide a copy of all the formal grievance documentation and the employee's response to the student and the appropriate administrator.

Possible following outcome:

- The issue is resolved.
- The issue is unresolved and proceeds to Step 4.

#### Step 4: Formal Grievance Process:

If the formal grievance proceeds to Step 4, the immediate supervisor will provide all documentation to the Dean of Student Services (or designee). The Dean of Student Services (or designee) will meet with the student within three (3) business days of receipt of the formal grievance and explain the steps for a formal grievance process. Then Dean of Student Services (or designee) then meets with the College employee to inform them that a formal grievance has been filed and provides him/her with steps of the formal grievance process. If the Dean of Student Services is the administrator of the employee involved, the Dean will be recused and replace with another administrator of President's Cabinet.

The Dean of Students Services (or designee) convenes and meets with the Student Grievance Ad Hoc Committee within three (3) business days of meeting with the student. This Committee is chaired by the Dean of Student Services (or designee) and members include: appropriate Dean of Academic Affairs, appropriate Program Director, a staff member, a student representative chosen from the Student Senate. If any member(s) of the Committee feels he/she is unable to be impartial they will be recused and replaced with another member.

The student and involved College employee will be given the opportunity to meet with the Committee to expound on their side of the grievance, as the committee may ask for further information or clarification from any or all involved during the meeting. The Student Grievance Ad Hoc Committee has 5 business days to make a determination on the Grievance based on the review of information provided and applicable College policies, procedures, and regulations. The committee shall base its decision upon the record of the meeting and shall not consider matters outside of the record.

The Student Grievance Ad Hoc Committee may determine:

- The Student Grievance is incomplete and request additional information. If additional information is required, the student or involved College employee has 3 business days to provide that information the Ad Hoc Committee.
- The Student Grievance is in favor of the student with the student's proposed resolution.
- The Student Grievance is in favor of the student with a new proposed resolution.
- The Student Grievance is dismissed and provides rationale for their decision.

The Dean of Student Services (or designee) shall provide to the College employee and student involved the outcome of the committee's decision in writing via certified mail and College email. A copy of the letter will be provided to the President/CEO. The outcome shall include:

- Findings of fact in chronological order.
- A statement of the individual student's claim of unfair and/or non-equitable treatment regarding established policies, procedures, and regulations of Bellin College that is alleged to have been violated.
- An opinion on the validity of the grievance.
- Remedial recommendations and final outcome.

An official record of the process and all steps taken to resolve the grievance will be documented and kept in a sealed file in the fireproof cabinet in the President's area.

#### **Appeals Process:**

If the student or College employee believes that the process and procedures outlined in this Policy were not followed, within 10 business days of the date of Student Grievance Ad Hoc Committee's decision an appeal may be submitted to the President/CEO in writing. The Appeals Form is located in the office of the Advisor and Career Services Coordinator.

Within 14 business days of receipt of the appeal, the President/CEO or designee(s) may review and communicate with the student, the College employee, the administrator and supervisor, or the members of the Ad Hoc Committee to determine whether the process and procedures were followed.

The President/CEO may render one of the following decisions:

- Finds evidence of violation of the process and procedures of this Policy, the President/CEO will direct the administrator to review the case anew.
- Finds no evidence of violation of the process and procedures of this Policy; the President/CEO will uphold the ruling of the Grievance Ad Hoc Committee.

The President/CEO will respond, in writing, within 15 business days of receipt of the appeal.

The decision of the President/CEO is final and not appealable.

For more information visit <u>https://www.bellincollege.edu/campus-life/student-services/policies-and-procedures/</u>.

## Orthopaedic Manual Physical Therapy Fellowship Program

## Description and Progression through the Orthopaedic Manual Physical Therapy Fellowship Program

The Bellin College manual physical therapy fellowship program includes well beyond the 1,000 hours of structured study and clinical supervision as required by the APTA and the AAOMPT.

Each fellow has 4 years (48 months) of enrollment to complete the program. Exceptions to the time frame for completion will be extremely rare, but may be granted for special health or personal reasons. The Program Director will make any exceptions on a case-by-case basis with a firm limit of 60 months.

#### **Requirements for Completion of Fellowship**

#### Academic Coursework

 Complete all didactic course work with an average letter grade of 90% or better for all required didactic course work. Lower grades must be remediated, and grades will be adjusted to a 90%+ upon successful remediation.

Academic coursework exceeds the following requirements for manual therapy fellowship programs: 200+ hours theoretical classroom instruction in OMPT and related sciences, instruction in evidence based practice and current best evidence for patients with the most common musculoskeletal conditions, 40+ hours of phone/web-based interaction directly related to the fellow's patient care, and 40+ hours of small group tutorial (includes discussion of patient cases, diagnostics, professional ethics, professional development, or clinical/professional reflection).

 Beginning Jan 1<sup>st</sup>, 2019, OCS certification through the ABPTS is required for admission to the program, and must be maintained through graduation. OCS certification is required at graduation for all fellows. • Membership in good standing with the APTA & the AAOMPT for the duration of the fellowship.

### **Clinical Mentorship**

- Requirements for FiTs who started the program in 2017 or earlier:
  - Complete 440+ clinical mentorship hours and document completely through monthly Form 01 submissions and mentorship forms (Forms 3, 4, & 5). The 440 hours includes 310 non-1:1 clinical mentorship hours and 130 1:1 direct mentor supervision hours with an approved FAAOMPT credentialed therapist per ABPTRFE critera. The 130 1:1 hours may include up to 20 hours of observation, discussion, and interaction with the FAAOMPT mentor. The FiT must serve as the primary clinician responsible for the patient/client's care for at least 110 of the total 130 1:1 clinical mentorship hours.
- Requirements for FiTs who start the program in Jan 2018 or beyond:
  - Complete 1000+ clinical mentorship hours and document completely through monthly Form 01 submissions and mentorship forms (Forms 3, 4, & 5). These hours include 850 patient care clinic hours hours and 150 1:1 direct mentor supervision hours with an approved FAAOMPT credentialed therapist. The 150 1:1 hours may include up to 20 hours of observation, discussion, and interaction with the FAAOMPT mentor. The FiT must serve as the primary clinician responsible for the patient/client's care for at least 130 of the total 150 1:1 clinical mentorship hours.
- Clinical hours must reflect an adequate representation of a demographically/clinically diverse
  population as judged by the Program Director (based on the DASP). Any areas of deficiency must
  be addressed by completing additional work to enhance knowledge and/or experience in deficient
  areas. Fellows should work proactively to plan to obtain experiences in all key areas identified in
  the DASP.

### Supervised/Clinical Lab Hours (160+ hours)

- Complete 160+ clinical/supervised lab hours (includes 100+ hours of instruction in OMPT assessment and treatment techniques with a focus on the spine and 60+ hours of instruction in OMPT assessment and treatment techniques with a focus on the extremities).
- The clinical instructor for clinical lab hours must either: 1) be a Fellow of AAOMPT, or 2) have recognized manual medicine/therapy credentials AND be approved by the Program Director.
- Document via online monthly Form 01 submissions.
- Guidelines provided in Appendix C (Fellowship Clinical / Supervised Lab Hours Guidelines)

#### Manual Therapy Practice Hours (40+)

- Complete 40+ hrs. of manual therapy practice with faculty or peer.
- Document hours in the monthly Form 01 submissions.

#### **Clinical Outcomes Data Submissions**

- Fellows-in-training must satisfactorily track clinical outcomes and provide self-assessment of progress over the duration of the fellowship program.
- Fellows should submit FOTO data for the entire duration of the program to most accurately assess the impact of the program on patient outcomes.
- As a minimum, fellows-in-training must submit at least 4 Quarters of FOTO reporting data <u>and</u> a total of 150 complete patient episodes (this includes an intake, at least 1 status update and discharge data entered).
- In selected circumstances, other clinical outcomes tracking/reporting mechanisms may be used, but only on rare exception is this granted by the Program Director.

## Satisfactorily explain, demonstrate, and teach examination and intervention procedures at any given time throughout the program.

- Serve a teaching assistant role during online management courses and in OMPT Patient Management Framework in teaching practicum courses
- Serve in lab assistant roles as able during clinical lab courses

• View and give presentations in OMPT Patient Management Framework & in Fellow Virtual Rounds

## Complete all course evaluation forms, program evaluation forms, and mentorship experience forms

• Forms submitted and on file with Bellin College

## Complete all required examinations, and pass with a grade of an A- or better unless otherwise noted.

- 1 comprehensive written examination
- 4 technique examinations (pass/fail)
- 1 Live Patient Examination with spinal/axial focus
- 1 Live Patient Examination with peripheral/ appendicular focus

Note: See Appendix D Fellowship Practical Examination Guidelines for details on the Live Patient Examination

#### **Complete a Scholarly Project**

- Fellows entering prior to 2018 may choose one of the following options for scholarly activity: 1) present research (poster or platform) at AAOMPT or comparable professional meeting, 2) publish a manuscript in a peer reviewed scientific journal, or 3) prepare a significant educational module for use in clinic, first-professional program, Bellin College residency, or Bellin College fellowship program.
- Fellows entering in or beyond Jan 2018 must perform a case report or case series. The case report or case series final submission will include: 1) a manuscript formatted for submission to a relevant professional journal, 2) an abstract prepared fro submission to a professional meeting, 3) either a poster for poster presentation or slides prepared for a 15-minute platform presentation at a professional conference.
- Scholarly projects must be approved by the Program Director.
- A summary of the scholarly project must be submitted to the fellow's student files. The summary document (Bellin College Scholarly Project Documentation Form) will include a description of the project, a background literature review, a description of how the FiT used the skills and knowledge gained in the fellowship to perform the project, and reflection on the project (what was learned, how the project helped in professional development, etc.).

### **Generic Abilities**

- Demonstrate superior professional behavioral skills ("Generic Abilities") required to function successfully as a health care professional and leader in manual physical therapy. For example, FiTs are expected to complete their assignments on time throughout the program. FiTs must acknowledge communication from faculty, mentors, Fellow Mentor Leaders, the Program Director, and the program staff within 48 hours of receipt of the communication if physically able to do so. All discussions with colleagues, staff, and faculty must be conducted professionally. All conduct should be in compliance with the APTA's ethical standards.
- Judgment of generic abilities is purely at the discretion of the Program Director, and the Program
  Director may put a FiT in a probationary status or remove a FiT from the program at any time due
  to unfavorable professional behaviors. Breaches in integrity or failing to comply with the APTA's
  ethical standards are grounds for dismissal.
- See Appendix E for more detailed information about expectations for professional behaviors/qualities and potential consequences for breaches in these standards/expectations.

#### **Evidence Based Presentations (2)**

- Provide 2 high quality, in-depth, evidence based presentations on pre-selected topics that complement the content contained in the core curriculum courses sometime during their time in the fellowship program.
- Presentations must be recorded, provided live, or both. Recorded presentations will be hosted in an open access forum on the Internet and/or within Bellin College coursework. Live presentations may be provided for PT colleagues, multi-disciplinary colleagues, or direct consumers.
- Presentation topics, and targeted audiences, must be approved by the Program Director.

## Fellowship Program Academic Planning and Course Descriptions

Upon entering the program, the Bellin College Registrar will provide each FiT access to their academic plan of study via Bellin College's Student Information Software (SIS). The plan of study contains all required coursework as well as planned course dates. Additional links contain transcript information related to Form 01 data submissions, practical examinations, and mentorship form submission. It is the responsibility of the FiT to review the plan of study document regularly and inform the Bellin College Registrar if problems arise or when/if updates/corrections need to be made. All FiTs will automatically be enrolled in the next course in their plan of study if the FiT's tuition fees are up to date.

There are 2 main fellowship plans of study, or "tracks". The first track is designed for individuals who have completed an Orthopaedic or Sports Physical Therapy Residency Program, Postprofessional (Transition) DPT in Musculoskeletal Management (DPT), or a Pre-Fellowship Manual Therapy Certification Program. The second track is designed for individuals who have not been through any of the above mentioned programs. The first fellowship track will take a minimum of 18 months of active enrollment to complete, while the second track will typically take a minimum of 24 months to complete. Fellows-in-Training (FiTs) in both tracks often complete the program in approximately 36 months.

Teaching practicum, lab, and independent study coursework is integrated across the curriculum. See the Course Catalog at the end of this section for a list of courses as they are specifically broken out with credit allocations.

The two tracks are depicted below in Figures 1 and 2, respectively. Note that most Track 2 Fellows (non-Bellin College Orthopaedic/Sports Residency, Manual Therapy Certification, or tDPT Graduates) opt to spread the academic or didactic coursework over a 24-30-month period.

FiTs have up to 4 years (48 months) to complete the program. Exceptions to this period will be rare, but may be granted for up to 60 months for extraordinary or special health or personal reasons or for remedial work, but will be made on a case-by-case basis by the Fellowship Director.

## Fellowship Track 1 (for Orthopaedic Residency, Manual Therapy Certification, or tDPT Graduates)

This fellowship plan of study includes 4 components:

- Bellin College Fellowship Core Teaching Practicum
- Special Topics in Orthopaedic and Manual Physical Therapy
- Mentored Lab and Clinical Practice
- Capstone work (examinations and projects).

This track is designed to be completed as quickly as 18 months.

## Bellin College Fellowship Core:

Core courses include four musculoskeletal management courses (Management of Lower Extremity Disorders, Management of Lumbo-Pelvic Disorders, Management of Cervico-Thoracic Disorders, and Management of Upper Extremity Disorders). The Core courses are delivered in 8-week educational blocks, including 8 weeks of online learning and one live 16-hour lab weekend intensive component.

#### Online teaching assistant roles

Track 1 FiTs act in teaching assistant roles for the online portion of the Core courses in their teaching practicum courses. This role may include, but is not limited to, providing feedback to student online posts, assisting in grading activities, and leading/directing group projects. FiTs also serve as a teaching assistant for the OMPT Patient Management course in a teaching practicum course after completion of the course in a content level role-

#### **Optional Lab Assist Roles**

A FiT will participate in one WI for each of the four content areas, but may return as a lab assistant if desired to acquire experience, gain additional feedback on teaching skills, and to acquire supervised/clinical lab hours (160+ required) and/or manual therapy practice hours (40+ required). A FiT may serve in a lab assistant role if prepared to do so and if agreed upon by the respective WI lead faculty member. If the course size justifies a lab assistant, then Bellin College may partially or fully support travel and per-diem costs. If no additional lab assistants are needed, then the FiT is responsible for all travel costs, as well as any lodging and per-diem expenses.

Finally, FiT may give one of their required evidence based presentations in a live format at a live lab weekend intensive course. If a FiT would like to give a presentation at a weekend intensive course, he/she must coordinate with the weekend faculty to ensure proper timing and placement within the course.

## Special Topics in Orthopaedic and Manual Physical Therapy:

The Special Topics in Orthopaedic and Manual Physical Therapy category includes the Orthopaedic Manual Physical Therapy (OMPT) series, as well as DSc 611 Evidence Based Physical Therapy Practice II.

The OMPT series includes the following courses:

- OMPT Introduction to OMPT and Professional Socialization
- OMPT Mechanisms of Manual Therapy
- OMPT Pain Sciences and Psychosocial Implications in Musculoskeletal Care
- OMPT Writing Case Reports and Case Series
- OMPT Patient Management Framework/Advanced Clinical Decision Making
- OMPT Patient Management Framework/Advanced Clinical Decision Making Teaching Practicum

"Live" virtual meetings are used weekly throughout the OMPT courses to discuss course content and patient cases. The live virtual sessions typically occur in the evenings (typically on Tues or Wed for approximately 2-3 hours). Currently, the modules that utilize evening virtual sessions are the "OMPT Patient Management Framework/ Clinical Decision Making" module (typically 8-12 sessions during the 4-month course), The OMPT Patient Management Framework/Advanced Clilnical Decision Making – Teaching Practicum course, and the "OMPT Introduction and Professional Socialization" course (typically 1-2 virtual conferencing meetings).

The OMPT Patient Management Framework / Advanced Clinical Decision Making course includes one fellowship lab weekend as part of the course, which typically occurs in Aug/Sept/Oct or Jan/Feb/Mar.

The DSC 611 Evidence Based Physical Therapy Practice II is a self-paced, tutorial format course that requires roughly four weeks to complete. It should be completed no later than 6 months from the beginning of the fellowship program.

## Mentored Lab and Clinical Practice

Fellow Virtual Rounds, Mentored Clinical Practice hours (1:1 and non-1:1), Clinical/Supervised Lab hours, Manual Therapy Practice Hours, and Outcomes Tracking are included in this component of the program. Fellows enroll in Virtual Rounds (FVR) DSc 767after completion of their clinical decision making module of the OMPT course. This is a 4-month intense, advanced clinical practice experience in manual physical therapy focusing on advanced decision-making regarding clinical care in a collaborative virtual environment. FiTs post and present patient cases and provide/seek feedback to/from their peers and fellowship faculty. The focus of FVR is to further develop each FiT's clinical decision-making, EBP, and teaching skills through providing high quality, evidence-focused feedback to other fellows on presented cases, as well as through case presentation from their own patient care. The virtual sessions typically last 2-3 hours, and occur 3-4 times monthly during the course. Additional clinical case discussion, professional ethics, professional development, and clinical/professional reflection discussions are carried out weekly in an active online environment. This course includes one lab intensive ("fellows only lab weekend", or FOWI) which typically occurs in the Jan/Feb or Jul/Aug/Sep timeframe. The date will vary based on the timing of the annual national meetings and WI dates.

As mentioned previously, mentored practice is conducted over the course of the fellowship program, and this includes 130-150 1:1 mentorship hours with a clinical mentor who is also a Fellow of the AAOMPT (FAAOMPT) as well as 850 patient care hours in orthopaedic manual physical therapy practice. FiTs who started the program in 2017 or earlier are required to complete 130 1:1 mentorship hours, while those starting in 2018 or later must complete 150 1:1 mentorship hours. See Appendix A for more details on the mentorship process for fellows-in-training.

FiTs should keep a detailed mentorship hours log throughout the program as a "back up" copy of their mentorship hours. The log should include dates of mentorship, the number of hours where the FiT was in the lead of care vs observing the FAAOMPT mentor treat, the location of mentorship, types of patient seen, and comments on key areas of growth or areas to work on.

As mentioned previously, supervised/clinical Lab hours will be conducted under the oversight of a Fellow of the AAOMPT, or by a Program Director approved instructor with recognized manual medicine credentials. These hours may be conducted as soon as the fellow-in-training is accepted into the fellowship program. Lab hours will address OMPT assessment and treatment techniques, with a minimum of 100+ hours focused on the spine, and 60+ hours focused on the extremities. Fellows may accomplish these hours in a variety of ways:

- 32 lab hours with a focus on the extremities and 32 lab hours with a focus on the spine through attendance at the standard weekend intensive courses (mandatory)
- 2 Fellows Only Lab Weekends (FOWIs) as part of the OMPT Patient Management Framework and the Fellow Virtual Rounds courses, therefore acquiring 32- 40 additional lab hours (mandatory)
- Additional Bellin College continuing education courses
- Other Program Director approved manual therapy/medicine courses
- Any pre-conference lab courses provided at the Annual AAOMPT Conference are automatically approved.

Petitions to have courses/lab hours accepted by the Program Director must be submitted in writing/via email. For further guidelines, see Appendix C - Fellowship Clinical / Supervised Lab Hours Guidelines. FiTs should keep copies of their supervised/clinical lab hour log to support Form 01 submissions as needed.

All fellows must maintain a log of 40+ hours of manual therapy practice with faculty, FAAOMPT mentors, other fellows-in-training, or PT colleagues. These hours will be submitted monthly in the online Form 01 (via a web based survey tool). These hours are *in addition to* the required 160 supervised/clinical lab hours. FiTs should keep copies of their practice log to support Form 01 submissions as needed.

Outcomes tracking is conducted via collaboration with FOTO (http://www.fotoinc.com/). Fellows enroll into the FOTO system within the first 3 months of the program, and track clinical outcomes until their submission requirements are completed (>/= four quarters, and 150+ complete patient episodes).

Graduation requirements related to FOTO/outcomes tracking are detailed in Section 7.4.2.1, section 7 (Summary of Requirements for Completion of the Bellin College Orthopaedic Manual Physical Therapy Fellowship Program).

## **Capstone Examination and Projects**

Each FiT should coordinate with the Program Director to take the final comprehensive written examination *within 60 days of completing all academic coursework*.

The techniques examinations and live patient examinations will be administered by any Bellin College Faculty, including Fellow Mentors. Techniques exams are typically administered at Bellin College weekend intensive courses, but may also be conducted at other Bellin College events/gatherings (Manipalooza, other Bellin College CE courses, annual session at AAOMPT, etc.) or other setting as approved by the Director. The live patient examinations should be accomplished early enough to allow for re-testing, if needed, before the 48-month time period for completion of requirements expires. Faculty administering these examinations will follow standard procedures for testing as outlined on the Techniques Exam scoring document (includes instructions for testing and rubrics for grading) and will provide feedback and scoring of the examination on standard Bellin College documentation/forms. For detailed information on the live patient examination, see Appendix D Fellowship Practical Examination Guidelines.

Finally, fellows should submit completion of their requirements for graduation during the program to the Registrar on a Form 08 document approximately 3 months prior to projected graduation.

FiTs starting the program in 2018 and beyond will track their program progression, outcomes data and reflections, goals progression and updates, and plan for completion of the program (timeline) on a Google Document that is shared with the Registrar, Program Director, Fellow Mentor Leader, and FAAOMPT Mentor(s) to allow for more seamless communication between all individuals who are working towards the success and growth of the FiT.

## Fellowship Track 2

This fellowship plan of study includes four components:

- Bellin College Fellowship Core
- Special Topics in Orthopaedic and Manual Physical Therapy
- Mentored Lab and Clinical Practice
- Capstone work (examinations and projects).

FiTs enter their course of study by completing DSc 610 Evidence Based Physical Therapy Practice I before starting any other coursework, and DSc 611 Evidence Based Physical Therapy Practice II within the first 6 months of the academic portion of the curriculum. These two courses provide an evidence-based foundation for the Bellin College Core and Special Topics in Orthopaedic and Manual Physical Therapy courses.

## In the following sections, only those aspects of the program that are different than for Track 1 fellows-in-training will be described.

## Bellin College Fellowship Core:

Track 2 FiTs will go through the Core management courses initially in a "content" then will repeat the courses in a teaching assistant/mentorship role in the teaching practicum courses. In special circumstances, the Program Director may make exceptions to allow a fellow to complete both roles simultaneously.

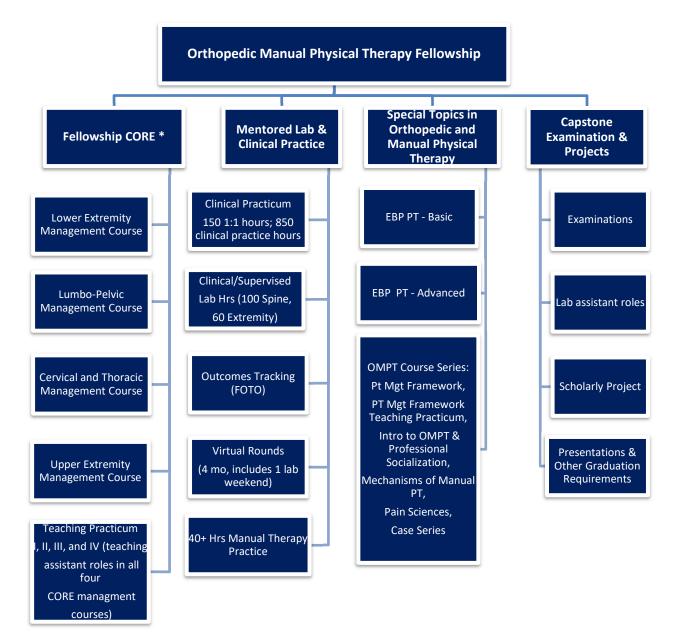
## **Special Topics in Orthopaedic and Manual Physical Therapy**

This component of the Fellowship is identical to that of Track 1 FiTs except for the addition of the Bellin College DSc 610 Evidence-Based Physical Therapy Practice I.

## Mentored Lab and Clinical Practice

This portion of the program is the same as for Track 1 fellows.

Capstone Examination and Projects This portion of the program is the same as for Track 1 fellows.



## Bellin College Orthopaedic Manual Physical Therapy Fellowship

\*Please Note: Fellows in Track 2 will take CORE courses the 1<sup>st</sup> time to gain content knowledge expertise ("content role"). CORE courses are repeated in a teaching practicum roles (noted above as "T/L role") to develop teaching and leadership skills. Fellows in Track 1 will take all CORE courses in the T/L role (teaching practicum courses). See course descriptions for more detail.

# Bellin College Fellowship Timeframe Track 1

Fellowship Track 1 (Ortho Residency, tDPT, or MTC Graduates): Winter Start Example (course order remains with other start dates)					
	Year 1				
Jan/Feb — Evidence-based Physical Therapy Practice (Advanced) — Management of Lumbopelvic Disorders – Teaching Practicum (Plus WI)					
Mar/Apr	<ul> <li>Management of Lower Extremity Disorders - Teaching Practicum (Plus WI)</li> </ul>				
May/Jun	ay/Jun – Mechanisms of Orthopaedic Manual Physical Therapy — OMPT -Pain Sciences & Psychosocial Implications in Musculoskeletal Care				
Jul-Oct – OMPT - Patient Management Framework/Adv Clinical Decision Making (Plus FOWI)					
Nov/Dec — OMPT - Introduction & Professional Socialization — OMPT- Case Reports/Series					
	Year 2				
Jan - May	<ul> <li>OMPT - Patient Management Framework – TA Role</li> </ul>				
Jan/Feb	— Management of Cervical and Thoracic Disorders - Teaching Practicum (Plus WI)				
Mar/Apr	<ul> <li>Management of Upper Extremity Disorders- Teaching Practicum (Plus WI)</li> </ul>				
Jul-Oct	— Fellow Virtual Rounds				
Graduation	<ul> <li>Graduation will occur when all fellowship requirements are complete. At this point, the FiT will submit necessary paperwork to the AAOMPT for FAAOMPT acceptance.</li> </ul>				

# Bellin College Fellowship Timeframe Track 2

Fellowship Track 2 (No Prior Programs): Winter Start Example (course order remains with other start dates)				
Year 1				
Prior to 1st course	— Evidence-based Physical Therapy Practice (Basic)			
Jan/Feb	<ul> <li>Management of Lumbopelvic Disorders - Content Role (Plus WI)</li> </ul>			
Mar/Apr	<ul> <li>Management of Lower Extremity Disorders - Content Role (Plus WI)</li> </ul>			
May/Jun	<ul> <li>Evidence-based Physical Therapy Practice (Advanced)</li> <li>OMPT -Pain Sciences &amp; Psychosocial Implications in Musculoskeletal Care</li> </ul>			
Jul-Oct	<ul> <li>OMPT Patient Management Framework/Adv Clinical Decision Making (Plus FOWI)</li> </ul>			
Jul/Aug	<ul> <li>Management of Lumbopelvic Disorders - Teaching Practicum (Plus WI)</li> </ul>			
Sep/Oct	<ul> <li>Management of Lower Extremity Disorders - Teaching Practicum (Plus WI)</li> </ul>			
Nov/Dec	Nov/Dec — OMPT - Introduction & Professional Socialization			
	Year 2			
Jan-May	<ul> <li>OMPT Patient Management Framework/Adv Clinical Decision Making (TA Role – online/virtual sessions)</li> </ul>			
Jan/Feb — Management of Cervical and Thoracic Disorders - Content Role (Plus				
Mar/Apr	<ul> <li>Management of Upper Extremity Disorders - Content Role (Plus WI)</li> </ul>			
Мау	— Mechanisms of Orthopaedic Manual Physical Therapy			
Jul-Oct	<ul> <li>Fellow Virtual Rounds (Prerequisite: Bellin College F109 OMPT) (Plus FOWI)</li> </ul>			
Jul/Aug	<ul> <li>Management of Cervical and Thoracic Disorders - Teaching Practicum (Plus WI)</li> </ul>			
Sept/Oct	— Management of Upper Extremity Disorders - Teaching Practicum (Plus WI)			
Nov/Dec	— OMPT- Case Reports/Series			
Graduation	<ul> <li>Graduation will occur when all fellowship requirements are complete. At this point, the FiT will submit necessary paperwork to the AAOMPT for FAAOMPT acceptance.</li> </ul>			

## Fellowship Academic Plan of Study

Students register for courses per their academic Plan of Study. Students must follow prerequisite guidelines for order of courses to be completed. Course selection special requests will be reviewed by the Program Director and addressed based on a student's individual circumstances.

Course #	Course Title	Credits
DSC 610	Evidence-Based Physical Therapy Practice I	1
DSC 611	Evidence-Based Physical Therapy Practice II	1
DSC 650	Management of Lumbopelvic Disorders	4
DSC 660 WI	Management of Lumbopelvic Disorders - Weekend Intensive	1
DSC 652 TA	Teaching Practicum 1 - Management of Lumbopelvic Disorders	1
DSC 651	Management of Lower Extremity Disorders	4
DSC 661 WI	Management of Lower Extremity Disorders- Weekend Intensive	1
DSC 654 TA	Teaching Practicum 2 Management of Lower Extremity Disorders	1
DSC 653	Management of Cervical and Thoracic Disorders	4
DSC 663 WI	Management of Cervical and Thoracic Disorders - Weekend Intensive	1
DSC 656 TA	Teaching Practicum 3- Management of Cervical and Thoracic Disorders	1
DSC 655	Management of Upper Extremity Disorders	4
DSC 665 WI	Management of Upper Extremity Disorders - Weekend Intensive	1
DSC 658 TA	DSC 658 TA Teaching Practicum 4 - Management of Upper Extremity Disorders	
DSC 612	Introduction to OMPT and Professional Socialization	1
DSC 613	Mechanisms of Manual Physical Therapy	1
DSC 621 Pain Sciences and Psychosocial Implications in Musculoskeletal Care		2
DSC 641	OMPT Patient Management Framework / Advanced Clinical Decision Making	6
DSC 642 TA	Teaching Practicum 5 - OMPT Patient Management Framework /	
DSC 640	Writing Case Reports & Case Series	1
DSC 767	Fellowship Virtual Rounds	6
DSC 799	Fellowship Capstone Examinations	0
DSC 690	Independent Study I	1
DSC 790	Independent Study II	1
DSC 728	Fellowship Scholarly Project	1
DSC 769	Fellowship Mentored Clinical Practice	6
DSC 667 WI	Advanced Manual Therapy Technique I	1
DSC 767 WI	Advanced Manual Therapy Technique II	1
	Total =	55

## BELLIN COLLEGE Doctorate of Science in Physical Therapy Curriculum Plan

Year	Semester	Months	Evidence Focused Online Courses & Teaching Praticums	Clinical Reasoning Courses & Mentoring	Lab Classes	Independent Study, Scholarly Work, Capstone	Credits
	Sorina Session 1	1 Jan/Feb	DSC 610 Evidence-Based Physical Therapy Practice I (1 Cr)		DSC 660 WI Management of Lumbopelvic Disorders - Weekend Intensive (1 Cr)		e
	apring account i	Gammen	DSC 650 Management of Lumbope/vic Disorders (4 Cr)		Discriber vir management of Europpenic Discribers - viveekend mensive (1 Cr)		0
	Soring Session 2	Mar/Apr	DSC 611 Evidence-Based Physical Therapy Practice II (1 Cr)		DSC 661 WI Management of Lower Extremity Disorders- Weekend Intensive (1 Cr)		e
	opring dession 2	INIGE/PAPI	DSC 651 Management of Lower Extremity Disorders (4 Cr)		Dioc don with wanagement of Lower Extremity Disorders- Weekend intensive (1 Ci)		Ů
1	Summer Session 1	May/Jun	DSC 621 Pain Sciences and Psychosocial Implications in Musculoskeletal Care (2 Cr)				2
1	Summer Session 2	July/Aug	DSC 652 TA Teaching Practicum 1 - Management of Lumbopelvic Disorders (1 Cr)	DSC 641 OMPT Patient Management Framework / Advanced Clinical	DSC 667 W1 Advanced Manual Therapy Technique I (1 Cr)		2
1	Fall Session 1	Sept/Oct	DSC 654 TA Teaching Practicum 2 Management of Lower Extremity Disorders (1 Cr)	Decision Making (6 Cr)			7
1	Fall Session 2	Nev/Dec	DSC 612 Introduction to OMPT and Professional Socialization (1 Cr)			DSC 690 Independent Study I (1 Cr)	2
2	Spring Session 1	dan/Feb	DSC 663 Management of Cervical and Thoracic Disorders (4 Cr)	DSC 642 TA Teaching Practicum 5- OMPT Patient Management	DSC 663 WI Management of Cervical and Thoracic Disorders - Weekend Intensive (1 Cr)		5
2	Spring Session 2	Mar/Apr	DSC 655 Management of Upper Extremity Disorders (4 Cr)	Framework / Advanced Clinical Decision Making (1 Cr)	DSC 665WI Management of Upper Extremity Disorders - Weekend Intensive (1 Cr)		5
2	Summer Session 1	May/Jun	DSC 613 Mechanisms of Manual Physical Therapy (1 Cr)				1
2	Summer Session 2 Jul/Aug	Jul/Aug	DSC 656 TA Teaching Practicum 3- Management of Cervical and Thoracic Disorders (1 Cr)	DSC 767 Fellowship Virtual Rounds (6 Cr)	DSC 767 W1 Advanced Manual Therapy Technique II (1 Cr)		2
2	Fall Session 1	Sept/Oct	DSC 658 TA Teaching Practicum 4 - Management of Upper Extremity Disorders (1 Cr)				8
2	Fall Session 2	Nov/Dec	DSC 640 Writing Case Reports & Case Series (1 Cr)			DSC 790 Independent Study II (1 Ci)	2
3	Spring Session 1	Jan/Feb				DSC 728 Fellowship Scholarly Project (1 Cr)	1
3	Spring Session 2	Mar/Apr		DSC 769 Fellowship Mentored Clinical Practice (6 Cr)		DSC 799 Fellowship Capstone Examinations (capstone credit)	6

## ►DScPT Academic Planning and Course Descriptions

## DScPT

Bellin College DScPT program is committed to developing evidence based physical therapist practitioners and clinician scientists. Graduates will be critical thinkers, reflective, empathetic, and lifelong learners. Lastly, graduates will become highly skilled autonomous practitioners who are prepared to become leaders in the areas of teaching as well as participants and contributors to clinical research.

The Doctorate of Science in Physical Therapy (DScPT) track is an 80 credit program. Students complete core coursework involving orthopaedic manual physical therapy followed by specialty courses that focus on curriculum and leadership.

## **College Residency Requirement**

A student who transfers credits into the DScPT program must complete a minimum of 25 DScPT credits for through Bellin College. A credit evaluation will completed to assess acceptance for transfer of fellowship credits obtained outside of Bellin College.

## **Graduation Requirements-DScPT**

A Doctorate of Science in Physical Therapy degree is awarded to a student who has completed the program of study and:

- Successful completion of 80 credits
- Achieved a cumulative GPA of 3.5 or higher.
- Completed all courses with a grade of "AB" or higher.
- Successfully completed the Scholarly Project.
- Submitted Intent to Graduate Form (available on the College web site).
- Completed the above within seven (7) years from start in the DScPT program.

## **Course Delivery**

Courses are delivered in an 8-week session or 15-week semesters and must be completed in the session/semesters they were started in. Courses are delivered online (web-based) and via compressed scheduling.

## **DScPT Academic Plan of Study**

Students register for courses per their academic Plan of Study. Students must follow prerequisite guidelines for order of courses to be completed. Course selection special requests will be reviewed by the DScPT Program Director and addressed based on a student's individual circumstances.

Course #	Course Title		Credits
DSC 800	Curriculum Development		3
DSC 810	Curriculum Assessment and Evaluation		3
DSC 680	Leadership in Higher Education		3
DSC 751	Biostatistics 1		3
DSC 752	Biostatistics 2		3
DSC 901	Research Methodologies and Doctoral Project I		2
DSC 902	Research Methodologies and Doctoral Project II		2
DSC 903	Research Methodologies and Doctoral Project III		2
DSC 904	Research Methodologies and Doctoral Project IV		2
DSC 905	Research Methodologies and Doctoral Project V		2
		Total =	25

### BELLIN COLLEGE Doctorate of Science in Physical Therapy Curriculum Plan

DSo	cPT Only Course	work	Biostats Courses	Dissertation Coursework	Teaching & Leadership Coursework	
3	Summer Session 1	May/Jun			DSC 680 Leadership in Higher Education (3 Cr)	3
3	Summer Session 2	Jul/Aug			DSC 800 Curriculum Development (3 Cr)	3
3	Fall Session 1	Sept/Oct	DSC 751 Biostatistics 1 (2 Cr)	DSC 901 Dissertation I (2 Cr)		
3	Fall Session 2	Nov/Dec		200 301 2/336Halloff (2 01)		4
4	Spring Session 1	Jan/Feb	DSC 752 Biostatis 2 (2 Cr)	DSC 902 Dissertation II (2 Cr)		
4	Spring Session 2	Mar/Apr		DBC 302 Dissertation (2 Cr)		4
4	Summer Session 1	May/Jun			DSC 810 Curriculum Assessment and Evaluation (3 Cr)	3
4	Summer Session 2	Jul/Aug				
4	Fall Session 1	Sept/Oct		DSC 903 Dissertation III (2 Cr)		
4	Fall Session 2	Nov/Dec		Date and Dissertation III (2 CI)		2
4	Spring Session 1	Jam/Feb		DSC 904 Dissertation IV (2 Cr)		
5	Spring Session 2	Mar/Apr		DSC 904 Dissertation (2 G)		2
5	Summer Session 1	May/Jun				
5	Summer Session 2	Jul/Aug				
5	Fall Session 1	Sept/Oct		DSC 905 Dissertation V (2 Cr)		
5	Fall Session 2	Nov/Dec		Date and Dissertation V (2 Cr)		2

### **COURSE DESCRIPTIONS**

### DSC 610 EVIDENCE-BASED PRACTICE I - 1 credit

This course is designed to improve the participant's understanding and use of evidence-based practice and its impact on physical therapy. Participants learn how to ask clinically relevant questions, find and interpret the evidence, and apply this evidence to clinical practice. The goal of this course is to develop consumers and users of clinical research that will improve the quality and impact of the participant's clinical practice on the patients they serve.

### DSC 611 EVIDENCE-BASED PRACTICE II – 1 credit

This course builds on the foundational content of EBP I and covers key concepts related to research design and statistics. Emphasis is on practical interpretation, understanding, and integration in the clinical reasoning process.

### DSC 612 INTRODUCTION TO OMPT AND PROFESSIONAL SOCIALIZATION - 1 credit

This course provides an introduction into what it means to be a manual physical therapy fellow. A variety of professional topics are discussed including the history of manual therapy, professional organization(s), and current and emerging issues.

### DSC 613 MECHAMISMS OF MANUAL PHYSICAL THERAPY - 1 credit

This course provides an update on the biomechanical and neurophysiologic mechanisms of manual therapy. Special attention is directed towards recent research investigating manual therapy's effect on pain. Students interact with leading researchers in this field.

# DSC 621 PAIN SCIENCES & PSYCHOSOCIAL IMPLICATIONS IN MUSCULOSKELETAL CARE - 2 credits

This course provides an in-depth review of the current concepts in pain sciences. The course challenges presuppositions and provides evidence-based insight into the current myths and gross misunderstandings of pain.

### DSC 640 WRITING CASE REPORTS & CASE SERIES – 1 credit

This course reviews the steps involved in completing a case report suitable for publication, including examination of foundational material and critique of the initial submission of a published case report. Students complete the National Institutes of Health (NIH) Office of Extramural Research online training program titled "Protecting Human Research Participants."

# DSC 641 OMPT PATIENT MANAGEMENT FRAMEWORK/ADVANCED CLINICAL DECISION MAKING – 6 credits

This course is designed to teach an advanced patient management framework by combining the interpretation of basic science knowledge with an evidence-informed clinical reasoning approach. Students develop dynamic critical thinking skills needed to complete a high-quality differential evaluation, resulting in identification of key interventions to manage patients safely and efficiently. This course highlights important aspects of the examination, such as the use of effective communication strategies, the test/retest approach to evaluate the effectiveness of each intervention, and selection of targeted home exercise and educational interventions.

### DSC 642 TA TEACHING PRACTICUM 5 - OMPT PATIENT MANAGEMENT FRAMEWORK/ADVANCED CLINICAL DECISION MAKING – 1 credit

The purpose of this course is to provide mentored teaching experience in multiple learning environments. Students develop and apply skills through continued clinical application in a supportive teaching environment.

### DSC 650 MANAGEMENT OF LUMBOPELVIC DISORDERS - 4 credits

This course provides an in-depth review of current concepts and published evidence related to the clinical examination, evaluation, diagnosis, and interventions for patients with disorders of the lumbopelvic spine and hip. Evidence based classification systems, diagnosis, and outcomes tools, are addressed.

### DSC 651 MANAGEMENT OF LOWER EXTREMITY DISORDERS - 4 credits

This course integrates manual therapy and exercise intervention techniques in the management of individuals with lower extremities musculoskeletal disorders. The course includes discussion of radiology rules for acute lower extremity injuries as well as diagnostic information for systemic and vascular disorders affecting the lower extremities. An intensive laboratory weekend is included.

### DSC 652 TA TEACHING PRACTICUM 1 – MANAGEMENT OF LUMBOPELVIC DISORDERS – 1 credit

In this course students function as teaching assistants for students enrolled in ORPT 6510 Management of Lumbopelvic Disorders. Under faculty oversight, students participate in course oversight, instruction, student evaluation and mentorship.

### DSC 653 MANAGEMENT OF CERVICAL AND THORACIC DISORDERS - 4 credits

This course integrates manipulative intervention techniques in the management of individuals with cervical-thoracic spine and ribcage disorders. It includes the application of diagnostic imaging as a component of the diagnostic process. Classification systems and outcomes assessment tools, within the framework of evidence-based practice are included. An intensive laboratory weekend is included.

# DSC 654 TA TEACHING PRACTICUM 2 – MANAGEMENT OF LOWER EXTREMITY DISORDERS – 1 credit

In this course, students function as teaching assistants for students enrolled in ORPT 6520 Management of Lower Extremity Disorders. Under faculty guidance, students participate in course oversight, instruction, student evaluation and mentorship.

### DSC 655 MANAGEMENT OF UPPER EXTREMITY DISORDERS - 4 credits

This course integrates manipulative intervention techniques in the management of individuals with upper extremity disorders and dysfunction. Classification systems and outcomes assessment tools, within the framework of evidence-based practice, are included. Diagnostic information for the medical screening of systemic and vascular disorders is discussed. An intensive laboratory weekend is included.

# DSC 656 TA TEACHING PRACTICUM 3 – MANAGEMENT OF CERVICAL AND THORACIC DISORDERS – 1 credit

In this course students function as teaching assistants for students enrolled in ORPT 6530 Management of Cervical and Thoracic Disorders. Under faculty guidance, students participate in course oversight, instruction, student evaluation and mentorship.

# DSC 658 TA TEACHING PRACTICUM 4 – MANAGEMENT OF UPPER EXTREMITY DISORDERS – 1 credit

In this course, students function as teaching assistants for students enrolled in ORPT 6540 Management of Upper Extremity Disorders. Under faculty guidance, students participate in course oversight, instruction, student evaluation and mentorship.

### DSC 660 WI MANAGEMENT OF LUMBOPELVIC DISORDERS - 1 credit

This weekend intensive lab focuses on the clinical reasoning and hands-on skill development necessary to effectively integrate manual physical therapy examination and intervention techniques into the clinical management. Classification systems, outcomes assessment tools, and the application of diagnostic imaging are discussed as components of the diagnostic process within the framework of evidence-based practice.

### DSC 661 WI MANAGEMENT OF LOWER EXTREMITY DISORDERS - 1 credit

This weekend intensive lab focuses on the clinical reasoning and hands-on skill development necessary to effectively integrate manual physical therapy examination and intervention techniques into the clinical management. Classification systems, outcomes assessment tools, and the application of diagnostic imaging rules for acute lower extremity injuries are discussed as components of the diagnostic process within the framework of evidence-based practice.

### DSC 663 WI MANAGEMENT OF CERVICAL AND THORACIC DISORDERS - 1 credit

This weekend intensive lab focuses on the clinical reasoning and hands-on skill development necessary to effectively integrate manual physical therapy examination and intervention techniques into the clinical management. Classification systems, outcomes assessment tools, and the application of diagnostic imaging are discussed as components of the diagnostic process within the framework of evidence-based practice.

### DSC 665 WI MANAGEMENT OF UPPER EXTREMITY DISORDERS - 1 credit

This weekend intensive lab focuses on the clinical reasoning and hands-on skill development to effectively integrate manual physical therapy examination and intervention techniques into clinical management. Classification systems, outcomes assessment tools, and the application of diagnostic imaging are discussed as components of the diagnostic process within the framework of evidence-based practice.

### DSC 667 WI ADVANCED MANUAL THERAPY TECHNIQUE I – 1 credit

This weekend intensive lab focuses on the advanced examination/interventions targeting the upper quarter, including mechanical diagnosis and therapy concepts, adverse neural dynamics, mobilization/manipulation techniques, and manual resisted exercise. The class includes discussion on optimizing the patient history, key differentiation testing to use in the physical exam, and strategies to select optimal intervention procedures.

### DSC 680 LEADERSHIP IN HIGHER EDUCATION - 3 credits

This course provides graduates with the skills necessary to be a visionary leader by improving the performance of colleges and universities by using active research to drive continuous improvement, collaborative decision making, and strategic planning. Graduates will address contemporary and future educational issues impacting higher education through the application of effective change theory.

### DSC 690 INDEPENDENT STUDY I – 1 credit

This course includes the preparation of two up-to-date, well-researched, evidence-focused presentations on pre-approved topics. These presentations must be: 1) recorded for posting in an open access forum, 2) presented live at weekend intensive or other approved post-professional continuing education course, 3) presented to a multi-disciplinary audience, 4) presented to a direct consumer audience, or 5) presented to another pre-approved audience.

### DSC 728 FELLOWSHIP SCHOLARLY PROJECT – 1 credit

This course requires the student to complete a patient case report or case series, as well as a poster presentation and oral presentation of the case.

### DSC 752 BIOSTATISTICS 1 – 3 credits

This course will provide a foundation for understanding biostatistics, and basic proficiency with running basic bio statistical models. The course will cover such topics as simple descriptive statistics, basic probability concepts, probability distributions, sampling distributions, t-tests, and confidence intervals.

### DSC 753 BIOSTATISTICS 2 - 3 credits

The purpose of this course is to build upon the topics of Biostatistics 1. This course will cover such topics as correlation, analysis of covariance, post-hoc testing, factorial designs, simple linear regression, and reliability analyses. Students will present doctoral research questions, hypotheses, methods, and data analysis plans for critique and discussion.

### DSC 767 FELLOWSHIP VIRTUAL ROUNDS - 6 credits

This course focuses on advanced clinical decision-making regarding clinical care in a collaborative virtual environment. Synchronous live virtual case tutorial sessions are typically conducted in the evenings (usually 4 sessions monthly) for approximately 2-3 hours. This course includes one lab intensive weekend for students.

### DSC 767 WI ADVANCED MANUAL THERAPY TECHNIQUE II - 1 credit

This weekend intensive lab focuses on the advanced examination/interventions targeting the lower quarter, including mechanical diagnosis and therapy concepts, adverse neural dynamics, mobilization/manipulation techniques, and manual resisted exercise. The course includes discussion on optimizing the patient history, key differentiation testing to use in the physical exam, and strategies to select optimal intervention procedures.

### DSC 769 FELLOWSHIP MENTORED CLINICAL PRACTICE – 6 credits

This Clinical Practicum is an advanced clinical practice experience in orthopaedic manual physical therapy in which students are mentored in both live 1:1 clinical practice hours and orthopaedic manual physical therapy clinical practice hours based on current American Physical Therapy Association requirements. Emphasis is placed on advanced clinical decision-making, outcomes evaluation and autonomous patient management.

### DSC 790 INDEPENDENT STUDY II – 1 credit

This independent study course includes the completion of self-paced coursework focused on the foundations of manual physical therapy practice and the standardized manual physical therapy examination. Enrollment in this course starts upon entering the fellowship program and is completed once the student has successfully completed all learning modules included in this course.

### DSC 799 FELLOWSHIP PROGRAM CAPSTONE EXAMINATIONS - Capstone credit

This capstone course consists of the final examination process. Students complete a final comprehensive written examination that focuses on medical screening, clinical reasoning, decision-making, and the application of manual physical therapy concepts. Students complete 4 regional technique examinations to demonstrate mastery of selected manual physical therapy interventions. Finally, 2 live patient examinations are completed, one with a spinal/axial focus and another with a peripheral/appendicular focus.

### DSC 800 CURRICULUM DEVELOPMENT – 3 credits

This course is an examination of the theoretical constructs of curriculum. An understanding of the development and implementation of curriculum will be explored by examining the philosophical and theoretical perspectives. An in-depth analysis of design models will be conducted and applied to the assessment of learner outcomes. Development of curriculum will systemically address technology integration, evidenced-based practices, innovative and collaborative learning experiences, and the impact of social, political, psychological, and economic factors.

### DSC 810 CURRICULUM ASSESSMENT AND EVALUATION - 3 credits

This course is an exploration of principles and methods of effective program evaluation including planning, instrumentation, data collection and analysis, and reporting. Students will develop and evaluate formative and summative assessments of simple and complex student knowledge, beliefs, and/or attitudes aligned with classroom activities associated with a subject-matter domain and a particular target audience. Students will learn how to design assessments that are carefully aligned with educational objectives.

### DSC 901 RESEARCH METHODOLOGIES AND DOCTORAL PROJECT I - 2 credits

This course will provide a foundation for the principles of evidence based-practice and research design so that the student may immediately integrate scientific knowledge with practice and complete a clinically relevant research proposal. This course is the first phase of the dissertation process and is designed to prepare doctoral students to develop and defend a research project.

### DSC 902 RESEARCH METHODOLOGIES AND DOCTORAL PROJECT II - 2 credits

This course will familiarize students with the steps required to successfully complete a systematic review. This process will set the standard for appraising and evaluating scientific literature. Students will also continue to work on their group research project.

### DSC 903 RESEARCH METHODOLOGIES AND DOCTORAL PROJECT III - 2 credits

This course is the third phase of the major capstone research and writing project designed to demonstrate program mastery and to make an original contribution to the professional field. Students will complete a systematic review and continue working on their group research project.

### DSC 904 RESEARCH METHODOLOGIES AND DOCTORAL PROJECT IV – 2 credits

This course will be largely project-dependent, but will include data preparation and cleaning, data analysis, and creation of a manuscript draft. Students will analyze their research data and write the draft of the dissertation.

### DSC 905 RESEARCH METHODOLOGIES AND DOCTORAL PROJECT V – 2 credits

The goal of this course is to finalize the research project, have a finalized draft that can be submitted for publication in a peer reviewed journal, and independently defend a presentation of their research before a scientific panel. Students will also learn about methods to disseminate research findings, to include modern forms of press release and social media.

Orthopaedic Physical Therapy Fellowship Program Appendices

### 8.1 Appendix A Bellin College Clinical Mentorship Requirements and Considerations for Fellows-In-Training

### **Clinical Mentor Requirements for Fellow Mentors**

A Bellin College fellowship mentor for 1:1 clinical mentorship hours will have all the qualifications listed below. Additionally, many will have teaching experience (academic, continuing education presentations, and/or clinical instructor.

- Credentialed as a Fellow of the AAOMPT (FAAOMPT) with current FAAOMPT status
- Actively engaged in patient care
- Able to spend a portion of clinic hours in 1:1 time with the FiT at a mutually agreeable location
- Agrees to allow observation of active mentorship at least one annually, either live or via electronic means, by Bellin College Program Directors or Director of Mentorship.
- Approved by the Bellin College Orthopaedic Manual Physical Therapy (OMPT) Fellowship Program Director &/or Bellin College OMPT Assistant Director
- Agrees with and upholds the patient care principles of Bellin College and the clinic, and is supportive of Bellin College's goals, philosophy, and requirements for fellowship clinical mentorship experiences
- Agrees to participate in Bellin College Mentorship Program Initiatives (mentorship webinars, mentorship courses, mentorship sessions at conferences, etc.)

### In addition to the above requirements, a clinical mentor for Fellows should

- Supervise the FiT in direct patient care, providing critique and guidance on fellowship-level clinical decision making and manual therapy skills
- Provide critique and guidance to the FiT on professional communication, teaching techniques, and teaching effectiveness
- Be proactive in modeling and instilling leadership and mentorship qualities
- Provide critique and guidance for the development of teaching modules, educational and marketing materials as applicable
- Work with Bellin College Faculty to conduct live patient and/or techniques examinations (note that live patient examinations need to be recorded for Bellin College Program Director review or two FAAOMPT credentialed examiners must be present on site).
- Support Bellin College Clinical Mentorship Initiatives (Mentorship Webinars, attend mentorship sessions at AAOMPT/CSM/Manipalooza meetings as able, go through mentorship course with Bellin College, etc.) as able

### Clinical Mentorship Hours Requirement for Manual Requirement for Manual Therapy Fellows 1 on 1 clinical mentorship hours

### For FITs who started fellowship in 2017 and earlier:

- 1:1 Mentorship
- FiTs complete 440 hours of clinical practice, which includes 130 1:1 hours. All 130 1:1 hours must be conducted with Bellin College credentialed clinical mentor who is a Fellow of the AAOMPT (FAAOMPT). The FiT must serve as the primary clinician responsible for the patient/client's care for at least 110 of the total 130 1:1 clinical mentorship hours. Up to 20 hours of observation, discussion, and interaction with the FAAOMPT mentor may contribute to the total 130 1:1 mentorship hours.
- FiTs must complete and submit all required clinical supervision/mentorship forms/documentation (Forms 3, 4, & 5; monthly Form 01 submissions) prior to being eligible to graduate. All hours reported on the Forms 3/4/5 must match submitted hours on the monthly Form 01 submissions.
- These hours must be performed in a 1:1 situation with your FAAOMPT. If 2 or more FiTs are present in the clinic seeing patients with the mentor, the hours must be divided up by the number of FiTs present. For example, if two FiTs are present with one FAAOMPT

mentor, then the total number of mentorship hours must be divided by two. A 10 hour day of mentorship in this situation would provide each FiT with 5 reportable hours of "1:1 mentorship time".

Remaining 310 Non-1:1 clinical mentorship hours:

- The standard process for completing the 310 remaining clinical mentorship hours ("non 1:1 hours") is that: 1) you must be mentored or supervised by a therapist with the FAAOMPT credential who you are able to contact either live or through some electronic means of communication, 2) these hours represent hours where you were using manual therapy in the overall management of your patient, 3) time spent practicing techniques cannot count towards these hours.
- Discussion of current cases is required in many of the academic courses taken by fellows, including current case discussion with faculty and peers in the four core management courses, the OMPT courses, and Fellow Virtual Rounds. The hours of case discussion that are included in the standard curricula, clinical practice hours where you were using manual therapy in the overall management of your patients (and documented in your monthly Form 01 submissions), and your FOTO documentation all contribute towards documenting the required 310 non-1:1 mentorship hours.

### • For FiTs who start the fellowship in January 2018 and beyond

- 1:1 hours:
- FiTs complete 1000+ hours of clinical practice, which includes 150 1:1 hours. All 150 1:1 hours must be conducted with Bellin College credentialed clinical mentor who is a Fellow of the AAOMPT (FAAOMPT). The FiT must serve as the primary clinician responsible for the patient/client's care for at least 130 of the total 150 1:1 clinical mentorship hours. Up to 20 hours of observation, discussion, and interaction with the FAAOMPT mentor may contribute to the total 150 1:1 mentorship hours.
- FiTs must complete and submit all required clinical supervision/mentorship forms/documentation (Forms 3, 4, & 5; monthly Form 01 submissions) prior to being eligible to graduate. All hours reported on the Forms 3/4/5 must match submitted hours on the monthly Form 01 submissions.
- These hours must be performed in a 1:1 situation with your FAAOMPT. If 2 or more FiTs are present in the clinic seeing patients with the mentor, the hours must be divided up by the number of FiTs present. For example, if two FiTs are present with one FAAOMPT mentor, then the total number of mentorship hours must be divided by two. A 10 hour day of mentorship in this situation would provide each FiT with 5 reportable hours of "1:1 mentorship time".

### Remaining 850+ orthopaedic manual physical therapy clinical practice hours

- For Fellows, the standard process for completing the 850+ orthopaedic manual therapy practice hours is that: 1) you must be mentored or supervised by a therapist with the FAAOMPT credential who you are able to contact either live or through some electronic means of communication, 2) these hours represent hours where you were using manual therapy in the overall management of your patient, 3) time spent practicing techniques cannot count towards these hours.
- Discussion of current cases is required in many of the academic courses taken by fellows, including current case discussion with faculty and peers in the four core management courses, the OMPT courses, and Fellow Virtual Rounds. The hours of case discussion that are included in the standard curricula, clinical practice hours where you were using manual therapy in the overall management of your patients (and documented in your monthly Form 01 submissions), and your FOTO documentation all contribute towards documenting the required hours.

According to the APTA and the AAOMPT, **none of the clinical mentorship hours for Fellows may take place in a POPTS or Referral for Profit (RFP) situation.** A RFP situation is one in which a referring physician (medical doctor, doctor of osteopathy, podiatrist, dentist, or chiropractor) derives a financial benefit from the physical therapy services provided to the person who is referred. The situations to which this restriction applies include those in which: (a) a physician has an ownership interest in a physical therapy practice to which he or she refers, (b) a physician or the physician's practice employs or contracts with physical therapists to provide physical therapy services within the physician practice, or (c) a physician's income or bonus is directly or indirectly tied to the revenues of the physical therapy service to which he or she refers patients. Noncompliance with this clause constitutes grounds for withdrawal of credentialing, and therefore FiT must not perform all mentorship (1:1 and clinical practice hours) in clinical situations that are not in POPTS or other RFP situations.

It is each FiT's responsibility to document completion of their clinical mentorship hours using Form 01, 1:1 mentorship Forms 3/4/5, and their clinical outcomes tracking using FOTO (exceptions granted by program director on a case-by-case basis). By submitting your 1:1 hours to Bellin College, you are vouching that your hours were not performed in a RFP situation or POPTS. See section 7.4 for additional detail on requirements related to Mentorship, FOTO, and documentation.

### Timing

For FiTs who will travel to acquire your clinical mentor hours outside of daily clinical environment, **it is ideal for you to begin your hours at the same time you start the OMPT Patient Management Framework / Advanced Clinical Decision Making module of the OMPT course series (Bellin College F109).** You then should work to spread out your 1:1 mentorship hours over 12-18 months. If you spread out over 18 months as evenly as possible, this would allow you to accomplish 50 hours during the OMPT Patient Management Framework / Advanced Clinical Decision Making, 50 hours during your TA role in the OMPT Patient Management Framework / Advanced Clinical Decision Making course, and 50 hours once you are in Fellow Virtual Rounds. The 1:1 mentorship hours should be spread out over at least a 12 month time period to maximize your ability to synthesize mentor feedback and improve your clinical practice skills.

# Fellows Clinical Hours, Description of Advanced Specialty Practice (DASP) and Form 01 documentation

- Note that the clinical hours must represent a demographically and clinically diverse patient population. The total number of patients must represent disorders that approximate that listed by the DSP (see DSP proportion table below). It is the responsibility of the fellow to ensure that this occurs, and that the diversity of the population is reflected on the Form 01 that is submitted monthly.
- When the discrepancy between DASP category percentages and the fellow's total percentage for a category is deficient by > 2%, then the fellow is responsible for working with the Program Director to arrange for learning module experiences, case experiences, or both to satisfy the deficiency. These additional learning experiences must be documented on a Fellowship Form 09 and submitted to the Program Director and the Registrar for approval.

### **Orthopaedic Description of Specialty Practice (DSP)**

Body Region	Percent of Cases
Cranial/Mandibular	3%
Cervical Spine	13%
Thoracic Spine/Ribs	6%
Lumbar Spine	20%
Pelvic Girdle/SI/Coccyx/Abdomen	7%
Shoulder/Shoulder Girdle	15%
Arm/Elbow	4%
Wrist/Hand	4%
Hip	7%
Thigh/Knee	12%

Leg/Ankle/Foot	9%
TOTAL	100%

# Process and Documentation Requirements

### **Documenting Clinical Mentorship Hours**

All FiTs must provide evidence of completion of all clinical hour requirements (1:1 and non 1:1 clinical hours for students enrolled in 2017 or earlier or 1:1 and clinical practice hours for 2018 and beyond students) by documenting them on a monthly Bellin College Form 01 in the Bellin College Student Information System. The form is arranged by region similar to what is outlined in the DASP.

### Two processes are required to meet these criteria

- Maintaining a soft or hard copy of Form 01. Students will use a soft or hard copy of Form 01 to log and document clinical hours in preparation for their monthly submission into Form 01 via electronic survey Personal soft and/or hard copies are not routinely submitted. The soft copy is available on the Fellowship Orientation course in Moodle. However, Bellin College may request these from the program student from time to time and if so, students will submit their soft-copy form using the following naming convention: "LastName\_01 Form\_Clinical Hours\_Documentation\_Year (i.e. "Smith 01 Form\_Clinical-Hours\_Documentation\_2017"). This is essential for your advisors and program directors to be able to manage the collection of files once they are submitted.
- Submitting monthly totals using an electronic survey version of Bellin College Form 01. All Form 01 entries will be completed via electronic survey using the link provided in the Fellowship Orientation and Resource Course site. Though we will send reminders to submit your information, it is each student's responsibility to know and ensure that they enter their monthly totals each month using this link. This electronic submission is the one Bellin College collects and tracks in order to determine each student's completion of the mentoring hour requirements.

Soft-copies of the Form 01 are accessible on the Fellowship Orientation Course site on Moodle.

Fellows-in-Training document hours that the FiT used manual physical therapy techniques in the management of the patient and where the FiT had the ability to discuss this case with FAAOMPT faculty (either live or through electronic forms of communication). FiTs should be sure to engage in discussion with the FAAOMPT faculty in the various virtual communities regarding these patient cases (virtual case discussions, online coursework, email, telephone, etc.). Note that there is specific case discussion built into the core management courses, the OMPT course series, and Fellow Virtual rounds to meet the AAOMPT & APTA's requirements for time discussing your individual patient cases. FiTs do not need to do any additional documentation beyond monthly Form 01 submissions, normal coursework, and FOTO submissions to document/support these 310 non-1:1 hours (for FiTs enrolled prior to 2018) or 850 orthopaedic clinical practice hours (FiTs enrolled in 2018 or beyond).

FiTs who enrolled prior to 2018 may stop tracking and logging monthly patient care hours in the Form 01 submissions once:

- The FiT has logged >310 hours (and >/= 400 patients) of patient care management where manual therapy techniques were used in the overall care of the patient, and where the FiT had the ability to discuss this case with FAAOMPT faculty (either live or through electronic forms of communication). These hours must be in a non-RFP situation.
- The FiT has at least 400 patients total recorded.
- The FiT's clinical hours and patient cases adequately represent a demographically and clinically diverse patient population as described in the DSP (shown above). Percentages must be within 2% of the minimum requirements of percentages shown.

Once all three criteria are met, FiTs should confirm with the mentor leader and registrar.

FiTs who enrolled in or after 2018 may stop tracking and logging monthly patient care hours in the Form 01 submissions once:

- The FiT has logged >850 hours of patient care management where manual therapy techniques were used in the overall care of the patient, and where the FiT had the ability to discuss this case with FAAOMPT faculty (either live or through electronic forms of communication). These hours must be in a non-RFP situation.
- The FiT has at least 400 patients total recorded.
- The FiT's clinical hours and patient cases adequately represent a demographically and clinically diverse patient population as described in the DSP (shown above). Percentages must be within 2% of the minimum requirements of percentages shown.

Once all three criteria are met, FiTs should confirm with the mentor leader and registrar.

### Self-assessment

Fellows will engage in ongoing self-assessment and ongoing feedback with their mentors regarding their clinical performance and clinical reasoning. All forms will be completed through web-based links to mentorship forms. E-mail notification with links to the forms will be sent and will also be available in the respective programs orientation course.

Forms 03, 04, & 05 will be used to both guide and document this process. Fellows will complete these forms through web-based links to survey forms, which are available in the Fellowship Orientation, Resource, and Archive Course. Form submission is required to submit completed forms for <u>every 20</u> <u>hours of mentoring completed.</u> An exception is made for FiTs who spend a full week (5-6 consecutive work days in a row) with a FAAOMPT credentialed mentor. In this situation, one set of forms (Forms 3, 4, and 5) can be submitted for the entire week's worth of hours. These documents must clearly state how many hours are supported by the form/documentation. Additionally, at least one set of forms (Form 03, 04, and 05) must be completed per <u>each</u> FAAOMPT mentor that a fellow-in-training works with for 1:1 hours.

FiTs should be very detailed in documenting their 1:1 hours, and should make sure that the hours documented on the monthly Form 01 submissions match all Form 03, 04, and 05 submissions.

It is important to note that your mentorship hours **WILL NOT COUNT** if the proper documentation is not submitted to Bellin College. It is the fellow's responsibility to initiate and ensure completion of all mentorship paperwork.

### Responsibilities of the Bellin College Fellow

It is the responsibility of the FiT to seek and make arrangements with a fellow mentor directly. The Fellow must provide evidence of this arrangement submitting a Clinical Mentor Agreement form (Form 06) for every clinical mentor who serves in a 1:1 mentorship role and in a practical examination supervisory/grading role. Each clinical mentor must also submit: 1) the Clinical Mentor Faculty form (Form 07), and 2) their CV. Clinical mentors must then be approved by the Bellin College Fellowship Program Director and/or the Assistant Program Director. Bellin College will assist the student as able in securing a clinical mentor as able.

Any financial arrangement related to activity with a clinical mentor is a matter addressed between the Fellow-in-Training, the residency/fellowship site, and mentor. Bellin College does not participate in this activity. The costs associated with mentoring hours (honorarium to the mentor or practice, travel costs and additional liability insurance if necessary) are an added expense for the Fellow beyond standard tuition.

**Please Note:** It is highly recommended that each Fellow take a systematic and proactive approach to compiling documentation related to their clinical mentoring hours. We have found the best method to be in the form of a self-maintained (in addition to what Bellin College collects and maintains) well-organized portfolio of the clinical hours log (Form 01) and other forms associated with the clinical mentoring requirements. **DO NOT** approach documentation of clinical mentoring hours and requirements in a haphazard manner, **be purposeful, proactive, and diligent in managing and documenting the work you do.** You may be asked at any time to support the clinical mentoring hours you report.

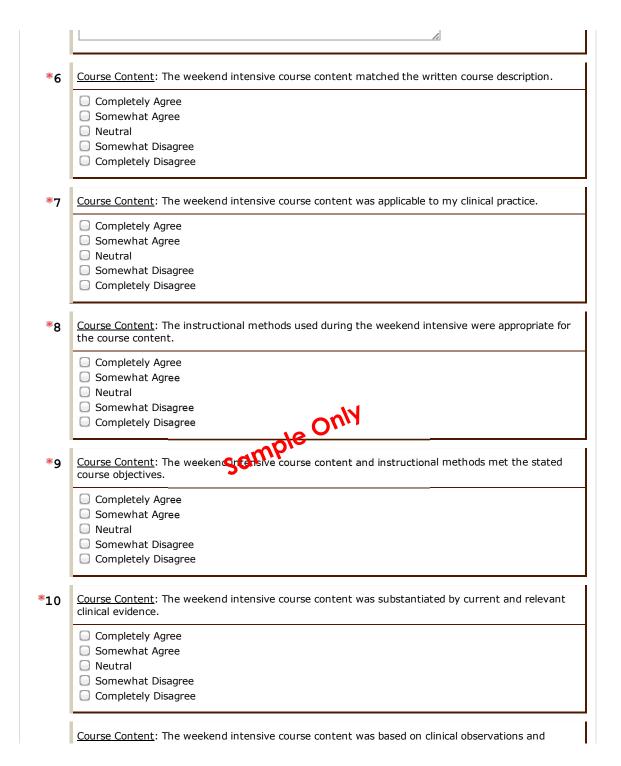
All copies of the mentorship forms must be submitted to the Registrar and maintained in the Fellow's files. If we do not have the paperwork supporting your 1:1 mentorship hours in your main student files, **we cannot count the 1:1 hours towards graduation requirements.** It is the Fellow's responsibility to make sure all documents are submitted and received by the Registrar or by other Bellin College mentorship coordinators.

Completing mentoring hours can be a rate-limiting step to completing fellowship because there are still so few FAAOMPT qualified/credentialed therapists in the US who are available and willing to provide mentorship hours to FiTs. In coordination with Bellin College, persons considering fellowship training should give very careful consideration from the outset regarding how he or she plans to address this issue. The "find a fellow" function is available to AAOMPT members at the AAOMPT web page. This function can help the FiT to find a mentor in his/her region:

http://aaompt.org/Main/Public\_Resources/Find-A-Fellow/Main/Member\_Resources/Find-A-Fellow.aspx?hkey=108c9a56-f793-45e4-b3ed-cefe5d871a94

## 8.2 Appendix B: Forms 8.2.1. Management Course Evaluation Form

On-site	Weekend Intensive End-of-Course Survey (required for certificate)
*1	<u>Pre-Course</u> : As a CE participant, I received my Moodle username and password promptly and was able to log in without any difficulty.
	<ul> <li>Completely Agree</li> <li>Somewhat Agree</li> <li>Neutral</li> <li>Somewhat Disagree</li> <li>Completely Disagree</li> <li>N/A (I am enrolled in EIM's Management Course)</li> </ul>
*2	<u>Pre-Course</u> : The pre-course video presentations were based on current and relevant clinical research.
	Completely Agree Somewhat Agree Neutral Completely Disagree Completely Disagree
	<ul> <li>Completely Disagree</li> <li>N/A (I am enrolled in EIM's Management Course)</li> </ul>
*3	<u>Pre-Course</u> : The journal articles provided as required reading consisted of current relevant clinical research that supplemented the video presentations.
	<ul> <li>Completely Agree</li> <li>Somewhat Agree</li> <li>Neutral</li> <li>Somewhat Disagree</li> </ul>
	<ul> <li>Completely Disagree</li> <li>N/A (I am enrolled in EIM's Management Course)</li> </ul>
*4	<u>Pre-Course</u> : The pre-course format and educational material adequately prepared me for the Weekend Intensive lab session.
	<ul> <li>Completely Agree</li> <li>Somewhat Agree</li> <li>Neutral</li> <li>Somewhat Disagree</li> </ul>
	<ul> <li>Completely Disagree</li> <li>N/A (I am enrolled in EIM's Management Course)</li> </ul>
5	<u>Pre-Course</u> : As a CE participant, please provide any specific comments you have regarding the online pre-course (we'll take both positive and negative comments).



(Example of responses only; all course surveys will be available via the LMS and completed online)

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	Somewhat A	gree									
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	Completely [	-									
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	Neutral										
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### 8.2.2. Clinical Mentored Practice: Form 01

Clinical Hours Documentation Form 01. Submit both:

- Total number of clinical hours for the month
- Total number of patients seen that month (Example only; data submitted via Bellin College Student Information System web link). Be sure to download a softcopy from the Fellowship Orientation and Resource course for personal tracking).

**NOTE:** Per APTA requirements, credentialed program student cannot conduct their clinical mentorship hours (1:1 or non-1:1 mentorship hours) in a physician owned physical therapy service (POPTS) or referral for profit (RFP) clinical situation as described in Section 7.3, item 6 and Appendix A of this handbook. Additionally, per the APTA, all mentorship hours must be conducted in the US or on US territory.

### **Clinical Hours and Patient Totals Log**

Please use this monthly form to log your clinical hours and patient totals. This information is essential for completion of the program and to submit 1 APTAand AAOMPT for annual credentialing reports. Please note: The Fellows should enter ALL of their patients, regardless of which management courses we have covered into both the FOTO system as well as your clinical mentor hours.
Last Name:
Drogoszewski
First Name:
Amanda Concernente Concernente Concernente a
If you are from one of our Network Partner sis Sama plete Onhicyelow.:(Note: If this is not your correct site, please updated your MyEIM Profile information.)
O-Not Applicable. I am not employed by an EIM Partner Please
Please enter the current month/year for which you a many program and CLINICAL HOURS:
June • 2017 •
Clinical Hours/Patient Totals Log
Please enter the Number of new Patients Manager with nanual physical the apy in each DASP region noted below. "Managed With Manual Therapy means that you used manual therapy in then examinate the provide the provide of your patient. Each patient will only count ONE time. If you are treating one patient for multiple problems it is best to document the patient int the category that you see the least of in your practic For example, if I see Mrs. Smith for neck pain and her wrist/hand problem. I would likely document under 'wrist/hand disorders' because I do not see many patients with wrist/hand disorders in my practice. Please round all hours managing patients to nearest hour counts. Please enter 0 for any DSP categories you did not see this month.
Cranial/Mandibular disorders
Number of Patients
Cervical Spine disorders
Number of Patients
Thoracic Spine/Rib disorders
Number of Patients

Pelvic Girdle/Sacroiliac/Coccyx/Abdomen disorders	
Number of Patients	
Shoulder/Shoulder Girdle disorders	
Number of Patients	
Arm/Elbow disorders	
Number of Patients	
Wrist/Hand disorders	Sample Only
Number of Patients	sample only
Hip disorders	
Number of Patients	
Thigh/Knee disorders	
Number of Patients	
Leg/Ankle/Foot disorders	
Number of Patients	

Did you spend greater than or equal to 100 hours in patient care this month where you a) managed the evaluation, treatment, and plan of care of your patients, b) you had access (live, via phone, email, text, etc) to an FAAOMPT credentialed therapist for consultation as needed?

No, If No - Please provide additional detail including # of hours.

### 8.2.3. Clinical Mentored Practice: Examination Feedback Form 02

This is a sample only. This form is updated frequently, so download from the Bellin College Fellowship Orientation course in the learning management system.

This form is to be used to document your two required live patient exams (1 spine and 1 extremity). Once the exam is completed, both you and your fellow mentor (FAAOMPT) need to sign the document and then scan & e-mail the form to Carol Fray at the Evidence In Motion office (carol@eimpt.com) or fax to 1-866-936-2759.

### Here are some guidelines to remember for setting up your practical exams:

- 1. The live patient examinations may be conducted by either: a) The Program Director or EIM Faculty who are Fellows of the AAOMPT, or b) Fellowship Clinical Mentors or other FAAOMPT credentialed therapists who are approved EIM Fellow Mentors. One FAAOMPT credentialed therapist must be present in person during the live patient examination.
- 2. Post-surgical patients in the first 6 months of their primary rehabilitation process are not appropriate. Additionally, patients must be appropriate for use of an OMPT examined interventions. If the patient ends up not being appropriate for a full OMPT exam and ent e acuc le camination must be res vitain the last o nonths of use of OMPT interventions, a new pa hed le
- lasted within 3. The practical examinations should be the fellowship program, and after completion of the OMPT Patient Management Framework course. Any exceptions to these timeframes must be approved by the Program Director.
- 4. The live patient practical examination will be conducted with a patient that is new/unknown to the Fellow-in-Training, and will include submitted documentation of all aspects of the mittel documentation of sale aspects of the mittel documentation, merventions, patient education, exercise instruction, etc. Documentation shall be submitted to the Registrar (registrar@eimpt.com).
- 5. Practical exam cases need to be completed, from start to finish, in 60 minutes or less. Examinations extending beyond 1 hour will Odu  $||0\rangle$ not be graded.
- 6. At the end of the patient interaction, the fellow-in-training must orally discuss and defend the clinical decision-making used in the patient examination, interventions, and planning for the course of care through discharge (the "oral practical exam"). The practical the majorar resistance instance and an Program Director will be CC'd. verpatient exam, the CT must demonstrate a thrust technique that he/she may exam defense form must also be submitted t
- 7. If a thrust manipulation was not used in e a thrust technique that he/she may use in the future with this patient. This should be demonstrated to the FAAOMPT tester(s) present on site, and also recorded and sent to the Program Director along with the recording of the war and defense if two testers were not present.
- 8. All practical examinations and oral defenses will be vider reicided inless specifically excused by the Program Director. If a fellowin-training is not able to perform video recording and submission of the patient case, two FAAOMPT credentialed examiners shall be present for the testing session.
- 9. The video recording (exam, defense, thrust technique if not done in the exam), grading by FAAOMPT on a signed Form 02, and "sanitized" patient documentation (initial notes with all patient identifiable information removed) must be sent to the Program Director within 1 week of completing the exam. Videos should be uploaded to EduVision (into the Fellowship Practicals channel), and the sanitized notes/documentation can be shared via other electronic means (email to registrar@eimpt.com).
- 10. The signed Form 02 from the Testers must be submitted to the EIM Registrar (registrar@eimpt.com) within 1 week of completing the exam.
- 11. The video recording and corresponding documentation will undergo a second review from the Program Director or a Program Director approved FAAOMPT-credentialed grader within approximately 4-8 weeks of the testing date for final approval. If additional testing or remediation is needed, the Fellow-in-Training will be notified within approximately 4-8 weeks of submission of the video and case documentation.
- 12. Fellows-in-Training must achieve at least an A- grade (90% or higher) on the practical exam, and must receive passing grades from both testers (either two FAAOMPT testers, or one FAAOMPT tester and the Program Director).
- 13. If a practical exam is failed three times, the FiT may not graduate from the fellowship.

### Clinical Mentored Practice: Examination Feedback Form 02

	fication of Terms and Standards for Fellow Examinations" towards the derstand the standards for each fellow in this practical examination.
AMINATION - HISTORY Patient Profile Chief Complaint Body Chart Behavior of Current Symptoms Medical Screening/Differentia Diagnosis Reviewed Present History Previous History Planning the Exam: Interpretation & Initial Hypotheses & Plan for Physical Exam (including establishing the SINSS of the patient).	

PHYSICAL EXAMINATION – Fests/Measures	COMMENTS (FiT strengths and weaknesses/areas to improve)
Observation/Gait/Posture Functional Assessment Neurological Exam AROM/Overpressure Passive/Segmental/Accessory Movement Testing Special Tests Muscle Tests Neural Dynamics Palpation	

INTERVENTION	COMMENTS (FiT strengths and weaknesses/areas to improve)
<ul> <li>Targeted Manual Therapies/ Self- Mobilization</li> <li>Muscle Balance</li> <li>Reassessment</li> <li>Plan of Care</li> <li>Pyscho-Social Considerations</li> <li>Aerobic/Conditioning</li> <li>Consultation/Additional Imaging/Etc.</li> <li>Home Exercise Program Manual Physical Therapy Interventions</li> </ul>	Score for this section:/ 100 points
	0////

DIAGNOSIS & PROGNOSIS	COMMENTS (H.T scengths and weaknesses/areas to improve)
	Samp
	Score for this section:/ 50 points

OVERALL EXAM SKILLS	COMMENTS (FiT strengths and weaknesses/areas to improve)
<ul> <li>Time management</li> <li>Communication skills</li> <li>Hypothesis development</li> <li>Use of EBP throughout exam/treatment</li> <li>Treatment progression</li> <li>Discharge planning</li> <li>Critical thinking and problem solving</li> </ul>	
	Score for this section: / 100 points

Please add additional comments regarding the FiT's practical examination:

Total score: \_\_\_\_ points / 500 possible points = \_\_\_\_% for the examination. Scores >90% are passing, scores <90% are failing and the FiT must repeat the exam.

FAAOMPT Mentor Name and Signature:

### Clarification of Terms and Standards for Fellow Examinations

### **GUIDELINES TO CONSIDER FOR GRADING - THE HISTORY**

Did the fellow acquire information in each of these areas to the left in sufficient detail to:

- Effectively use a a health screening form and health outcomes tools.
- Complete the body chart in a manner that described all symptoms (whether perceived as related or unrelated to the primary problem) adequately, cleared appropriate areas, and differentiated between the different regions of symptoms, etc.
- Determine whether the patient was appropriate for care by a physical therapist and whether the patient needed referral / consultation
- Identify potentially important red and yellow flags, and seek referral or consultation as appropriate
- Determine any risk factors for chonicity (e.g. psrchosocial, fear avoidance, etc Ask direct questions ("Why are you here?", "What are you et pectators for cire?
- Perform a detailed history to establish SINSS (must be able to measure time, distances, etcps, reps)
  - Get aggs leases for each area of sxs with times to onset and ease sxs and pain scores 0 Clarity in establishing +/- relationships between areas of sxs ō.
- Establish a sound initial and secondary hypothesis based on the individual patient scenario and current best evidence (including use of the best questions for ruling in/out various diagnoses)
- Clearing: For UE complaints, did the fellow-in-training clear through the CT spine with the Hx. For LE complaints, did he/she clear up through the I-spine with the Hx.
- Adequately plan the physical examination (including what the exam should include, what symptoms the exam should aim to provoke, what areas / regions will be examined at future visits, planned use of overpressures, combined movements and repeated movement testing, +/- neurological screening examination, +/- neural dynamics testing, etc). The plan for the physical exam should be based on the SINSS established by the end of the history
- Identify 2-3 key subjective 'asterisk' signs for use in re-assessment of patient progress within an examination/treatment session and over time?

### **GUIDELINES TO CONSIDER FOR GRADING - THE PHYSICAL EXAM**

- Did the FiT expose the areas he/she examined? FiTs should not examine through clothing.
- Did the fellow select and perform tests and measures that were appropriate based on his/her plan for the physical examination?
  - Did the FiT establish hypotheses & expectations of the exam to support their hypotheses (rule in/out, prioritize) 0
  - Did the fellow conduct a full work-up to rule in/rule out #1 hypothesis?
  - ō. -Did the fellow monitor symptoms at rest and before/after test/measures and interventions provided?
  - Did the examination 'match' or support the hypothesis? Were special tests and examination procedures such that they helped rule in/out the primary or secondary hypothesis (versus performing additional T&M not related to the hypothesis)?
  - Were the best diagnostic tests/measure selected (based on current best evidence)? Were appropriate manual examination 0 tests/measures performed?
  - Did he/she examine areas that can refer symptoms to the region of primary complaint. For LE complaints, clear up through the I-spine. For UE complaints, clear through the CT spine.
  - Were test/measures performed at the level and depth consistent with the established SINSS? Consider amount/volume/vigor. No overexam of the severe/irritable, no under-exam of the non-irritable.
  - Did the fellow adjust his/her plan for the physical exam based on emerging information during the exam? 0
  - Did the fellow perform an appropriate examination to further refine his/her hypothesis(es), as well as plan for day one interventions (not 0 only was proper intervention identified, but was intervention graded adequately based on identified SINSS)?
- Did the FiT perform a neurological examination if the patient complains of symptoms in the extremities or cranium
  - If sxs are/or have recently been below AC joint, UE neuro must be performed; if below gluteal folds, a LE exam.
  - Symptoms in the cranium? Include a cranial nerve exam
  - Sxs into bilateral UE, LE, or hemicorporal a complete neuro exam should be performed (UE, LE, UMN exam)
- Did the FiT use asterisk signs or comparable signs consistently and appropriately (with NPRS scores, measurements, etc)

- Choose asterisks thoughtfully (be parsimonious, choose variety such as: a functional motion with NPRS & measurement, a ROM measurement, and a dural tension sign with measurement)
- Consistently recheck the same \*s each time (after treating or teaching a HEP; do not just check \*s that 'match' the treatment provided)
- Did the FiT progress the exam appropriately:
  - Least invasive and most voluntary to more invasive and more directive examination tests/measures
  - Functional tests ⇒AROM ⇒ PROM ⇒ physiologic ⇒ physiologic w/ OPs ⇒ combined motion/special tests
  - RESPONSE TO EMERGING DATA, investigated appropriately, especially if it ran counter to the 1° hypothesis.

 Were the fellow's patient handling skills and communication skills appropriate for the patient situation? (open-ended questions when appropriate, free of biasing the patient unless specifically intended to do so, soft hands, etc)

### **GUIDELINES TO CONSIDER FOR GRADING - DIAGNOSIS & PROGNOSIS**

- Does the diagnosis match the patient's history and physical examination, and is the diagnosis consistent with the current best evidence? Did the FiT identify factors that are contributors to the patient's main problem?
- Did the fellow establish a diagnostic label that is appropriate for discussion with the patient's other medical providers (especially primary care
  providers), as well as a diagnostic label and a classific room on the work benefitiring unding physical therapist management of the patient? Is
  this diagnostic label consistent with the patient presentation and current best evidence?
- Did the FiT establish other factors which may limit the rate or extent of expected recovery?
- Did the fellow provide prognostic information for the patient that is accurate and up-to-date relative to the current best evidence, the individual
  patient they are seeing, and the natural history of the disorder?

#### **GUIDELINES TO CONSIDER FOR GRADING - INTERVENTIONS**

- Did the fellow select interventions targeting identified impairments from the physical examination?
- In selecting and performing interventions, did the Fit integrate current best published evidence (including pain sciences) and patient values into all decision making
- Did the fellow select manual therapy intervention techniques that were appropriate for his/her targeted outcome, as well as consistent with the indicated treatment parameters (grade, duration, etc) consistent with established patient SINSS?
- Did the FiT assess the effect of each intervention on the \*s (not just \*s that he/she thought would change, but a range of \*s that are consistently
  assessed throughout the exam/treatment session).
- Did the therapist adjust his / her plan for follow-on interventions based on patient re-assessment?
- Is the fellow able to identify and verbalize their plan for further care based on the following scenarios: If the patient gets better; If the patient stays
  the same; If the patient gets worse after providing their intervention of choice.
- Were communication skills appropriate for this patient situation? Did the fellow provide clear and concise instruction for the patient in language that the patient could understand?
- Did the fellow modify his/her communication, patient handling/positioning, and techniques based on solicited patient feedback and outcomes achieved?
- Did the fellow establish a sound/reasonable plan of care taking into consideration the examination and reassessment information obtained to
  date, the patient's wishes/desires/values, the overall goals/objectives for this patient, and current best evidence?
- Did he/she provide HEP that "matches" and/or reinforces Rxs found to be beneficial in clinic that day? Does it align with the patient's SINSS?
- Were highly skilled patient handling and communication skills used when teaching the patient his/her home exercise program?
- Did the fellow provide the patient with high quality home exercise handouts?
- Did the FiT empower patient at each turn?
- Did the fellow follow-up with appropriate communication with the healthcare team, as indicated? If so, did he/she adjust the language used to
  match the language used/accepted by the general healthcare community (vs manual therapy jargon)?
- Did the FiT establish treatment objectives addressing impairments and functional losses (selecting goals that can be realistically achieved considering the patient's prognosis and goals, and a focused on achieving optimal outcomes)?

Note that the "Maitland" / "Australian" / "Signs and Symptoms does NOT have to be the primary approach used by the fellow mentors. However, it is expected that the fellows will be fluent with the system, that they will use the system (combined with EBP) to guide their clinical decisions as discussed in the guidelines above, and that they can explain their thought processes in terminology that any therapist can understand. Additionally, the "SINSS" nomenclature is defined further in the following portions of this document.

Clarification of terminology used in this practical examination document:

Communication Skills: The ability to communicate effectively (i.e. speaking, body language, reading, writing, listening) with the patient. This may include but is not limited to effectively using open-ended vs. closed- ended questions, effectively utilizing information gathered from the patient to plan the examination and treatment, and effectively instructing exercises to enhance compliance.

Hypothesis Development: The ability to gather information from the examination and synthesize that information with current best evidence in order to develop a working hypothesis for the patient's presentation. The region of dysfunction should be defined as specifically as possible so that the most appropriate treatment can be established.

Appropriate Treatment Progression: The ability to establish an appropriate management strategy according to the working hypothesis and the current biobehavioral status of the patient. Also, the ability to appropriately progress the intervention according to patient response and additional information gathered during the examination process.

Discharge Planning: The indication that the intervention is appropriately aimed at the patient eventually being able to function at a level that; has met the goals of the therapist and the patient; and requires no additional clinic visits.

Exercise Prescription: The indication that prescribed exercises are individualized to each patient according to presentation of dysfunctions, success of treatment and patient's response to the exercise. Materials (i.e. handouts, teaching aides) that are utilized to reinforce the exercises are also an important aspect of the exercise prescription.

Technique Performance: The ability to perform interventions demonstrating proper patient and therapist positioning, hand placement, body mechanics and amplitude and velocity of the technique.

Critical Thinking: The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.

Effective Use of Time: The ability to obtain the maximum benefit from a minimum investment in time and resources.

Problem Solving: The ability to recognize and define problems, analyzes data, develop and implement solutions, and evaluate outcomes.

#### Terminology Guidelines for SINSS: Severity, Irritability, Nature, Stage, Stability

Severity:

- Intensity of symptoms and clinician's assessment of the impact of the symptoms on the patient's life / function / ADLs.
- Graded as mild/minimal, moderate, or severe. Grades are a continuum.
  - Mild/minimal Life/function/sleep are minimally impacted by the problem, limited <30% in ADLs/normal activity due to problem, verbal/facial/body language indicate minimal pain, sleeping well, recreation minimally or not impacted by the problem
  - Moderate Doing 40-70% of normal activity (or at least 30% impact on function), pain/NPRS 4-7/10, often using medications to sleep
  - Severe 8-10/10 NPRS/pain, stopped doing prior activities due to symptoms, basic ADLs avoided/limited, doing less than 40% of normal activity, verbal/facial/body language indicate severe pain, once symptoms appear the patient must stop their activities

Irritability:

- Clinician's assessment of aggravation and easing of symptoms.
- 3 components: 1) amount needed to cause symptoms, 2) severity of symptoms provoked, 3) activity and time to ease symptoms. Note This will vary for each area of symptom presentation.
- Helps to guide how vigorous of an exam we will do, which symptoms we want to reproduce in the exam, where and how we will intervene.
- Grading: Mild/minimal, moderate, severe (note some overlap with severity grading):
  - Mild/minimal tolerates a lot of activity before onset of sxs, symptoms ease quickly, performing all ADLs, don't have to quit

activity once symptoms begin, sleeping well

- Moderate function moderately limited, brief amount of activity with vigor before symptoms appear, 40-70% of function, 1:1 ratio of time to ease to time to provoke symptoms, if awakened wit pain can return to sleep <30 min</li>
- Severe Function <40% normal, > 30 min to fall back to sleep after being awakened with pain, takes much longer for symptoms to resolve compared to how long it takes symptoms to begin with position/activity, patient spends more time resting compared to activity, basic ADLs interrupted

### Nature:

e: Hypothesis of structures involved, syndrome/classification, pathology involved, considers all aspects of the patient's problem, includes determination of musculoskeletal vs non-musculoskeletal condition or both, does any aspect of the problem warrant caution, is depression/stress impacting the disorder, etc.

#### Stage:

- Acute, subacute, chronic, acute on chronic
- Helps with prognosis and treatment selection

#### Stability:

- · Symptom progression over time for each symptom region and overall patient scenario
- Graded as worse/better/same
  - Typically don't say 'same' or 'status quo' unless status quo for past 3 months
- Implications on prognosis and vigor of exam/interventions

### 8.2.4. Clinical Mentored Practice: Mentors Assessment of Fellow-in-Training -Form 03

### Purpose

• Provide a mechanism for the clinical mentor to give feedback to the Fellow-in-Training (FiT)

### **Manual Therapy Fellows**

- Use: The results of this assessment will be discussed between the FiT and the fellow mentor (FAAOMPT) at least once per every 20 hours of documented mentorship time. The one exception is if the FiT spends a full week with a Mentor. In this situation, one Form 03 may be submitted for the entire week's experience (up to 50 hours). Additionally, one Form 03 must be submitted, at a minimum, for each Mentor.
- Links are available in the Fellow Moodle Orientation Course to complete the form online via web links.
- You are required to keep a soft-copy signed by both you and your mentor for up to 1 year upon program completion.

# This is an example form. Please use the most current form / web link available on the Fellowship Orientation site in Moodle.

Fellowship - Form 03	- Mentor's Assessment of FiT
FiTs who spend a full week (5) can be submitted for the enti he/she did have with you. FAA	d at least once every 20 hours of 1.1 mentoring time that the fellowintraining (FiT) spends with you. An exception is made for 5 consecutive work days in a row) with a FAAOMPT credentialed mentor. In this situation, one set of forms (Forms 3, 4, and 5) re week's worth of hours (up to 50 hours). If the FiT spends less time with you, please fill out this document for the time that cOMPT mentors should contact the registrar@eimpt.com with any questions, and Julie Whitman (Julie@eimpt.com) with ed to the fellowship or this particular FiT.
Please provide YOUR last in name:	Sample Only- Please
Please provide YOUR first	download from Orientation
name:	Course
Please provide the expiration date of YOUR FAAOMPT status:	
Please provide YOUR full credentials (please make	
sure to include your FAAOMPT credentials):	
Fellow name:	

What dates does this assessment cover (month/day/year through month/day/year)?

How many 1:1 mentored hours with the FIT in the lead of care does this assessment cover? Please be exact as this # must match up with your FIT's entry. Also, note that FiTs must have 130+ hours of 1:1 mentorship in direct patient care, with at least 110 of these hours with the FiT in the lead of care.

How many 1:1 mentored hours took place in this assessment period with the FiT observing his/her FAAOMPT credentialed mentor?

Use the following description to help in assessing the FiT's skills as at "FAAOMPT" level or "Below" FAAOMPT level. It is expected that many FiT's are not performing at "FAAOMPT" level early in their 1:1 experiences, but the number of skills where FITs are noted to be performing at "FAAOMPT" level will increase with progression through the program. Do not hesitate to mark 'Below FAAOMPT level' if that is the best description of the FiT's performance.

#### Grading Criteria

#### Fellow Level

Able to complete the client management in the designated time mame with arguably th ient in the context of evidence-based practice including the client's individual circumstances. practice including the client's individual circumstances. Did not require prompts from the mentor to stay the best vs. a "Dave of na

ve patient examination, this Interaction would likely take place after the actual client management during discussion between fellow and mento

- Demonstrates superior knowledge of current 'best evidence' with regards to the client management case. For example, demonstration of best evidence outside of just the sources presented in EIM coursework. In addition to full and in-depth knowledge of the evidence presented within the EIM coursework.

- Demonstrated excellent patient handling skills throughout the examination, and includes manual physical therapy skills in both the patient. examination and in direct interventions.

- Demonstrates highly honed communication skills with the patient throughout the examination and intervention process.

Demonstrates application of best evidence in a particularly difficult client case. This case difficulty may be determined by extenuating client circumstances, co-existing psychosocial issues, comorbid medical conditions, and other contributing medical aspects not "commonly" encountered. - Demonstrates use of sound clinical decision making model that integrates: current evidence, pain sciences knowledge, use of the 'signs and symptoms' based model for decision making, patient values, understanding of the Impact of available resources on (time financial medical insurances etc) when planning for overall patient management.

#### Below Fellow Level

- Unsafe practice that produced or could produce harm to the client or therapist - any such action results in the immediate cessation of the client management by the fellow. For example, did not peform neurovascular examinations when needed, did not adequately screen for medical red flags. performed techniques in a way that posed danger to the patient etc.

- Required more than 2 prompts to stay the best course of management.

- Unable to complete the client management in designated time frame i.e. unable to complete a portion of what is deemed essential to the case in a normal client time slot secondary to inefficiencies.

- Did not complete best course of client management because of an omission of appropriate re-assessment.

· Did not achieving criteria for "Fellow Level" as detailed below.

Communication Skills: The ability to communicate effectively (i.e. speaking, body language, reading, writing, listening) with the patient, This may include but is not limited to effectively using openended vs. closedended questions, effectively utilizing information gathered from the patient to plan the examination and treatment, and effectively instructing exercises to enhance compliance

Please provide any comments related to the FiT's Communication Skills at time of assessment.

Please rate the Fellow in Training's (FiT's) Communication Skills at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Hypothesis Development: The ability to gather information from the examination and synthesize that information with current best evidence in order to develop a working hypothesis for the patient's presentation. The region of dysfunction should be defined as specifically as possible so that the most appropriate treatment can be established.

Please provide any comments	related to the FiT'	Hypothesis Development a	at time of assessment.
-----------------------------	---------------------	--------------------------	------------------------

Diagon rate the Follow in Training's	(EiT'e) Lunotheeie	Development at the time of accerment	

At Fellow Level

22

- Below Fellow Level
- N/A Observation Hours Only

Appropriate Treatment Progression: The ability to establish an appropriate management strategy according to the working hypothesis and the current biobehavioral status of the patient. Also, the ability to appropriately progress the intervention according to patient response and additional information gathered during the examination process.

Please provide any comments related to the FiT's Appropriate Treatment Progression at time of assessment.

Please rate the Fellow in Training's (FiT's) Appropriate Treatment Progression at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Discharge Planning: The indication that the intervention is appropriately aimed at the patient eventually being able to function at a level that; has met the goals of the therapist and the patient; and requires no additional clinic visits.

Sample Only

Please provide any comments related to the FiT's Discharge Planning at time of assessment.

Please rate the Fellow in Training's (FIT's) Discharge Planning at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Exercise Prescription: The indication that prescribed exercises are individualized to each patient according to presentation of dysfunctions, success of treatment and patient's response to the exercise. Materials (i.e. handouts, teaching aides) that are utilized to reinforce the exercises are also an important aspect of the exercise prescription.

Please provide any comments related to the FiT's Exercise Prescription at time of assessment.

Please rate the Fellow in Training's (FiT's) Exercise Prescription at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Technique Performance: The ability to perform interventions demonstrating proper patient and therapist positioning, hand placement, body mechanics and amplitude and velocity of the technique.

Please provide any comments related to the FiT's Technique Performance at time of assessment.



Please rate the Fellow in Training's (FiT's) Technique Performance at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Critical Thinking: The ability to question logically: to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.

Please provide any comments related to the FiT's Critical Thinking at time of assessment.

Please rate the Fellow in Training's (FiT's) Critical Thinking at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Sample Only

Effective Use of Time: The ability to obtain the maximum benefit from a minimum investment in time and resources.

Please provide any comments related to the FiT's Effective Use of Time at time of assessment.

Please rate the Fellow in Training's (FiT's) Effective Use of Time at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Problem Solving: The ability to recognize and define problems, analyzes data, develop and implement solutions, and evaluate outcomes.

Please provide any comments related to the FiT's Problem Solving at time of assessment.

Please rate the Fellow in Training's (FiT's) Problem Solving at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Fellows-in-Training need to demonstrate appropriate use of both thrust manipulation techniques and non-thrust techniques in direct patient care. Please check off below to verify that you used thrust techniques and non-thrust techniques in direct patient care sometime during your 1:1 mentored hours that are covered by this form.

Please check to verify that the FiT used thrust techniques in direct patient care.

Please check to verify that the FiT used nonthrust techniques in direct patient care.

Please provide any other feedback or comments here:

Has been approved

Failed - Does not meet criteria.

Note :

# Sample Only

Send alert to Program Director

- Send alert to Mentor
- Make Visible

# 8.2.5. Clinical Mentored Practice: Fellow-in-Training Assessment of Mentor - Form 04

### Purpose

• Provide a mechanism for the fellow-in-training (FiT) to give feedback to the clinical mentor.

### **Manual Therapy Fellows**

- Use: The results of this assessment will be discussed between the FiT and the fellow mentor (FAAOMPT) at least once per every 20 hours of documented mentorship time. If a FiT spends a full week with a Mentor, one Form 03 may be submitted for the entire week's experience (up to 50 hours). Additionally, one Form 03 must be submitted, at a minimum, for each Mentor.
- Links are available in the Fellow Moodle Orientation Course to complete the form online via web links.
- You are required to keep a soft-copy signed by both you and your mentor for up to 1 year upon program completion.

# This is an example form. Please use the most current form / web link available on the Fellowship Orientation site in Moodle.

Fellowship - Form 0	4 – FiT's Assessment of Mentor
Please provide YOUR last name:	Drogoszewski
Please provide YOUR first name:	Amanda
Please provide Mentor name:	Timothy Flynn 🔻
	sment cover (month/day/year through month/day/year)?
	urs with the FIT in the leap of care does this assessment cover? Please be exact as this # must match up with your mentor's nust have 130+ hours of 1:1 mentorship in direct patient care, with at least 110 of these hours with the FIT in the lead of care.
How many 1:1 mentored ho	urs took place in this assessment period with the FIT observing his/her FAAOMPT credentialed mentor?
Please rate the Quality of Fe	edback from your Mentor.

- Above Satisfactory
- Satisfactory
- Unsatisfactory

Please comment on the Quality of Feedback from your mentor (all Unsatisfactory ratings require a comment):



- Above Satisfactory
- Satisfactory
- Unsatisfactory

Please comment on the Level of Supervision from your mentor (too much: too little; appropriate-all Unsatisfactory ratings require a comment



Above Satisfactory



Please provide feedback on the Clinical DecisionMaking Framework of your mentor (allUnsatisfactory ratings require a comment):

Please rate the Technical Expertise of your Mentor.

- Above Satisfactory
- Satisfactory
- Unsatisfactory

Please comment on the Technical Expertise of your mentor (all Unsatisfactory ratings require a comment):

Do you recommend this mentor for future EIM FiTs? Yes/No. Please describe your answer.

0 Yes

No

Please describe your answer

Please provide any further comments or feedback for your mentor:

Has been approved

Failed - Does not meet criteria.

### 8.2.6. Clinical Mentored Practice: Fellow-in-Training Self-Assessment – Form 05

### Purpose

• To provide a tool for the student to provide themselves and the program with feedback

### **Manual Therapy Fellows**

- Use: The results of this assessment will be discussed between the FiT and the fellow mentor (FAAOMPT) at least once per every 20 hours of documented mentorship time. The one exception is if the FiT spends a full week with a Mentor. In this situation, one Form 03 may be submitted for the entire week's experience (up to 50 hours). Additionally, one Form 03 must be submitted, at a minimum, for each Mentor.
- Links are available in the Fellow Moodle Orientation Course to complete the form online via web links.
- You are required to keep a soft-copy signed by both you and your mentor for up to 1 year upon program completion.

# This is an example form. Please use the most current form / web link available on the Fellowship Orientation site in Moodle.

Fellowship - Form 0	5 - FiT's Self-Assessment
Please provide YOUR last name:	Drogoszewski
Please provide YOUR first name:	Amanda
Please provide Mentor name:	Sample Only- Please
What dates does this assess	ment cover do wyn loadh/dfyreom
	urs with the FIT in the lead of care does in a assessment cover? Nease be exact as this # must match up with your mentor's ust have 130+ hours of 1:1 mentorship in direct patient care, with at least 110 of these hours with the FIT in the lead of care.
How many 1:1 mentored how	urs took place in this assessment period with the FiT observing his/her FAAOMPT credentialed mentor?

Please provide a detailed self-assessment of your current status and development in each of the categories below.

### **Grading Criteria**

#### Fellow Level

-Able to complete the client management in the designated time frame with arguably the best course of management in the context of evidence-based practice including the client's individual circumstances.

-Did not require prompts from the mentor to stay the best vs. a "good" course of management. (NOTE: In the case of a live patient examination, this interaction would likely take place after the actual client management during discussion between fellow and mentor)

-Demonstrates superior knowledge of current 'best evidence' with regards to the client management case. For example, demonstration of best evidence outside of just the sources presented in EIM coursework. In addition to full and in-depth knowledge of the evidence presented within the EIM coursework.

 Demonstrated excellent patient handling skills throughout the examination, and includes manual physical therapy skills in both the patient examination and in direct interventions.

-Demonstrates highly honed communication skills with the patient throughout the examination and intervention process.

-Demonstrates application of best evidence in a particularly difficult client case. This case difficulty may be determined by extenuating client circumstances, co-existing psychosocial issues, comorbid medical conditions, and other contributing medical aspects not "commonly" encountered. -Demonstrates use of sound clinical decision making model that integrates: current evidence, pain sciences knowledge, use of the "signs and symptoms" based model for decision making, patient values, understanding of the impact of available resources on (time, financial, medical, insurances, etc) when planning for overall patient management.

#### Below Fellow Level

-Unsafe practice that produced or could produce harm to the client or therapist – any such action results in the immediate cessation of the client management by the fellow. For example, did not peform neurovascular examinations when needed, did not adequately screen for medical red flags, performed techniques in a way that posed danger to the patient, etc.

Required more than 2 prompts to stay the best course of management

-Unable to complete the client management in designated time frame i.e. unable to complete a portion of what is deemed essential to the case in a normal client time slot secondary to inefficiencies

-Did not complete best course of client management because of an omission of appropriate re-assessment

-Did not achleving criteria for 'Fellow Level' as detailed below



Communication Skills: The ability to communicate effectively (i.e. speaking, body language, reading, writing, listening) with the patient. This may include but is not limited to effectively using openended vs. closedended questions, effectively utilizing information gathered from the patient to plan the examination and treatment, and effectively instructing exercises to enhance compliance

Please rate your Communication Skills at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Hypothesis Development: The ability to gather information from the examination and synthesize that information with current best evidence in order to develop a working hypothesis for the patient's presentation. The region of dysfunction should be defined as specifically as possible so that the most appropriate treatment can be established.

Please rate your Hypothesis Development at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Appropriate Treatment Progression: The ability to establish an appropriate management strategy according to the working hypothesis and the current. biobehavioral status of the patient. Also, the ability to appropriately progress the intervention according to patient response and additional information gathered during the examination process.

Please rate your Appropriate Treatment Progression at the time of assessment.

At Fellow Level

Below Fellow Level

N/A – Observation Hours Only

Discharge Planning: The indication that the intervention is appropriately aimed at the patient eventually being able to function at a level that; has met the goals of the therapist and the patient; and requires no additional clinic visits.

1

Please rate your Discharge Planning at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Exercise Prescription: The indication that prescribed exercises are individualized to each patient according to presentation of dysfunctions, success of treatment and patient's response to the exercise. Materials (i.e. handouts, teaching aides) that are utilized to reinforce the exercises are also an important aspect of the exercise prescription.

Please rate your Exercise Prescription at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Sample Only

Technique Performance: The ability to perform interventions demonstrating proper patient and therapist positioning, hand placement, body mechanics and amplitude and velocity of the technique.

Please rate your Technique Performance at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Critical Thinking: The ability to question logically: to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.

Please rate your Critical Thinking at the time of assessment.

- At Fellow Level
- Below Fellow Level
- N/A Observation Hours Only

Below Fellow Level

N/A – Observation Hours Only

Discharge Planning: The indication that the intervention is appropriately aimed at the patient eventually being able to function at a level that; has met the goals of the therapist and the patient; and requires no additional clinic visits.

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Please rate your Discharge Planning at the time of assessment.

At Fellow Level

Below Fellow Level

N/A – Observation Hours Only

Exercise Prescription: The indication that prescribed exercises are individualized to each patient according to presentation of dysfunctions, success of treatment and patient's response to the exercise. Materials (i.e. handouts, teaching aides) that are utilized to reinforce the exercises are also an important aspect of the exercise prescription.

Please rate your Exercise Prescription at the time of assessment.

At Fellow Level

Below Fellow Level

N/A - Observation Hours Only

Sample Only

Technique Performance: The ability to perform interventions demonstrating proper patient and therapist positioning, hand placement, body mechanics and amplitude and velocity of the technique.

Please rate your Technique Performance at the time of assessment.

At Fellow Level

Below Fellow Level

N/A – Observation Hours Only

Critical Thinking: The ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.

Please rate your Critical Thinking at the time of assessment.

At Fellow Level

Below Fellow Level

N/A – Observation Hours Only

## 8.2.7. Clinical Mentored Practice: Clinical Mentor Agreement – Form 06

Agreement between FiT and mentor to be filled out by each mentor the FiT works with.

#### Please use the most current form available on the Fellowship Orientation site in Moodle.

	arrow and the second second second	lin College	
FORM 06: BEL		MANUAL PHYSICAL I MENTORSHIP AGREEM	HERAPY FELLOWSHIP MENT
This acreement is entered into this	e dav of	.20 .bv	, who is a Bellin College
(62년 - 948). (62년 - 1	State 197		n good faith to provide a portion or all of the
Fellow-in-Training required 440 cli		-	
The FAAOMPT credentialed Clinic	al Mentor affirms that	they meet the Bellin College requ	irements of a Clinical Mentor for Fellows-in-
Training as described below. They	y also agree to uphold	the Bellin College oath outlined I	below. If there are any financial
considerations, they will be solely	between the FAAOMP	PT Clinical Mentor and the studen	t and not Bellin College.
Fellows-in-training send to the Re	gistrar.		
Fellow-in-training's Signature:			
Clinical Mentor's Name (Please Pri	int Clearly):	and the second secon	
AAOMPT #: Expiral		STREET OF AN EXCLUSION OF THE OWNER	
Phone number;	Em	ail address:	
Mailing address:			
FLI COURT OF LIVE WANTER OF LIVE	ture:		
PAAOMP1 Clinical Mentor's Signa			
	1		
Bellin College Clinical Mentor Oatl As a clinical mentor to Bellin Coll	ege fellows I will:		
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi	ege fellows I wilt ics of the American Phy		sed manner which includes integrating current
Bellin College Clinical Mentor Oath As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp	ege fellows I wilt ics of the American Phy d clinical environment w pertise, and patient valu	ith care delivered in an evidence-ba es.	sed manner which includes integrating current
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere	ege fellows I wilt ics of the American Phy d clinical environment w pertise, and patient valu	ith care delivered in an evidence-ba es. fellow.	sed manner which includes integrating current
Bellin College Clinical Mentor Oath As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce	ege fellows I wilt: ics of the American Phy: d clinical environment w pertise, and patient valu illence in the resident or	ith care delivered in an evidence-ba es. fellow.	
Bellin College Clinical Mentor Oath As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp	ege fellows I wilt: ics of the American Phy: d clinical environment w pertise, and patient valu illence in the resident or	ith care delivered in an evidence-ba es. fellow.	
Bellin College Clinical Mentor Oath As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce	ege fellows I wilt: ics of the American Phy: d clinical environment w pertise, and patient valu flence in the resident or flence in the resident or	ith care delivered in an evidence-ba es. fellow. ad and <u>initial</u> next to each of the a	tatements below)
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce CLINICAL MENTOR REQUIREMEN An OMPT fellowship mentor will have Current Fellow in the Ame	ege fellows I wilt: ics of the American Physics dictinical environment will pertise, and patient value ellence in the resident or ITS (membor, please re- e and agree to all of the prican Academy of Ortho	ith care delivered in an evidence-ba es. fellow. ad and <u>initial</u> next to each of the a following qualifications (please initia spaedic Manual Physical Therapists	tatements below) II]. (FAAOMPT credentialed)
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce CLINICAL MENTOR REQUIREMEN An OMPT fellowship mentor will have Current Fellow in the Ame	ege fellows I wilt: ics of the American Physics dictinical environment will pertise, and patient value ellence in the resident or ITS (membor, please re- e and agree to all of the prican Academy of Ortho	ith care delivered in an evidence-ba es. fellow. ad and <u>initial</u> next to each of the a following qualifications (please initia spaedic Manual Physical Therapists	tatements below) II).
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce CLINICAL MENTOR REQUIREMEN An OMPT fellowship mentor will have <u>Current Fellow in the Ame</u> Actively engaged in patien <u>profit (POPTS setting</u> Agrees with and upholds to	ege fellows I wilt: ics of the American Phys d clinical environment w pertise, and patient valu ilence in the resident or ITS (membor, please re- e and agree to all of the <u>erican Academy of Ortho</u> th care and able to spen the patient care principle	ith care delivered in an evidence-ba es. fellow. ad and <u>initial</u> next to each of the a following qualifications (please initia <u>spaedic Manual Physical Therapists</u> d a portion of clinic hours in 1:1 time es of Bellin College and the clinic	tatements below) II]. (FAAOMPT credentialed)
Bellin College Clinical Mentor Oatl As a clinical mentor to Belin Coll 1. Abide by the Code of Ethi 2. Provide a patient-centere best evidence, clinical exp 3. Foster an attitude of exce CLINICAL MENTOR REQUIREMEN An OMPT fellowship mentor will have <u>Current Fellow in the Ame</u> <u>Actively engaged in patien</u> <u>profit (PCPTS setting</u> <u>Agrees with and upholds t</u>	ege fellows I wilt: ics of the American Phys d clinical environment w pertise, and patient valu ilence in the resident or ITS (membor, please re- e and agree to all of the <u>erican Academy of Ortho</u> it care and able to spen the patient care principle ng occurs in adequate a	ith care delivered in an evidence-ba es. fellow. ad and <u>initial</u> next to each of the a following qualifications (please initia <u>spaedic Manual Physical Therapists</u> d a portion of clinic hours in 1:1 time es of Bellin College and the clinic nd adequately equipped facilities	tatements below) II]. (FAAOMPT credentialed)



#### BELLIN COLLEGE OMPT FELLOWSHIP CLINICAL/ORGANIZATIONAL AGREEMENT

- Clinical mentorship is a vital component to the professional development of Fellows-in-Training (FiTs) engaged in the Bellin College OMPT Fellowship Program. As such, we seek to provide students with mentorship opportunities in patient-centered clinical environments where care is delivered in an evidence-based manner and fully integrates current best evidence, clinical expertise, and patient values. It is essential that FiTs are supported in their pursuit of practicing in an evidence-based manner.
- Belin College requires FiTs to take ownership of their clinical mentorship, and therefore makes the student responsible for establishing clinical mentorship arrangements with clinical facilities and mentors. While Bellin College maintains supervision and oversight into the clinical mentorship process for each student, Bellin College identifies itself as a third party participant in the mentorship arrangement with no direct control or authority over the student, clinical mentor, and other participants in the mentorship activity outside of Bellin College program requirements.
- 3. Bellin College Responsibilities
  - Maintain appropriate accreditation of our fellowship program with the American Board of Physical Therapy Residency & Fellowship Education (ABPTRFE) and the American Academy of Orthopaedic Manual Physical Therapists (AAOMPT).
  - Maintain control over all didactic phases of the program, including: administration of the program, curriculum content, evaluation, faculty
    appointments, admission requirements, promotion, and graduation.
  - Maintain academic records and tracking of program students, to include mentorship records.
  - Review applications of potential mentors including their qualifications, experience, and practice setting.
  - Make final decision on approval or denial of clinical mentors.
  - Review performance of mentors to ensure mentoring quality through annual mentorship observation video review and through review of ELL feedback regarding the mentorship process.
  - Provide clinical mentors with written feedback about their performance mentoring FiTs based on live observation and/or video review.
  - Provide clinical mentors, as requested, with access to online educational content for the purposes of: self-study, integration into the oneon-one mentorship experience, and monitoring of student activity and progress.
  - Maintain sole responsibility for the withdrawal or dismissal of a EIT from the program for academic or disciplinary reasons. The organization/clinical site will maintain the right to request removal of the student from their academic plan and/or clinical mentorship when the student's professional behavior violates existing rules and regulations of the organization/clinic, or for other causes deemed appropriate by the organization/clinic. Both Bellin College and the organization/clinic will jointly determine when and if a student, who has been removed from clinical mentorship, should be permitted to return to this clinical phase. In cases where employment is terminated, students retain the right to continue with their academic plan in an independent relationship with Bellin College and resume their clinical mentorship in arrangements external to organization/clinic.
- 4. Organization/Clinic Responsibilities
  - Provide mentorship opportunities for students in adequately equipped clinical facilities that meet ABPTRFE guidelines and provide clinical exposures in the specialty area of orthopedic manual physical therapy. Note that students in these programs are prohibited from participating in ANY clinical or supervised mentoring in a physician-owned or referral for profit facilities. Please contact Bellin College directly for further clarification on this policy.
  - Provide a patient-centered clinical environment with care delivered in an evidence-based manner, which includes integrating current best evidence, clinical expertise, and patient values.
  - Provide clinical mentorship and supervision of all FiTs using qualified and Bellin College approved clinical mentors who meet the standards of recognized professionals as set forth by the ABPTRFE and AAOMPT accrediting agencies and the stated objectives of Bellin College's educational program. Clinical mentors must meet of the following qualifications: 1) Current Fellow in the American Academy of Orthopaedic Manual Physical Therapists (FAAOMPT credentialed), 2) Actively engaged in patient care and able to spend a portion of clinic hours in 1:1 time with the Fellow-in-training in a non-referral for proft /POPTS setting; 3) Agrees with and upholds the patient care principles of Bellin College and the organization/clinic, 4) Agrees to ensure mentoring occurs in adequate and adequately equipped facilities, 5) Agrees to observation of active mentoring session (at least one annually), either live or via electronic means, by Bellin College program directors or faculty
- Cooperate in the formal evaluation of FiTs as needed, and complete all reports required by Bellin College and the accrediting agencies for conducting the educational program.

Clinic/Organizationa	Director's	Signature
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Date: \_\_\_\_\_

Clinic/Organizational Director's Name (Please Print Clearly):\_\_\_\_\_

Clinic/Organization Name & Address: \_



## Addition of a Site(s)

Program Name: Bellin College Orthopedic Manual Physical Therapy Fellowship Program

Program Director: Julie M. Whitman

NAME (with credentials)	ABPTS CERTIFICATION/RECERTIFICATON (Designate initial year certified Expiration of most recent certification recertification)
TITLE	Cardiopulmonary (Effective Date) (Expiration Date)
	Clinical Electrophysiology (Effective Date) (Expiration Date)
	Geriatric (Effective Date) (Expiration Date)
	Neurologic (Effective Date) (Engination Date)
	Orthopaedic (Effective Date) (Expiration Date)
	Pediatric (Effective Date) (Expiration Date)
	Sports (Effective Date) (Expiration Date)
	Women's Health (Effective Date) (Engination Date)
Number of hours per week dedicated to the esidency/fellowship program: variable depending on when a FIT is on site	OTHER CERTIFICATIONS/ASSOCIATION STATUS (Designate initial year certified Expiration of most recent certification recertification)
PLACE OF EMPLOYMENT	Certified Hand Therapist (Effective Date) (Expiration Date)
SITE WHERE FACULTY PROVIDES INSTRUCTION/MENTORING	Certified Wound Specialist (Effective Date) (Expiration Date)
	Other (Effective Date) (Expiration Date)
AREAS OF RESPONSIBILITY IN PROGRA	1M
RECENT PROFESSIONAL DEVELOPMEN	IT ACTIVITIES (i.e., continuing education, publications, research, etc.)
o the additional faculty listed above meet culty as indicated within the program's a	the program's qualifications for appointment to the program's ccreditation application? 🕅 Yes 🔲 No
	olicies and procedures as a result of the addition of site(s)?

Has the program oriented the faculty at the additional site(s) to the program inclusive of the program's mission, goals, and objectives; program policies and procedures; and evaluation procedures used as part of the program? Yes IN Faculty are provided with the program's policies and procedures manual upon acceptance as faculty, and they are provided an overview of the processes relevant to 1:1 mentorship for Bellin College FiTs.

#### For reports of an addition of clinic site(s) only:

Is the clinical site(s) listed above considered physician-owned, referral for profit? 🔲 Yes 🛛 No

Does the addition of the clinic site(s) change the program from either a single-site or multi-facility program to a multi-site program (please refer to the definitions located in the <u>Accreditation Handbook</u> when responding to this question)? Yes No

Using the Form below, summarize the number of patients/clients (not number of visits) by diagnostic categories evaluated by all physical therapy staff over the last year. Categorize the patient/client population in a manner that clearly captures the intent of the DSP/DASP/DRP/DSSP/analysis of practice upon which the program is based (categorize by diagnosis, impairment, body region, and/or practice location, as needed). For orthopaedic residency, sports residency, and orthopaedic manual physical therapy fellowship programs, please use the Form provided. The patient's primary diagnosis must be counted during the first patient encounter and not during subsequent visits. This chart should also provide a summary of the percentage of the total patient/client population represented in this category.

#### Enter the name of the clinic here

DIAGNOSTIC GROUP OR CATEGORY	NUMBER OF PATIENTS AVAILABLE IN THE CLINIC OVER THE LAST YEAR	% OF TOTAL PATIENTS AVAILABLE IN THE CLINIC OVER THE LAST YEAR
Cranial/Mandibular		
Cervical Spine		
Thoracic Spine/Ribs		
Lumbar Spine		
Pelvic Girdle/Sacroiliac/Coccyx/Abdomen		
Shoulder/Shoulder Girdle		
Arm/Elbow		
Wrist/Hand		
Hip		
Thigh/Knee	8 3	<.
Leg/Ankle/Foot		
Total		5 7

## 8.2.8. Clinical Mentored Practice: Clinical Mentor Faculty Form – Form 07

To be filled out by each mentor and submitted with current CV.

Please use the most current form available on the Fellowship Orientation site in the Learning Management System.

# 8.2.9. Fellowship Graduation Notification Form – Form 08 Purpose

• For FIT to use as guide and submit to verify all graduation requirements have been completed and submitted.

	EIM FORM 08: ORTHOPAEDIC MANUAL PHYSICAL THERAPY FELLOWSHI	P PROGRAM GRAD	UATION NOTIFICATION FO	RM
Fellow-in-Train	ing Name:	Cohort Year:		
Date of reques	to graduste:	- Cohort Start (winter or su	ummer):	•
	** By submitting this request, I am verifying that I have met all graduation requirements for the	EIM Orthopaedic Manua	al Physical Therapy Fellowship P	rogram.
to submit can	be completed by each Fellow in Training. Check each item below that you have completed and submitted to the El be scanned and emailed to registrar@eimpt.com, or faxed to 1-866-2759 (ATTN: Registrar). All forms can be acce I Fellowship Graduation Requirements Google Doc (http://tinyuri.com/GradReqa).			
Graduation Re		Submitted Y/N?	Approved and Marked on your	Comments
	course - Certificate Submitted			
EBP Advand	ced course - Certificate Submitted			
All Curriculu	m Coursework completed with grade of A- or higher (90% or higher)			
Clinical Ment	orship Hours and Clinical Supervised Lab Hour Requirements (Submitted Monthly via Form 01)	Submitted Y/N?	Approved and Marked on your POS Y/N?	Comments
therapist (re leading in pa	g In 2017 or Earlier:         130 1:1 direct mentor supervision hours with an approved FAAOMPT credentialed corded in Form 01, MUST MATCH FORM 3/4/5 SUBMISSIONS, >/= 110+ must be with the Fellow-in-Training stillent care).           g In 2018 or later:         150 1:1 direct mentor supervision hours with an approved FAAOMPT credentialed therapist			
(recorded in patient care)	Form 01, MUST MATCH FORM 3/4/5 SUBMISSIONS, >/= 130+ must be with the Fellow-in-Training leading in			
	al clinical supervision hours (hours where you used manual therapy in the overall mgt of your patients)	1.1		
	's meet all required DSP %. All logged hours meet % for DASP Categories (for categories requiring 5% you need t at 3%; if 10% required, you need to be at least at 8%; if 15% required, you need to be at least at 12%)			
<b>Clinical Supe</b>	rvised Lab Hour Requirements (Submitted Monthly via Form 01)	Submitted Y/N?	Approved and Marked on your POS Y/N?	Comments
Clinical Lab	Instruction Hours Completed for Spine Focus (100 hours) - Jun 09 Cohort and beyond			
Clinical Lab	Instruction Hours Completed for Extremity Focus (60 hours) - Jun 09 Cohort and beyond			
Manual Thera	py Practice Requirements (Submitted Monthly via Form 01)	Submitted Y/N?	Approved and Marked on your POS Y/N?	Comments
40 hours (m	inimum) of manual therapy practice with faculty, FAAOMPT coller gu			
Mentoring Fo	rm Submission Requirements (all to be submitted for every 2 loss of mentoring.	Submitted Y/N?	Approved and Marked on your POS Y/N?	Comments
	entors Assessment of Fellow (Hours recorded on Form 03 nost match form 01 submissions AND corresponding ); limit 20 hours covered per form, except up to 50 allowed for a full week with FAAOMPT mentor.			
Forms 3 & 5	ellow Assessment of Mentor (Hours recorded on Form 04 must match form 01 submissions AND corresponding ); limit 20 hours covered per form, except up to 50 allowed for a full week with FAAOMPT mentor.			
	ellow Self-Assessment (Hours recorded on Form 05 must match form 01 submissions AND corresponding Forms 3 hours covered per form, except up to 50 allowed for a full week with FAAOMPT mentor.			
Form 06 - M	entor Agreement Forms (Agreement must be on file for each mentor worked with)			
Form 07 - A	PTA form 07 and CV on file for each mentor			
	tor Observation/Video on file and approved			
	oval - Each mentor must be approved by EIM (must include live observation / video observation annually). Note u verified that your mentor has been approved by EIM's Director of Mentorship.			
FOTO/Clinica	I Outcomes	Submitted Y/N?	Approved and Marked on your POS Y/N?	Comments
Monthly FO can be appr	FO data entered and up to date - Minimum 150 complete patient cases AND 4 Qrts Minimum Data (alternate forms oved by JW)			
Board Certific	cation (Must be OCS certified by an ABPTS by graduation)	Date of Certification?	Is proof on file with EIM?	Verification noted in POS Y/N?
Evidence Bas	ed Presentations	Location/Date Live	URL (if applic)	Approved by JW Y/N?
Presentation	<ます。Titles	Presenation (if applic)		
Presentation				
	ivity Completed, Submitted, and Approved by Director	Title	Summary/ Reflection	Approved by JW Y/N?
	tivity Completed, Submitted, and Approved by Director	TRIC.	Submitted Y/N 2	Approved by one men
Ocholarly Ac	any completed, cabinitied, and Approved by Director	Submitted V/N2 If No.		For practicals, passed by
Examinations	; (Form 02)	date scheduled?	Approved by JW Y/N?	FAAOMPT mentor-(name y/n)?
0.000008570050000	mination Submitted and Passed			
mentor, reco	am (Live Patient Exam) completed for spine/axial focus (non-post operative patients) - administered by FAAOMPT ording sent to Director and Form 02's signed and sent to EIM (Registrar@eimpt.com). Need pass from FAAOMPT Program Director.			
by your FAA	am (Live Patient Exam) completed for peripheral/appendicular focus (non-post operative patients) - administered OMPT mentor, video recording sent to Director and Form 02's signed and sent to EIM (Registrar@eimpt.com), com FAOMPT mentor AND Program Director.			
1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	xams (4 exams)	Passed Y/N?	Instructor & Location (multiple If needed)	Marked off on POS Y/N?
Mgmt of LE	Course - techniques exam submitted			
	Px Course - techniques exam submitted			
	course - techniques Exam submitted			
Mamt of UE	Course - Techniques Exam Submitted			
	countre rouninges Exem countred		Date verified	Comments
, toonsonar DC	Alternate Learning Experience Forms (submit 1 for each set of learning experiences related to the particular DASF	category that is	Date vernieu	s smillering
Form 09	Atternate Learning Experience Forms (submit 1 for each set of learning experiences related to the particular DASE deficient and being used to address the experience). Submit signed form (both Student and approved mentor sign registrar@eimpt.com.			

## 8.2.10. Alternative Learning Experience – Form 09

#### Purpose

 To document the learning experience undertaken by a FiT to satisfy DASP requirements in categories typically difficult to obtain patient cases (for example but not limited to: cranial/mandibular, wrist/hand, etc.) OR categories that comprise a larger proportion of the DASP but simply aren't well represented in your practice setting (for example shoulder, leg, etc.).

tegory (refer to DSP Table in the Policies and Procedures Handbook):
ence:
Learning Experience:
Learning Experience: Tro Number of Hours: Il learning experiences must be pre-approved whe Program Director
INT OF LEARNING EXPERIENCE (circle any/all that apply)
nical patient rounds with active interaction between EIM fellow and FAAOMPT credentialed therapist npletion of self-study module (APTA home study course, review and primary articles, video lectures, other self- ected learning medium)
low problem solving and consulting with FAAOMPT credentialed therapist on patient case via verbal or written nmunication
ntor and fellow practicing and reviewing exam and intervention techniques related to patient cases ner (enter comments regarding what learning experiences were accomplished):

Program Director Approval:

## 8.3 Appendix C Fellowship Clinical/Supervised Lab Hours Guidelines

APTA/AAOMPT guidelines require 160 hours clinical practical (lab) instruction in OMPT assessment and treatment techniques, with at least 100 hours spent with a focus on the spine and 60 hours on the extremities.

Bellin College's Orthopaedic Manual Physical Therapy Curriculum includes 64 hours in lab during the core course weekend intensives (32 focusing on the spine, 32 focusing on the extremities). Additionally, the weekend courses that are part of the OMPT Patient Management Framework and the Fellow Virtual Rounds courses together contribute another 32-40 hours (distribution of spine vs extremity hours will vary). Lastly, within a 3-yr program, FiTs will have the opportunity to attend up to 4-7 additional "fellows-only lab weekends" or fellowship "open lab" weekends. These sessions will be led by FAAOMPT credentialed faculty and will offer up to an additional 40+ hours of clinical lab time annually for Bellin College fellows. In total, the Bellin College FiT may obtain all needed 160 supervised lab hours by attending the required fellows-only lab weekends (2 per year), the four core course weekend intensives, and additional WIs and/or FOWIs. Additional clinical lab hours through different sources may be accomplished according to the guidelines provided below. FiTs should discuss their course selections with their Fellow Mentor Leader and the Fellowship Director to ensure that the course selection is targeting a key area of desired or needed additional training for the individual FiT.

Note that written petitions must be submitted to the Program Director for other courses/lab hours to count towards the Fellowship Clinical Lab Hours requirement. Course director must approve any substitutions <u>before</u> counting towards lab hours. Additionally, the clinical lab hours must be completed after formal acceptance into the Fellowship.

Clinical lab hours will be recorded on the monthly online Form 01. On this document, Fellows will record the number of hours spent with clinical practical/lab instruction with a focus on the spine and the extremities, respectively. Additionally, the Fellow will record the course attended, location of the course, and who taught the course.

It is the sole responsibility of Fellows to acquire the additional mentored lab hours beyond those provided in the formal courses taken as part of the curriculum. As such, any expenses associated with acquiring these hours is the responsibility of the FiT. Because each Fellow will choose a different path to acquire these hours, it is impossible to include a reasonable estimate for these hours in the cost of the Fellowship.

#### **Guidelines:**

- 1. FiTs can acquire mentored lab hours by attending or acting as lab assistants for any Bellin College sponsored manual therapy courses.
- 2. Bellin College hosts "fellows-only" lab weekends 2-3 times annually, and often FAAOMPT graduates in different regions offer fellowship level "open labs". Two of these fellows-only lab weekends (FOWI) are required during participation in the OMPT Patient Management Framework course and the Fellow Virtual Rounds course. The Open Lab weekends do not replace the required FOWIs, but they can be used to gain extra supervised clinical lab hours. Fellows can gain 16-20 hours of supervised / clinical lab hours by attending one of these sessions, and fellows may attend as many of these sessions as they wish during their time in the fellowship. Attendance in these courses beyond the two required weekends is available as space allows.
- 3. FiTs may coordinate with FAAOMPT therapists to acquire clinical lab hours. Some examples are: 1) spending time practicing techniques with a FAAOMPT in normal daily clinical practice, 2) teaching manual techniques in educational programs with an FAAOMPT therapist supervising and providing feedback, 3) working with a local study group to practice techniques on a regular basis as long as adequately trained / credentialed PTs are present to provide oversight and feedback, 4) attending an Open Lab experience hosted by Bellin College OMPT Fellowship graduates (FAAOMPTs), etc. Hours

achieved in this way should be pre-approved with the Bellin College Fellowship Director and/or Assistant Director.

- 4. Fellows may acquire mentored clinical lab hours through the following 'pre-approved' courses, as well as through other courses specifically approved by the Manual Therapy Fellowship Director. We do encourage fellows to attend a course focused on the soft tissues to complement the Bellin College curriculum.
  - Manipalooza (<u>http://www.manipalooza.com/</u>) fellows-in-training receive a discounted tuition
  - Bellin College courses on dry needling, instrumented soft tissue manipulation, and manually assisted exercise training.
  - St Augustine's MF1 Myofascial Manipulation (http://www.usa.edu/continuing\_education.aspx)
  - Any AAOMPT one and two day pre-conf courses (as student or lab assist).
  - Any neural dynamics course (Butler, Schacklock, etc.), "Mulligan Concepts" Course, or Gibbons and Tehan course (Basic & Advanced Manipulation Course).
  - The following courses taught through Michigan State University College of Osteopathic Medicine CME (<u>http://www.com.msu.edu/cme/courses.html</u>): Exercise Prescription as a Complement to Manual Medicine, Manual Medicine Related to Sports and Occupational Injuries to the Extremities.
  - Exercise Prescription as a Complement to Manual Medicine by Mark Bookhout.
  - Exercise courses taught by Dennis Morgan or Folsom PT (Michael Moore, Tim McGonigle).
  - McKenzie / MDT courses (portions including manual work with patients can count).
  - Any manual therapy focused courses musculoskeletal management courses taught by Evidence in Motion.

## 8.4 Appendix D Fellowship Practical Examination Guidelines

Live patient examinations are an important aspect of assessing the FiT's competencies in evidence based orthopaedic manual physical therapy practice. The two live patient examinations, one with a spine/axial focus and one with an extremities/ appendicular focus, provide an opportunity for the tester to assess integration of evidence based practice, advanced clinical decision making, and expertise in manual therapy techniques with a real patient. Post-surgical patients in the first 6 months of their primary rehabilitation process are not appropriate for and may not be included for these practical examinations. Additionally, the patient should not be previously known to the therapist.

#### The live patient examinations may be conducted by:

- The Program Director or Bellin College Faculty who are Fellows of the AAOMPT.
- Fellowship Clinical Mentors or other FAAOMPT credentialed therapists.

#### **Overall Guidelines:**

- The practical examinations should be conducted within the last 6 months of the fellowship program, and after completion of the OMPT Patient Management Framework course and the OMPT Patient Management Framework TA role. Any exceptions to these timeframes must be approved by the Program Director.
- The live patient practical examination will be conducted with a patient that is new/unknown to the FiT, and will include submitted documentation of all aspects of the initial visit from obtaining general health screening information and health outcomes tools, through the patient history, physical examination, interventions, patient education, exercise instruction, etc.
- At the end of the patient interaction, the FiT should discuss and defend the clinical decision-making used in the patient examination, interventions, and planning for the course of care through discharge. This is documented on the Practical Exam Defense Form (posted in the Fellowship Orientation course). FiTs should not discuss the case with the mentor until the Practical Exam Defense form is completed and submitted.
- All practical examinations and oral defenses will be video recorded unless specifically excused by the Program Director. The video recording, grading by FAAOMPT on a signed Form 02, and "sanitized" patient documentation (initial notes with all patient identifiable information removed) must be sent to the following individuals within 1 week of the examination: 1) the Program Director or assigned representative for the Program Director; 2) Bellin College Registrar.
- The video recording and corresponding documentation will undergo a second review from the Program Director or approved Bellin College Fellowship Faculty member, within approximately 4-8 weeks of the testing date for final approval. If additional testing or remediation is needed, the Fellow-in-Training will be notified within approximately 8 weeks of submission of the video and case documentation.
- At least one FAAOMPT must be present (in the room) during the practical examination.
- If a FiT is not able to perform video recording and submission of the patient case to the Program Director, two FAAOMPT credentialed examiners must be present for the testing session.
- Fellows-in-Training must achieve at least a 90% grade on the practical exam, and must receive passing grades from both testers.
- FiTs may retest up to two times after failing an initial submission. If a FiT fails a practical examination three times, the FiT is failed from the program.

## 8.5 Appendix E Fellowship Professional Behaviors and Expectations

Professional behaviors are dependent on a core set of generic abilities which are behaviors, attributes, or characteristics. These generic abilities are not explicitly part of the physical therapy profession's core knowledge or technical skills, but are required for successful professional practice. They are also extremely important for successful and optimal learning in this fellowship program! Professional behaviors expected of Bellin College OMPT Fellows-in-Training are exemplified by the generic abilities outlined in this Appendix. These qualities and characteristics were drawn from several resources, but primarily from these websites/resources:

- http://www.marquette.edu/physical-therapy/documents/ProfessionalBehaviors.pdf
- <u>https://www.apta.org/uploadedFiles/APTAorg/About\_Us/Policies/BOD/Judicial/Professionalis</u> <u>minPT.pdf</u>
- <u>http://nsuworks.nova.edu/cgi/viewcontent.cgi?article=1482&context=ijahsp</u>

#### Communication

- Professionals need the ability to communicate effectively (i.e. verbal, non-verbal, reading, writing, and listening) for varied audiences and purposes.
- FiTs should: adapt messages to address needs, expectations, and prior knowledge of the audience to maximize learning; effectively deliver messages capable of influencing patients, the community and society; provide education locally, regionally, and /or nationally; mediate conflict.
- Specifically related to the fellowship learning environment, FiTs are expected to respond to faculty/staff within 48 hours of faculty/staff calling, texting, or emailing the FiT. "Faculty/Staff" includes Bellin College staff, mentors, online or WI faculty, FOWI or Open Lab Faculty, Guest Faculty, the Program Director, the Assistant Program Director, and/or any other individual representing Bellin College. If a FiT is out of reach of their phone/email/internet/etc., he/she is expected to respond at the soonest available date.

#### **Accountability & Timeliness**

- Per the APTA, accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist including self- regulation and other behaviors that positively influence patient/client outcomes, the profession and the health needs of society. (PROFESSIONALISM IN PHYSICAL THERAPY: CORE VALUES BOD P05-04-02-03 [Amended BOD 08-03-04-10].
- Accountability is necessary in the clinic, but also in the academic environment. Timeliness is one aspect of accountability that becomes very important in our hybrid learning environment.
- In the Bellin College academic environment, unless specific requests have been made for providing/posting work late, FiTs are expected to post and provide work 100% on time. If the FiT has circumstances that he/she could predict ahead of time would impact timeliness, the FiT should alert and discuss with faculty. If unpredicted (individual or family health issues, accidents, birth of child, etc.), the FiT should notify faculty at the earliest possible reasonable time to coordinate on any remediation needed or pathway to make up required work.

#### Excellence

- A FiT's submissions should consistently use current knowledge and theory, while also integrating judgment, patient/client preference (when applicable), challenging mediocrity, and working towards the development of new knowledge. (PROFESSIONALISM IN PHYSICAL THERAPY: CORE VALUES BOD P05-04-02-03 [Amended BOD 08-03-04-10].
- Submitted work should be at the level reasonably expected for high level post-professional work. This includes submitting work that is well-thought out, complete, and with proper grammar/spelling. FiTs are encouraged to use online tools such as spell-checkers and grammar checkers to ensure work is of high quality prior to submission or posting written work. FiTs should work out any technical difficulties to ensure that submitted videos have both high-quality audio and video.

#### Integrity

- Integrity is steadfast adherence to high ethical principles or professional standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.
- This concept includes being honest and trustworthy, adhering to the highest standards of the profession (practice, ethics), acting based on professional values even when the results of the behavior may place oneself at risk, and handling patient/peer/faculty communication in confidence when indicated (no gossiping or sharing of confidential or sensitive information).

#### **Compassion/Caring**

- This concept includes the desire to identify with or sense something of another's experience, and this is a precursor to caring. Caring is then the concern, empathy, and consideration for the needs and values of others.
- FiTs are expected to display compassion and caring towards their patients, their peers, and faculty/staff. Simply put, FiTs should respect and value others as unique and of value.

#### **Interpersonal Skills**

- Interpersonal skills include the ability to interact effectively with patients, families, colleagues, other health care professionals, the community, and Bellin College faculty and staff in a culturally aware, sensitive, and professional manner.
- FiTs should always conduct themselves in an online environment in a similar professional manner as he/she would conduct himself/herself in a live or "face-to-face" clinical environment, or in-person professional classroom environment. Extra sensitivity and care must be taken on the phone, in webinars, and in written communication because non-verbal communication and/or voice tone/inflection may be absent.
- In any situation involving potential conflict, FiTs are encouraged to reach out via telephone. Further, FiTs should consider asking the Program Director, Assistant Program Director, and/or the Fellow Mentor Leader to also "sit in" or participate in relevant discussions.

#### Responsibility

- Responsibility is the ability to be accountable for the outcomes of both personal and professional actions, as well as follow-through on commitments that encompass the profession within the scope of work, community and social responsibilities, and academic/teaching/mentoring responsibilities.
- At the post-professional level, FiTs should recognize his/her role as a leader, encourage and display leadership, and facilitate program development/modification/updates.

#### **Critical Thinking/ Problem Solving**

- This concept includes the ability to question logically and to identify, generate and evaluate elements of logical argument. Critical thinking requires recognition and differentiation of facts, assumptions, and inferences. Critical thinking includes the ability to identify faulty inferences and/or assumptions and to differentiate relevant and irrelevant information. This concept also includes the ability or skill to use, analyze, and critically evaluate evidence from scientific resources, patient values, and professional experience to develop logical arguments, hypotheses, and clinical decisions.
- High levels of critical thinking/problem solving require the learner/clinician to identify and determine the impact of biases on decision making, and the FiT/learner/student/clinician must be able to recognize and define problems, analyze emerging data, develop and implement solutions, and evaluate ultimate outcomes of the decision-making process.
- FiTs must identify complex patterns of associations, distinguish when to think intuitively vs analytically, challenge others to think critically, weigh information based on sources and levels of evidence, suspend judgmental thinking, consider second and third order effects of chosen solutions, and develop new knowledge through research, professional writing, and/or professional presentations.

#### Humility and Receptiveness of Constructive Feedback

- Receptiveness to constructive feedback, as a concept, includes the ability to seek out and identify
  quality sources of feedback, and subsequently reflect on and integrate the feedback. This concept
  also requires FiTs to provide meaningful feedback to others. The related concept of humility ties into
  "receptiveness to constructive feedback" because it is the quality or condition of being humble, or
  modest opinion or estimate of one's own importance, rank, etc.
- In the OMPT Fellowship Program, FiTs are matriculating through a rigorous post-professional experience which involves a highly critical refining process. FiTs must desire and seek feedback from peers and faculty, and they must receive this feedback in a humble and teachable manner. It is critical to "let go" of one's personal ego and to embrace humility to its fullest extent to maximize one's own growth process in this program. Many who have difficulties with the program are those who struggle with being humble, open, receptive and teachable (and who receive feedback with defensiveness and closed-mindedness).

#### Effective and Proactive Use of Time and Resources

- This is the ability to manage time and resources effectively to obtain the maximum possible benefit of situations such as the fellowship program specific courses, patient care interactions, etc.
- Markers of effective and proactive use of time/resources in a post-professional setting include: organizing and prioritizing effectively; applying best evidence considering available resources and constraints; prioritizing multiple demands and situations that arise on a given day; mentoring others to optimize productivity and/or effectiveness without decrement in quality of care.
- Specifically related to fellowship academic work in a hybrid learning environment, it takes a while to understand how much time to allot to various required activities. However, FiTs should work to manage their own and the faculty/staff's time wisely. While faculty/staff are indeed key resources for FiTs, key resources should ideally be searched to answer questions (specifically ask the Fellow Mentor Leader, read this Handbook, and look at the resources on the Fellowship Orientation and Resource course in Moodle).
- FiTs should try to prepare for and/or anticipate unexpected occurrences that may hinder or restrict his/her ability to work on fellowship projects or assignments. Life/work situations often arise leading FiTs to request academic hold periods or extended time for completion of fellowship. FiTs should target completion of <u>all</u> fellowship requirements well ahead of time (at least by the end of 2.5-3.0 yrs. of enrollment) to account for unexpected life/work situations.

#### **Stress Management**

- This includes the ability to identify sources of stress and to develop/ implement effective coping behaviors. This concept applies for interactions for the FiT himself/herself, clients/patients and their families, members of the healthcare team, Bellin College faculty/staff.
- FiTs should: recognize when problems are unsolvable; assist others in recognizing and managing stressors; demonstrate preventative approaches to stress management; establish support networks for self and others; offer solutions to the reduction of stress; and model work/life balance as able through health/wellness behaviors in professional and personal life.
- FiTs must "know himself" or "know herself" to identify optimal stress management strategies, such as exercise, hobbies/leisure activities, etc. A rigorous three-year program is more of a "journey" than a sprint. Take this mindset and make sure you plan for integration of stress management strategies into daily life.

#### **Commitment to Learning**

- This is the ability to self-direct learning to include the identification of needs and sources of learning. It includes the continual search for, and application of, new knowledge, behaviors, and skills.
- Post-entry level providers should: act as mentors to physical therapy and health care professionals; use mentors who have knowledge available to them; continue to seek and review relevant literature; commit to understanding the PT's many potential roles in the health care environment.
- FiTs should demonstrate commitment to learning from day one through graduation from the program.

#### **Courtesy and Respect**

• FiTs are expected to be courteous and respectful in all their actions and interactions with patients/clients, other health care providers, peers, and faculty/staff. Disrespect in actions/behaviors (such as being disruptive in classroom situations, not paying attention, creating "side-bar" conversation, speaking rudely, and gossiping) are unacceptable.

#### Participation

• Consistent, thoughtful, respectful FiT participation in classroom experiences (online, hybrid, virtual, live) is expected. FiTs are to be leaders in classes, and they should be engaged throughout each course from start to finish unless on excused absence. FiTs should contribute to small group discussions, yet not dominate them. When asked questions, FiTs should respond thoughtfully. When part of a group project/assignment, each FiT should contribute his/her full share of the work.

#### Professionalism

- Overall, this concept is the ability to exhibit appropriate professional conduct and to represent the profession effectively while promoting the growth/development of the Physical Therapy profession.
- At the post-professional level, FiTs should: actively promote and advocate for the profession; pursue leadership roles; support research; participate in program development; participate in community education; demonstrate the ability to practice effectively in multiple settings; act as a mentor to other professionals and students online and in person; and advocate for the patient, community, and society.
- This is a broad term and concept, and all prior mentioned professional behaviors / generic abilities fall under the general concept of professionalism.

While there is clearly overlap in some of the concepts discussed, the behaviors/traits/ qualities desired for FiTs are covered in detail to allow each FiT to have a clear outline of expectations. Breaches in adhering to these professional behaviors/traits can be addressed in multiple ways, and the decision on this approach shall be at the sole discretion of the Program Director. Typically, breaches in adhering to these guidelines are met with tiered or incremental consequences. For example, initial problems with timeliness are often addressed simply by faculty identifying the problem and advising the learner to follow guidelines for responsiveness and for posting or submitting his/her work. If the problem begins to be more systematic and repeated, this may elevate to a probation status and/or ultimate dismissal. In contrast, breaches in ethical standards or integrity may be grounds for immediate dismissal (lying, falsifying data, committing fraud, etc.).

The faculty, staff, and Program Director/Assistant Program Director will make every effort to treat FiTs fairly, and in absence of the most grievous issues will give the FiT and opportunity to improve behaviors prior to the implementation of more serious consequences.

Any probationary status for FiTs based on breaches in professional behaviors/generic abilities shall be documented by the Program Director/Assistant Director on a Student Performance Notification form. The problematic behavior(s) and expected behaviors shall be clearly outlined. Additionally, the timeline for the probationary period shall be identified. FiTs who fail to comply with these identified expectations may be dismissed from the program.

## 8.6 Appendix F: ABPTRFE Grievance Policy



## **GRIEVANCE POLICY**

#### PROCEDURE FOR HANDLING COMPLAINTS AGAINST A CREDENTIALED PROGRAM

- 1. Any person (Complainant) may submit a complaint about a credentialed postprofessional residency or fellowship program (Program) to the American Physical Therapy Associations' (APTA) American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE), in care of APTA's Department of Postprofessional Certification and Credentialing.
- Upon receipt of a complaint, APTA staff from the Department of Postprofessional Certification and Credentialing will forward a copy of the Postprofessional Residency & Fellowship Program Requirements as part of ABPTRFE policies and procedures manual, Procedures for Handling Complaints about a Credentialed Residency or Fellowship Program, and a Complaint Form to the Complainant.
- 3. A Complainant must complete and sign a Complaint Form and submit it to APTA Department of Postprofessional Certification and Credentialing. By submitting a Complaint Form, the Complainant confirms that he/she is willing to have the Complaint Form known to the Program and agrees that the Complaint Form may be shared with the Program.
- 4. APTA staff will review all Complaint Forms to determine if the Complaint Form relates to matters within the scope of the Postprofessional Residency & Fellowship Program Requirements (Requirements) or Residency/Fellowship Program Agreement (Agreement).
  - a. If the Complaint Form does NOT relate to matters within the scope of the Requirements or Agreement, staff will so advise the Complainant, and the Complaint Form will not be sent to ABPTRFE.
  - b. If the Complaint Form DOES relate to matters within the scope of the Requirements or Agreement, staff will so advise the Complainant, and staff will send the Complaint Form (with all attachments, including supporting documentation) to ABPTRFE for review.

- 5. ABPTRFE will review the Complaint Form to determine whether the allegations, if true, would justify action by the Board.
  - a. If ABPTRFE determines that the allegations, if true, would NOT justify action by ABPTRFE, it will so advise the Complainant, and the matter will be closed.
  - b. If ABPTRFE determines that the allegations, if true, WOULD justify action by ABPTRFE, it will send the Complaint Form (with all attachments, including supporting documentation) to the Program for response, and it will request any additional information it deems relevant to determining whether the Program is in compliance with the Requirements or Agreement.
- 6. The Program will be responsible for responding to the Complaint Form and any associated request for information within 45 days, or such other period as ABPTRFE may specify.
- 7. ABPTRFE (and APTA staff) will share with the Program only the Complaint Form and supporting documentation. APTA staff will not provide the Program any initial letter(s) of complaint (except to the extent such material may be part of the supporting documentation submitted by the Complainant).
- 8. APTA staff will provide the Program's response to the Complaint Form and any associated request for information to the entire ABPTRFE for review.
- 9. Within 45 days of receipt of the Program's response, ABPTRFE will:
  - a. Determine the Program is Out of Compliance and:
    - i. Withdraw the credentialed status of the Program, or
    - Request additional evidence to show compliance with designated requirements at the next annual review or as designated by ABPTRFE; or
  - b. Determine the Program is in Compliance and:
    - i. Take no action, or
    - ii. Request additional evidence to show continued compliance at the next annual review.
- 10. With respect to any Complaint Form sent to the Program for response, ABPTRFE will notify the Program and the Complainant of its decision.



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Bellin College admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and other school-administered programs.