



TOURO
UNIVERSITY
NEVADA

SCHOOL OF PHYSICAL THERAPY

HANDBOOK

ACADEMIC YEAR 2024-2025



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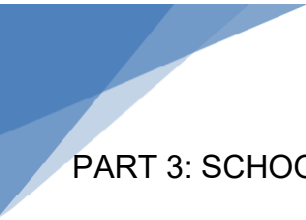
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SCHOOL OF PHYSICAL THERAPY STUDENT HANDBOOK

Introduction

This handbook is a reference intended to provide accurate information to prospective and enrolled students, faculty, staff, and others regarding the Touro University Nevada (TUN) School of Physical Therapy (SOPT). The SOPT Handbook is the policy manual for the SOPT.

The handbook is presented in three parts. Part 1 is about the SOPT and provides relevant information about the program and institution. Part 2 provides the policies and expectations that govern academic performance and essential functions for all students who are enrolled in the SOPT. These policies are designed to promote the high standards for academic competency, professional discipline and personal responsibility that represent the parameters of achievement and behavior expected of physical therapists. Part 3 describes the organizational structure for the SOPT.

The policies, procedures and processes presented in the current SOPT Handbook will apply to all students, faculty, and staff of the School of Physical Therapy.

At the beginning of each school year (July), students will acknowledge receipt of the current handbook and will be instructed regarding changes from the previous version. TUN and the SOPT reserve the right to make changes at any time. New and revised policies and procedures will be shared with students as they are adopted. The university and the program disclaim any misrepresentations that may have occurred because of an error in preparation or typing.

The TUN Catalog (<https://tun.touro.edu/programs/university-catalog/>) contains institutional policies and requirements that govern overall academic performance and student conduct in all programs of study. It is the responsibility of all students to be knowledgeable about TUN policies. In the event of a conflict, the SOPT will defer to institutional policies.

Students, faculty, and staff of the SOPT are responsible for compliance with all policies contained herein and in the TUN Catalog. Questions regarding specific policies should be directed to leadership.

A history of physical therapy at Touro University

Touro University has a strong history of providing physical therapy education since it created the programs on Touro College's two New York campuses, Manhattan and Bay Shore, that have successfully met the standards of the Commission on Accreditation in Physical Therapy Education (CAPTE) since their inception. Touro University Nevada opened in 2005 to meet the need for health professionals in the Western United States. The SOPT was founded in 2008 as part of the College of Health and Human Services (CHHS) to complement the schools of Occupational Therapy, Nursing, and Education.



Degree offered

The SOPT awards the Doctor of Physical Therapy (DPT) degree to graduates of the program.

Part 1: Institutional Policies

Program specific policies and procedures are compatible with TUN institutional policies and with applicable law (CAPTE 2D7, 3G). In the event of a conflict, the SOPT will defer to the TUN institutional policies. Students are referred to the TUN Website or catalog for information on:

- Touro University Nevada is accredited through WASC Senior College and University Commission (WASCUC) and Middle States Commission on Higher Education (CAPTE 3A, 3B). <https://tun.touro.edu/about-us/accreditation/>
- TUN Office of the Bursar: <https://tun.touro.edu/administration/division-of-student-affairs/bursar/>
- TUN Student Health Insurance: <https://tun.touro.edu/admissions--aid/student-health-insurance/>
- TUN Financial Aid: <https://tun.touro.edu/admissions--aid/financial-aid/>
- TUN Student Involvement: <https://tun.touro.edu/life-at-touro-nevada/student-involvement/>
- Title IX: <https://tun.touro.edu/title-ix-policy/>
- The Family Educational Rights and Privacy Act of 1974 (F.E.R.P.A.): TUN Catalog, Appendix A : <https://tun.touro.edu/students/important-resources/addressing-concerns/>

Specific TUN policies regarding academic integrity and student conduct can be found at:

- TUN Academic Integrity: <https://tun.touro.edu/students/academic-integrity/>
- TUN Student Conduct Code: <https://tun.touro.edu/students/student-conduct-code/>

P-1 Program Vision and Mission Statement

The SOPT exists to support the mission and vision of Touro University Nevada:



Mission of Touro College & University System

In the service of knowledge, compassion, and social justice.

Touro College was established in 1970 with the mission to educate, to serve, to perpetuate and to enrich the historic Jewish tradition of tolerance and dignity. Created as an independent institution that would support and strengthen the Jewish community, Touro has remained steadfast in its commitment to Jewish continuity and, more broadly, to humankind.

Since its inception, Touro has served and supported diverse communities, making world-class educational opportunities accessible to all members of society, across all races, nations, and creeds.

Our core values are drawn from our Jewish heritage and the Jewish intellectual tradition, focusing simultaneously on individual development and the greater good. Touro provides men and women an environment that nurtures personal growth and intellectual inquiry in superior academic programs. We also offer neighborhood-based programs that serve, and encourage service to, under-resourced communities.

Our students in turn become accomplished, thoughtful citizens who share and perpetuate our belief in equal access to quality education, the treatment of all human beings with integrity and respect, personal and professional ethics, and the building of a responsive and responsible society.

Mission of Touro University Nevada

To provide quality educational programs in the fields of healthcare and education in concert with the Judaic commitment to social justice, intellectual pursuit, and service to humanity.

Mission of the College of Health and Human Services

The mission of the College of Health and Human Services (CHHS) is to prepare outstanding graduates who demonstrate professional competence, critical thought, leadership ability, creativity, and commitment to compassionate service. Our graduates in education, nursing, occupational therapy, physical therapy, physician assistant studies, and camp administration and leadership are committed to enriching the lives of others, promoting respect for diverse populations, lifelong learning, championing innovative approaches to meeting the needs of the region and state, and becoming recognized professionals in their chosen field.

Vision Statement: Touro University Nevada.

Educating caring professionals to serve, to lead, to teach.



1.1 Mission Statement: School of Physical Therapy

The School of Physical Therapy at Touro University Nevada prepares graduates to become culturally sensitive, ethical, and reflective physical therapists who provide their patients, clients, and communities with evidence-based, interprofessional rehabilitative care including education, prevention, and wellness services.

Vision Statement of the School of Physical Therapy

Inspiring clinical experts passionate about lifelong learning who transform lives through movement, health, and wellness.

1.2 Institutional Objectives and Program Goals

All students who graduate from TUN must demonstrate the following Institutional- and Program Student Learning Outcomes (SLO). The faculty of the SOPT will facilitate each individual student's achievement of these general outcomes through teaching, research, and service activities.

Institutional Student Learning Objectives (ISLO)

ISLO1: Use knowledge, skills and effective communication to benefit diverse communities.

ISLO2: Collaborate across disciplines toward a common goal.

ISLO3: Think critically to make evidence-informed decisions and evaluate conclusions in a real-world context.

ISLO4: Act in a professional and ethical manner.

1.3 Program Goals


Goal 1 - Shape physical therapists who elevate the practice of physical therapy.

Goal 2 - Cultivate continuing clinical achievement of alumni.

Goal 3 - Foster recognition as expert faculty.

P-2 Accreditation Compliance.

The TUN School of Physical Therapy (SOPT) complies with the policies and procedures prescribed in the 2024 CAPTE Standards and Required Elements. The program maintains accurate information regarding accreditation status and program outcomes



that is easily accessible to the public on the program website. The program director of the SOPT ensures timely submission of all required fees and documentation, and reports outcomes to accrediting agencies including graduation rates, performance on licensure exams, and graduate employment rates. Additionally, the program director will ensure that all accrediting agencies will be notified in a timely manner of any required or substantive changes within the program. If any aspects of the program are determined to be out of compliance, corrections will be made bringing the program back into compliance within two years.

The TUN SOPT is accredited by:
Commission on Accreditation in Physical Therapy Education (CAPTE)
1111 North Fairfax Street
Alexandria, Virginia 22314.

Website: <https://www.capteonline.org/>

Telephone: (703) 706- 3245.

Email: accreditation@apta.org.

If you need to contact the program /institution directly, please call 702-777-3050 or email Interim Program Director Jacqueline Randa at jranda@touro.edu

CAPTE Accreditation Standards: Standard 7 (Curricular Content)

In Standard 7 of the accreditation standards, CAPTE details the curricular expectations for entry-level Doctor of Physical Therapy programs. The curriculum should consist of learning experiences covering specific behaviors, skills, and the knowledge that defines the expected performance of the physical therapist in practice. When taken in aggregate, these standards describe the performance of the graduate upon entry into the practice of physical therapy. Each student graduating from the program must demonstrate competency in each of these content areas.

7A The physical therapist professional curriculum includes content and learning experiences in the biological, physical, behavioral, and movement sciences necessary for entry-level practice. Topics covered include:

Anatomy, physiology, pathology, pharmacology, cellular and tissue health throughout the lifespan for the included body systems

- Cardiovascular
- Endocrine and metabolic
- Gastrointestinal
- Genital and reproductive
- Hematologic
- Hepatic and biliary
- Immune
- Integumentary

- Lymphatic
- Musculoskeletal
- Neurological
- Pulmonary
- Renal and urologic systems

Body System Interactions

Differential Diagnosis (Clinical settings)

Health and surgical conditions seen in physical therapy (Clinical settings)

Genetics

Exercise science

Biomechanics

Kinesiology

Neuroscience

Motor control and motor learning

Diagnostic imaging

Nutrition

Pain and pain experiences

Psychosocial aspects of health and disability.

7B1 Practice in a manner consistent with all principles of the APTA Code of Ethics for the Physical Therapist and the Core Values for the Physical Therapist and Physical Therapist Assistant.

7B2 Provide learning experiences to develop service and leadership skills and abilities that address the following:

Legislative and political advocacy

Community collaboration

Health care disparity

7B3 Practice within the legal framework of one's jurisdiction(s) and relevant federal and state requirements.

7C1 Provide learning experiences in contemporary physical therapy knowledge and practice including:

Evidence-informed practice*

Interpretation of statistical evidence

Clinical reasoning and decision-making

Scholarly inquiry

7C2 Provide teaching and learning experiences to improve skills and abilities to educate and communicate in a manner that meets the needs of the patient, caregiver, and other healthcare professionals.

7C3 Provide learning experiences that advance understanding of healthcare disparities* in relation to physical therapy

A. Recognize and adjust personal behavior to optimize inclusive and equitable patient care



and patient care environments.

7D1 Complete an examination and screening to inform patient and client management:

- A. Perform a comprehensive subjective examination.
- B. Perform a systems review.
- C. Select and administer age-appropriate tests and measures that assess the following throughout the lifespan:
 1. Cardiovascular system
 2. Pulmonary system
 3. Neurological system
 4. Musculoskeletal system
 5. Integumentary and lymphatic systems
 6. Growth and human development
 7. Pain and pain experiences
 8. Psychosocial aspects
 9. Mental health aspects.
 10. Determine when patients and clients need further examination or consultation by a physical therapist or referral to other professional(s).
 11. Provide physical therapist services through direct access.

7D2 Evaluate data from the examination (history, health record, systems review, and tests and measures) to make clinical judgments.

7D3 Describe a patient's or client's impairments to body functions and structures, activity limitations, and participation restrictions according to the International Classification of Function, Disability, and Health (ICF).


7D4 Determine a physical therapy diagnosis that guides future patient and client management.

7D5 Determine a prognosis that includes patient and client goals and expected outcomes within available resources (including applicable payment sources) and specify expected length of time to achieve the goals and outcomes.

7D6 Establish a safe and effective plan of care in collaboration with appropriate stakeholders, including patients and clients, caregivers, payers, other professionals, and other appropriate individuals.

7D7 Determine and supervise the components of the plan of care that may be directed to the physical therapist assistant (PTA) based on:

- a. Team-based care.
- b. The needs of the patient or client.
- c. The education, training, and competence of the PTA.
- d. Jurisdictional law and payor policies.
- e. Facility policies.



7D8: Determine and supervise activities that may be directed to unlicensed support personnel based on:

- a. The needs of the patient or client:
- b. The education, training, and competence of the unlicensed personnel
- c. Jurisdictional law and payor policies.
- d. Facility policies

7D9 Create a discontinuation of the episode of care plan that optimizes success for the patient in moving along the continuum of care.

7D10 Select and perform physical therapy interventions for the following to achieve patient and client goals and outcomes:

- a. Cardiovascular conditions
- b. Pulmonary conditions
- c. Neurological conditions
- d. Musculoskeletal conditions
- e. Integumentary and lymphatic conditions
- f. Metabolic conditions
- g. Human development
- h. Pain and pain experiences

7D11 Monitor and adjust the plan of care to optimize patient or client health outcomes.

7D12 Assess patient outcomes, including the use of appropriate standardized tests and measures that address impairments of body functions and structures, activity limitations, and participation restrictions.

7D13 Educate others, using teaching methods that are commensurate with the needs of the learner. Incorporate cultural humility* and social determinants of health* when providing patient and/or caregiver education.

7D14 Manage the delivery of care consistent with administrative policies and procedures of the practice environment, including environmental emergencies*.


7D15 Complete documentation related to Elements 7D1 - 7D13 that follows guidelines and specific documentation formats required by jurisdiction's practice act, the practice setting, and other regulatory agencies.

7D16 Participate in the case management process.

7D17 Participate in activities for ongoing assessment and improvement of quality services.

7D18 Participate in patient-centered interprofessional collaborative practice.

7D19 Use health informatics* in the healthcare environment.



7D20 Assess health care policies and their potential impact on the ever-changing healthcare environment and practice.

7D21 Provide physical therapy services informed by cultural humility* that address primary*, secondary*, and tertiary* prevention, health promotion, and wellness to individuals, groups, and communities.

7D22 Provide physical therapy services that address:

- a. JEDI,* belonging,* and anti-racism,*
- b. Health care disparities* and social determinants of health.*

7D23 Assess, document, and minimize safety risks of individuals and the healthcare provider:

- A. Design and implement strategies to improve safety in the healthcare setting as an individual and as a member of the interprofessional healthcare team.
- B. Follow the safety policies and procedures of the facility.

7D24 Participate in the financial management of the practice setting, including accurate billing and payment for services rendered.

7D25 Participate in practice management activities that MAY include marketing, public relations, regulatory and legal requirements, risk management, staffing, and continuous quality improvement.

Scheduling


Academic year. Academic scheduling is at the discretion of Touro College, TUN, and SOPT administration. The Academic Year begins in July of each year and includes three terms. Term 1 (Summer) occurs July to October, Term 2 (Fall) occurs November to February, and Term 3 (Spring) occurs March to June. Each term includes the equivalent of 17 weeks of academic time. Course schedules are set to assure students are provided with the appropriate number of contact hours for the academic credit assigned. Contact hours are calculated according to the following guidelines:

Lecture-based courses – 15 hours per unit and based on a 50-minute academic hour. (example: a 3-unit lecture-only course would be scheduled for 37.5 in-class hours)

Labs – 45 hours per unit and based on a 50-minute academic hour (example: a course with one unit allotted to lab would receive 37.5 hours of lab)

To ensure adequate time to prepare and study for a course, students should allow a minimum of 2-3 hours outside of class for each hour spent in class. Each course syllabus includes a detailed description of the coursework expectations.

Holidays and vacation days are not included when determining course contact hours.



The actual calendar time of each term is determined based on scheduled holidays and may occur differently year to year.

School schedule. Generally, courses taught on campus are held from 8:00 AM to 5:00 PM Monday through Thursday and from 8:00 AM to 3:00 PM on Fridays. If a course is taught asynchronously online (students access course materials at their own schedule to meet posted deadlines) students are referred to the course syllabus and schedule for more specific information.

Students are encouraged to wait until the finalized schedule for each term is released to make travel arrangements.

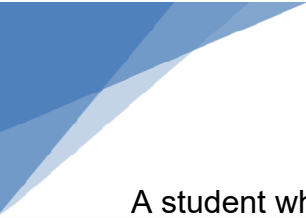
P-3 Completion Requirements for the Doctor of Physical Therapy Degree.

Successful completion of the Doctor of Physical Therapy degree requires the following:

- Cumulative Numerical Grade Average of 80% (GPA \geq 3.0)
 - Completion of professional courses with a minimum grade of 75%
 - Completion of all clinical education courses (DPTV874, 875, 877) with a minimum passing numerical grade of 80%
- Consistently demonstrate the Essential Functions of the School of Physical Therapy
- Completion of 50 hours of service to the community (DPTV724)
- Completion of 20 hours of Integrated Clinical Experience
- Completion of IPEV 701 and 702
- Submission of all forms required for graduation.
- Payment of all tuition and fees to Touro University Nevada
- Complete an exit survey.

Overall Evaluation of Student Performance

The faculty of the SOPT recognize and embrace the responsibility of presenting candidates for graduation who have the education and skills to function in a wide variety of clinical situations and to provide competent patient-centered care to a diverse population of patients. The faculty is charged with the responsibility of educating students as well as determining the capacity of every student for professional competency and responsibility. At regular times throughout the program, the faculty will evaluate each students' capacity and recommend whether the student should continue in the program. Therefore, the faculty reserve the right and have the responsibility to recommend the dismissal of a student when unsatisfactory academic progress, unsatisfactory clinical performance, unsatisfactory professional growth, academic dishonesty, impaired mental or physical health, unsatisfactory personal conduct, failure to comply with published program requirements or other factors deemed necessary for professional competency make it impractical or inadvisable for the student to continue in the program.



A student who has been recommended for academic probation, suspension, or dismissal will be notified in writing and will meet with the Program Director and/or Dean of the College of Health and Human Services (CHHS) regarding the cause for such action.

Student Promotion Committee (SPC)

As needed and during each session, the Student Promotion Committee (SPC) convenes to discuss the performance of PT students during their professional coursework, clinical experiences, and their professional behavior throughout the program. The SPC is chaired by the Chair of Student Services (CSS) and includes the Director of Clinical Education and the core faculty. Ex officio (non-voting) committee members include the Program Director, the Dean of CHHS, the Dean of Students, and a representative from the Office of Academic Services and Institutional Support (OASIS). The SPC abides by the “Academic Standards” as written in the TUN Catalog.

PART 2: ACHIEVEMENT EXPECTATIONS

PROFESSIONAL BEHAVIOR EXPECTATIONS

Conduct Code/Professional Behavior Expectations


The faculty of the SOPT believe that a physical therapy student should display professional attributes that will reflect well on the profession. These attributes are considered as important as academic achievements and will be considered when evaluating the student during the program. The faculty also believe that mentoring a student is just as valuable as classroom/clinical teaching. Each student will be evaluated for professional performance on an ongoing basis and their behavior will be summarized for discussion during the faculty advisor meetings.

Students enrolled at TUN must abide by the TUN Student Conduct Code that is detailed in the TUN Catalog, the Code of Ethics for the Physical Therapist, (<https://www.apta.org/apta-and-you/leadership-and-governance/policies/code-of-ethics-for-the-physical-therapist>) and the Essential Functions of the School of Physical Therapy.

Code of Ethics for the Physical Therapist. Health professionals are bound by legal and regulatory frameworks that demand ethical practice. The Code of Ethics for the Physical Therapist specifically addresses the behavioral expectations of members of the physical therapy profession. The faculty and students of the SOPT will consistently demonstrate compliance with the following principles:

Physical Therapists shall respect the inherent dignity and rights of all individuals.

Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients. 16



Physical therapists shall be accountable for making sound professional judgments.

Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public.

Physical therapists shall fulfill their legal and professional obligations.

Physical therapists shall enhance their expertise through the lifelong acquisition and refinement of knowledge, skills, abilities, and professional behaviors.

Physical therapists shall promote organizational behaviors and business practices that benefit patients/clients and society.

Physical therapists shall participate in efforts to meet the health needs of people locally, nationally, or globally.

The Essential Functions of the School of Physical Therapy. The abilities and skills that students of the SOPT must possess in order to successfully complete the training associated with PT education and fully participate in the profession are collectively referred to as the Essential Functions of the School of Physical Therapy (“Essential Functions”). Students are expected to achieve the knowledge, skills, and levels of competency stipulated for graduation by the faculty and expected of members of the PT profession.

Admission decisions are made on the supposition that the student believes that they meet the Essential Functions with or without reasonable accommodation. Applicants to the SOPT who have been accepted will be required to verify that they understand and meet the Essential Functions.

Applicants are urged to ask questions about the program’s Essential Functions for clarification, and to determine if they meet the requirements. The SOPT acknowledges Section 504 of the 1973 Vocational Rehabilitation Act and the Americans with Disabilities Act of 1990 and asserts that the ability to meet certain Essential Functions with or without reasonable accommodation must be present in prospective candidates. Disclosure of a disability is voluntary; however, admitted students who wish to request accommodation should contact the TUN OASIS Office at tun.oasis@touro.edu or 702-777-3188.

Once enrolled in the program each student must consistently demonstrate these professional behaviors while quickly and accurately learning, integrating, analyzing, and synthesizing information and data to be able to perform as a member of a healthcare team. Students found to be out of compliance with the Essential Functions are at risk of being dismissed from the program.



P-4 The Essential Functions of the School of Physical Therapy

1) Observation/Sensory.

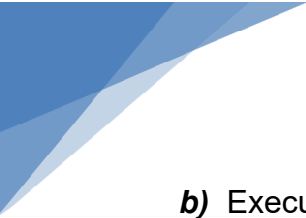
- a) Ability to visually observe materials presented in the classroom, laboratory environment and various settings to include audiovisual presentations, written documents, microbiology cultures, microscopic examination of tissues and gross organs, and diagnostic images (e.g., EKG, NVC, x-ray, CT, MRI, etc.)
- b) Accurately and in entirety observe patients both at a distance and close at hand which requires functional vision, hearing, and somatic sensation. Students must be keen observers of physical movement, the environment, and the interactions of others, in proximity and from a distance, which requires the effective use of the senses (sight, hearing, touch, smell, proprioception, kinesthesia). Examples of observational skills include assessing a patient's posture for asymmetry, monitoring a patient's performance of an exercise at a distance, examining the color and texture of the skin, identifying the odor of infection in a wound, identifying movement of a specific joint, using a stethoscope or sphygmomanometer.

2) Communication.

- a) Communicate effectively and sensitively using oral, written, nonverbal, and electronic form with
 - i) classmates, faculty, staff, and guests of the program
 - ii) patients/clients and their caregivers
 - iii) Clinical Instructors, colleagues, and other members of the healthcare team
- b) Communication includes a level of computer literacy at a level of proficiency that supports academic and professional success.
- c) Effectively speak, hear, and observe patients in order to elicit information, perceive nonverbal communication, and describe changes in mood, activity, and posture.
- d) Observe and interpret both verbal and nonverbal communication.
- e) Evidence-based practice requires students to become critical consumers of the literature.
- f) Documentation is an integral part of physical therapy practice. Students must be able to read, analyze, and prepare concise reports legibly, efficiently, and accurately in a timely manner consistent with current productivity standards and state laws.

3) Motor function and strength.

- a) Elicit information from patients by palpation, auscultation, percussion, and clinical diagnostic maneuvers and interventions.

- 
- b)** Execute movements that require coordination of both gross and fine muscular movements, equilibrium, and functional use of proprioceptive, vestibular, and tactile senses required to provide general physical therapy care and emergency treatment to patients.
 - c)** Properly use clinical instruments, medical devices, and therapeutic equipment for examination and intervention (e.g., stethoscope, sphygmomanometer, debridement, augmented soft tissue mobilization, etc.)
 - d)** Possess sufficient strength and physical stamina to complete the rigorous course of didactic and clinical study and professional practice that may include prolonged periods of sitting, standing, lifting, providing manual assistance/resistance, demonstration, and rapid ambulation or transitional movements.

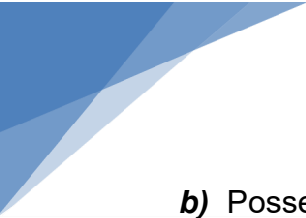
Examples of interventions required are cardiopulmonary resuscitation, maximum assistance lifts and transfers of patients, provide balance stability and guard for falls during transfers, gait, exercise, and functional activities; administer manual therapy techniques, set up and move equipment.

4) Clinical Reasoning Skills.

- a)** Demonstrate the ability to acquire, retain, and apply new and learned information.
- b)** Demonstrate the ability to measure, calculate, reason, analyze, and synthesize information.
- c)** Comprehend three-dimensional relationships and understand the spatial relationships of structures.
- d)** Demonstrate good judgment in patient examination, evaluation, diagnosis/prognosis, intervention planning, monitoring, and modification while demonstrating good time management and appropriate use of resources.
- e)** Demonstrate good judgment as they integrate the results of research into their clinical practice.
- f)** Students must be self-aware and be able to communicate the limitations of their own knowledge when necessary.

5) Behavioral and social attributes.

- a)** Tolerate physically and mentally taxing workloads and function effectively under stress.


- 
- b) Possess the emotional health required for full utilization of intellectual abilities, exercise good judgment, and promptly complete all responsibilities associated with the care of patients.
 - c) Demonstrate mature, receptive, and effective relationships with faculty, staff, classmates, members of the healthcare team, patients and their caregivers/families.
 - d) Possess the qualities of resilience and flexible adaptability needed to work successfully with academic and clinical faculty and staff, classmates, patients/clients and their caregivers in academic and clinical settings.
 - e) Consistently display the personal qualities of compassion, integrity, ethical behavior, commitment, motivation and genuine concern for others that are intrinsic to the profession and will be assessed in the classroom and the clinic.
 - f) Demonstrate the highest level of professionalism during oral, nonverbal, and written communication with their program-level and institutional peers, faculty, staff, and the public.
 - g) Accept constructive criticism without becoming defensive and respond by modifying behavior.
 - h) Provide care in all healthcare settings and be able to deliver care to all patient populations.

6) Participation in skills laboratories.

Active participation in all laboratory sessions is required. Students will participate as patients, therapists, and observers with a variety of people representing different physical attributes, gender, age, disabilities, religious beliefs, sexual orientation, and ethnic backgrounds to simulate the diversity expected in the practice setting.

Accommodation. Students entering the program with, or acquiring deficits of these Essential Functions while enrolled, should discuss them first with faculty. Students requesting accommodation for a documented disability must apply with the Office of Academic and Institutional Support (OASIS). For more information see TUN Disability Services . OASIS will notify the program director in writing of the request and of the suggested accommodation. The full text of the TUN Policy and Procedure for Accommodating Students with Disabilities can be found in the TUN Catalog, Appendix B.

The SOPT will make every effort to provide reasonable accommodation based on evaluation by a recognized professional in the area of the disability; however, in doing so, the program must maintain the integrity of its curriculum and preserve those



elements deemed essential to the acquisition of knowledge and demonstration of technical and decision-making skills required for the practice of physical therapy.

Students requiring an exemption from any of the activities included in the Essential Functions on a temporary basis of greater than 90 days may be requested to take medical leave or resign from the program. Any period of disability during which the student is unable to fully participate in program activities may result in the delay of their progression and eventual completion of the program.

Accommodation to meet the Essential Functions may be at the student's expense.


Communication

All communication between faculty, peers, and staff should be professional. A perspective consisting of mutual respect for others includes the use of appropriate communication. This is intended to promote an atmosphere of constructive and free interpersonal communications. Although freedom of speech is maintained, the manner and direction of that speech must be appropriate. All postings must demonstrate professional language without abuse or intentionally inflammatory purpose. Posted and distributed communication at TUN are to inform, query for information, or provide constructive criticism. Any abuse of these guidelines will not be tolerated.

Classroom Etiquette

Professionalism demands that we recognize and abide by the boundaries between individual expression and social exchange, and communication that is disruptive, inhibits the free exchange of ideas, and is hurtful. Following are examples of behaviors that are clearly inappropriate, unacceptable, and in poor judgment. This list is not exhaustive. These and similar behaviors will be subject to immediate disciplinary action:


- Addressing the instructor in a casual or disrespectful manner. Faculty are to be addressed by their title.
- Habitually arriving late to class or leaving early. See the attendance policies in this manual for specific descriptions.
- Dominating classroom discussions to the point of interrupting the instructor or fellow students.
- Answering cell phones – by text or voice – during class. All cell phones will be turned on silent before entering class (no ringer, no vibrate).
- In classrooms, covered drinking containers are allowed along with small snacks that can be opened and eaten quietly. Students should refrain from bringing full meals to the classroom and be mindful of aromatic foods that may disturb others. In labs, only covered water containers are allowed. No food is allowed in labs.

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- Chewing loudly.
 - Talking during class lectures or while fellow students are giving oral presentations. This includes the giddy behavior that identifies students who are sharing amusing texts using their laptops and tablets.
 - Arguing or openly confronting the course instructor during lectures and/or practicals.
 - Wearing hats or other head coverings that are not considered religious head wear.
 - Surfing the internet, emailing, chatting on social media platforms, and playing computer games.
 - Sleeping or adopting inappropriate postures during class.
 - Smoking or use of tobacco products on campus or within any designated non-smoking area.
 - Use of alcohol, recreational, or illegal drugs before or during any academic, clinical, or professional activities.
 - Intolerance of diversity of values, ethnicity, race, or personality of others.

Email Etiquette

Email has become the standard for business and professional communication. There are expectations for professional communication that students are expected to master during their tenure at TUN. The following guidelines are designed to assist the student in developing a professional image presented through email communication. Violations of the email etiquette will be referred for academic discipline.

- Begin the email with an appropriate salutation.
- Populating address fields:
 - To: people you are directly addressing
 - CC: people you are indirectly addressing who you wish to “FYI” on the message. Be careful to only CC people who have a legitimate need to know the content of the message.
 - BCC: blind copying is sending the message to people without those included in the To or CC knowing. BCC is fraught with risks and, if found out, can appear deceitful or adversarial. Students should refrain from using the BCC feature.
- Only use the “Reply All” feature if every member in the address field needs to receive your response.
- Respond to email within 24-48 working hours.

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- Include a clear, concise description of the content in the subject line.
 - Avoid using abbreviations for real words (e.g. LOL), slang, jargon, and emoticons.
 - Use proper punctuation and avoid using multiple exclamation points.
 - Avoid using all capital letters as this is perceived as shouting and is unacceptable.
 - Messages should be concise and to the point, not lengthy and wordy.
 - Use only plain text. Avoid using various fonts and colors.
 - Always include a signature.

Personal Social Media

As students prepare to enter professional practice, they should realize the risks of allowing access to their social media to faculty, administrators, classmates, patients, clients, potential and current employers, licensing boards, and others who might influence their futures. Students are encouraged to maintain their social media private.

Student communications posted on internet sites, including social networks and social media sites, must adhere to the standards of professionalism including behavioral and ethical guidelines. Appropriate communication between peers, superiors, and subordinates requires an attitude of respect for other persons and the institution that creates an atmosphere of constructive and free interpersonal communications.

Although freedom of speech is maintained, the manner and direction of that speech must be appropriate. All postings must demonstrate professional language without abuse or intentionally inflammatory purpose. Posted and distributed communications at TUN are to inform, query for information, or provide constructive criticism. Any abuse of these guidelines will be dealt with as a professional behavior violation.


The SOPT recognizes the use of personal sites to document life events and opinions. While enrolled in the program, we ask that students ensure that comments, pictures, and opinions are uplifting and encouraging to fellow classmates and staff. If a student's blog comes to the attention of the faculty and/or staff for deriding the program, students, faculty, or staff of TUN or the SOPT, the student will be subject to the disciplinary process.

Use of intellectual property

All program and course materials (i.e. PowerPoint presentations, written notes, laboratory handouts both whole and in part, etc.) created by the faculty, staff, or students are the sole property of TUN and/or its faculty and cannot be used without the written permission of the author.

P-5 Attendance Policy

Attendance is mandatory for all SOPT courses, curricular and co-curricular events, and Clinical Experiences.



The SOPT program is intense. Because much clinically important information is presented only once, the SOPT requires mandatory attendance at all lectures, laboratory activities and clinical assignments. Attendance is considered an aspect of professional responsibility and individual dependability. Absences will be noted on the student's evaluations. Attendance at social events (other than religious observances) or matters of convenience will not be acceptable reasons for absence. The Program Director will make the final determination on an excusable reason.

Prior to planned absences, whether excused or not, students are required to complete an Absence Request Form that will be maintained in the student's file. Absences must be for substantial reasons. The CSS is responsible for reviewing all absences. The Program Director's determination on excused/unexcused absences is final.

Unexcused absences will not be tolerated and may be grounds for review by the SPC. The committee may recommend failure of the course/clinical experience, academic probation, suspension, or dismissal.

Emergencies, illness, and injury are accepted as excused absences. Absences longer than 3 days must have a doctor's excuse. All students who are absent because of emergency, illness, and injury should contact Student Health at (702) 777-9970 or tun.student.health@touro.edu. For absences related to a medical issue, students must contact OASIS (<https://tun.touro.edu/life-at-touro-nevada/academic-success/>), especially if they are interested in qualifying for an ADA accommodation, which may exempt them from this policy.


Absence from class or lab for any reason does not relieve the student from responsibility for the material covered.

Students are referred to the Clinical Education Handbook for specific requirements covering attendance during Clinical Education.

Excused absences.

Each request for excused absence will be considered separately on its own merit. Whenever possible, absences, whether excused or not, should be approved in advance. Examples of excused absences may include:

- Attendance at professional, community, or institutional events considered beneficial to the student's education are subject to approval by the program director. Examples of events which may be considered excused absences are attendance at professional conventions, service on TUN or SOPT committees, or participation in community service events.
- Illnesses. An illness lasting more than three days will be excused with a physician's written and dated excuse.

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- Medical Appointments that have been approved 2 weeks in advance. Approved absences for medical appointments will include the appointment plus travel time.
 - Military obligations on orders (National Guard/Reserve). Students are referred to the Excessive Absence Policy in the TUN Catalog.
 - Extenuating circumstances that may include jury duty, mandatory court appearances, birth of a child, or funeral for immediate family (student's or spouse's mother, father, sister, brother).
 - Natural disaster, severe weather, or other event that elicits a response from the local, regional, state, or federal government.

In the event of an absence:

- Students should notify faculty the week before scheduled absences or, with unexpected absences, notify the instructor prior to class.
- Students should contact faculty as soon as possible upon return to campus.
- An appropriate deadline will be agreed upon at the time of the assignment. Faculty may request completion of equivalent assignments rather than the actual missed work.
 - Make-up time for extended excused absences (>3 days) will be allowed at 3 times the days missed. (Example: for an excused absence of 4 days, the student would have 12 days to make-up the missed work)
- No punitive grading is allowed if work is submitted by the agreed deadline. Punitive grading will apply to work turned in after the agreed deadline.

Student Absence Related to Professional Organization Sponsored Activity

The SOPT believes that leadership is an essential component in the educational process. This may require that students attend off campus activities during class/clinical experience time. Off campus activities must be in accordance with the students' professional development. It is the responsibility of the student or approved student organization to coordinate the event and receive authority to proceed. Students seeking permission to attend an off-campus conference, program or activity must not be on academic probation and must be in good academic standing (See Academic Standing) for the courses they will miss.

A planned absence must be approved by the CSS during the professional component and by the Director of Clinical Education (DCE during Clinical Education.)



Personal Days.

To encourage school/life balance and ensure the mental health of our students, each student enrolled in the professional component of the program is authorized three personal days per term. Personal days may be used for otherwise unexcused absences such as family events, “mental health” days, and other events of concern to the students. Personal days can only be taken with advanced notice and with the approval of the students’ faculty and the CSS. A record of the request and approval of personal days will be maintained in the student’s record on EXXAT.

Students are referred to the Clinical Education Handbook for a description of approved absences during the clinical education component of the program.

Tardiness

Promptness is an important trait for healthcare professionals. A student arriving late to class is tardy. Not only does tardiness to class disturb the instructor and other students, but it reflects a lack of professionalism. Excessive tardiness will negatively impact the student’s professional evaluation, lead to disciplinary action, and a meeting with the program director. A student who expects to be tardy should notify the instructor as soon as possible. Advance notification does not necessarily excuse tardiness.

Excessive Absence Policy

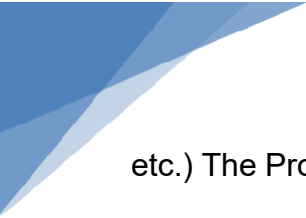
Per the university catalog:

“A student cannot exceed 10 consecutive days of excused and/or unexcused absences, or more than 15 excused and/or unexcused absences in any given 30-day period. A student who exceeds the allotted number of absences must request a leave of absence for the remainder of the academic year or the student will be suspended or dismissed.”

Students are referred to the SOPT Clinical Education Handbook for information regarding attendance during the Clinical Experiences.

Professional Performance Evaluation

The faculty of the SOPT believe that a graduate should display professional attributes that will reflect well on the profession. These attributes are considered as important as academic achievements and will be considered equally when evaluating the student’s progression throughout the program. Professional performance includes attendance, punctuality, attitude, behavior, appearance, respectfulness to instructors and other students, and listening attentively in class (not talking, emailing, surfing the web, texting,



etc.) The Professionalism Assessment Form is used for this purpose.

Professional behavior is a component of academic grading in all courses and is subject to the plan for Early Intervention/Progressive Discipline. Faculty may set classroom behavior rules to include assessing behavior point deductions, removing the student from class, or initiating the plan for Early Intervention/Progressive Discipline. The instructor in each course reserves the right to deduct a maximum of 9% from the course grade for unprofessional behavior. No warnings are required prior to assessing penalties for unprofessional behaviors or violations of academic integrity. Faculty observing unprofessional behavior in their course(s) will send the student an Academic Warning describing the unacceptable behavior and the point deduction to be assessed. Records of these penalties will be maintained in EXXAT.

Students persistently demonstrating unprofessional behavior may be subject to review by the SPC during which the committee may recommend behavioral interventions, Academic Probation, suspension, or dismissal.

ACADEMIC PROGRESSION


Academic performance standards are set to ensure that the integrity of the program and institution are maintained. The SOPT prides itself on the pursuit of academic excellence and as such follows academic and ethical standards to maintain the high scholastic status of students.

Academic Performance (CAPTE 3C)

Federal regulations require TUN to establish standards of academic progress for students who are the recipients of federal student aid. TUN has established specific guidelines for satisfactory academic progress for students. All students who receive federal financial aid must meet federal and institutional standards of satisfactory academic progress in order to retain eligibility to receive federal financial aid. SOPT policies for academic progress are congruent with the Touro-wide Satisfactory Academic Progress Policy. In the event of conflict, the SOPT will defer to TUN institutional policies.

The faculty of the SOPT are charged with the responsibility for educating students as well as determining the capacity of every student for professional competency and responsibility in the knowledge, behavior, and skills of a physical therapist. The program does not guarantee succession through the curriculum; it is the responsibility of the student to successfully progress through the curriculum based on performance factors including grades and professional behaviors. Periodically and at the end of each term, faculty will assess each student on specific physical therapy competencies that the students must successfully complete to progress in the curriculum.

A student must fulfill these academic requirements prior to progressing to the next term of the program:

- 
- Students must complete all summative coursework with a passing grade of $\geq 75\%$ or as specified in the syllabus.
 - Students must complete each course with a grade $\geq 75\%$.
 - Students must maintain a term GPA of 80%.
 - Students must maintain a cumulative GPA of 80%.

Plan for Early Intervention/ Progressive Discipline

Academic and behavioral progress is reviewed periodically and at the end of each term by the student, their advisor, the CSS, the DCE, and the SPC. Students who fail to maintain satisfactory progress at any time will be subject to the plan for Early Intervention/Progressive Discipline.

Students may be identified for Early Intervention/Progressive Discipline by any of the following:

- Academic performance
- Attendance records
- Feedback from classmates, faculty, or staff campus-wide
- Self-reports
- Reports from others
- Surveys and Questionnaires

Academic indicators suggesting the need for Early Intervention/Progressive Discipline include:

- A score of Below Standard or Failure of an assignment/exam/practical
- Consistently low grades ($\leq 80\%$ or Meets Standard)
- A recent drop in performance
- Professional behavior issues
- Failure to consistently demonstrate the Essential Functions of the School of Physical Therapy
- Frequently missed deadlines
- Lack of attendance and/or unapproved absence

Sometimes students struggle to learn due to environmental concerns. Environmental indicators for Early Intervention/Progressive Discipline include:

- Reports of financial, housing, or issues/changes among their support networks
- Significant changes in personal circumstances affect academic performance.



Students coping with environmental stressors are encouraged to seek support through the array of services offered through the Department of Student Affairs.

Personal issues can also interfere with learning. Personal indicators for Early Intervention/Progressive Discipline include:

- Reports of social isolation or conflict
- Change in affect or other indicators of depression, exhaustion (burnout).
- Changes in health.

Students coping with environmental and personal stressors are encouraged to seek support through the array of services offered through the Department of Student Affairs.


Phase 1: Identification/ Documentation. When students are initially identified as demonstrating academic, environmental, or personal indicators that could adversely impact their progression in the program, they will have a meeting with their advisor to discuss potential solutions and available services. Although the student's confidence will be maintained to the extent possible, it is imperative that faculty of the SOPT be aware of matters that may indicate the need for additional learning support. The meeting with the advisor will be documented in a follow-up email to the student confirming the plan to ensure appropriate progression. A record of this meeting will be maintained in EXXAT.

Phase 2: Intervention/ Academic Warning with a Learning Contract. Continued poor academic performance may result in a verbal or written Academic Warning that may be conducted by a course instructor, advisor, the CSS, the program director, or at the direction of the SPC. The Academic Warning will state the specific instances of concern. At the discretion of the faculty, the student receiving an Academic Warning may be enrolled in a learning contract identifying an array of activities to support the students' learning. Failure to comply with the terms of the learning contract may result in progression of discipline. An Academic Warning should be taken as notice of impending formal action if the area of concern is not improved.

The Academic Warning will be maintained in EXXAT. Academic Warnings may be considered during the students Review of Professional Behavior and during deliberations of the SPC.

Phase 3: Escalation/ Learning Contract and Academic Probation. At the recommendation of the SPC and with the approval of the program director, a student who is failing to meet the program's expectations may be placed on academic probation. Students on academic probation will be enrolled in a learning contract with specific requirement to participate in an array of activities to support their learning. A learning contract includes measurable goals, the associated steps to achieve them, and a timeline for the achievement. Participation in the terms of a learning contract are required. Failure to comply or to succeed may be cause for dismissal.

During the academic probation, the student is expected to demonstrate



satisfactory and timely completion of all graded and non-graded assignments and courses while consistently demonstrating professional behavior.

When a student is placed on academic probation, the program director will notify the student in writing and will include the reasons for the probation. A student will be removed from academic probation only after successfully meeting the minimum academic standards while enrolled in a full course load for an entire term. When the term(s) of academic probation have been satisfied, the program director will provide a letter to the student indicating that probation has been rescinded. Records of this communication will be maintained in EXXAT.

When a student is placed on academic probation, it may be noted in the student's academic file and official transcript. Subsequently, when a student has successfully satisfied the requirements of probation, the transcript notation may be removed.

While a student is on Academic Probation, the SPC reserves the right to recommend other restrictions that may include, but not be limited to:


- Removal from representing the class and/or program as a class officer or in another leadership role within the university or local or national leadership organization.
- Restrictions on out-of-town clinical placement which may impede or delay the student's completion of all required clinical activities on time.
- Other sanctions as appropriate.

Removal from Academic Probation. Students who have maintained a state of Good Academic Standing for two consecutive terms while maintaining a full course load will be removed from Academic Probation.

Phase 4: Decision Process. The faculty of the SOPT are dedicated to student success; however, students who demonstrate a pattern of repeated failures, unprofessional behavior, or other inappropriate conduct, will be subject to review by the SPC. Potential outcomes of the review include continuation of probation with final warning, suspension, dismissal, or, in some cases, the student will be allowed to take a leave of absence or withdraw from the program. In any case, the SPC will make their recommendation to the program director who has the final authority in each decision.

Continuation of probation with final warning. The SPC may recommend to the program director that the student should be placed on or continue Academic Probation with extended time to meet the previously defined and/or additional goals. The program director may accept or modify the recommendations of the SPC. The program director's decision is final. The conditions of the final warning and Academic Probation will be maintained in EXXAT.

Suspension. Suspension is a forced temporary leave from the program. With approval from the program director, the student will leave the program returning during the next academic year and the same curriculum cycle. For instance, a student



suspended during the Spring term of Academic Year 2024 would return for the Spring term of Academic Year 2025.

Students who are returning from suspension will automatically be placed on Academic Probation and will be enrolled in a learning contract.

Leave of Absence. Students who choose to interrupt their attendance but intend to return and continue their study may apply for a leave of absence. Students are referred to the TUN Catalog for a complete description of the process required for a leave of absence. Briefly, the student must meet with the program director or Dean of CHHS to discuss the reason(s) for the leave and the effect the leave will have on their academic progress. Students taking a leave of absence typically return during the same term the following academic year.

Dismissal. A student is subject to dismissal if they have failed to meet the minimum standards of progression as stipulated in the academic regulations of the program and the university. The program and university may require dismissal at any time it deems necessary to safeguard its standards of scholarship, to conduct orderly operations, and to ensure a foundation of knowledge necessary for safe and effective patient care.

Examples of reasons for dismissal may include, but not be limited to:

- Previous placement on Academic Probation with failure to achieve satisfactory progress as defined by maintaining an overall average numeric grade of 80% in each course during the professional component of the curriculum.
- Failure of a course not remediated successfully or for which remediation was not offered.
- Three failing grades on summative assessments in any single course or combination of courses.
- A cumulative average numeric grade of $\leq 80\%$
- Excessive reliance on remediation to pass summative assessments.
- Consistent or egregious failures to demonstrate professional behavior.

After a thorough review of student performance:

- The SPC may recommend the student's dismissal to the program director.
- The program director has the authority to accept or modify the committee's recommendation.
- The program director will notify the student of a decision within five business days following the committee's recommendation. If warranted, the program director may request additional time to complete the review from the Dean of CHHS.

The decision of the program director is final unless otherwise stated in the Academic Appeal Process described in the TUN Catalog.

Withdrawal. Students choosing to withdraw from the program are choosing not



to return. The process for withdrawal is described in the TUN Catalog.

P-6 Maximum timeframe for program completion

The Doctor of Physical Therapy program is a three-year program. Regardless of circumstance, the maximum timeframe for program completion is 4 ½ years. If at the end of any term it is determined that a student cannot possibly complete the program's graduation requirements within that time, dismissal for "unsatisfactory academic progress" will be recommended and conducted according to procedures published.

Academic grading policies

Student grades reflect the quality and content of work the student has produced as part of course assignments within the curriculum, and the student's clinical performance in clinical assignments. Course grades are the primary factor in determining academic status in the program. Syllabi will state the specific requirements and graded components of individual courses. Students are encouraged to review the posted syllabus for each course at the beginning of the term.

The minimum passing grade for all courses is 75%.

Standardization of scores

For most summative assessments and final course grades, scores will be standardized using a z-score that is calculated around the median score (the median being robust to outliers.) A z-score is calculated using the median (middle) score and the Standard Deviation, which reflects the spread of the scores around the median. z-scores place individual scores within the first, second, and sometimes third standard deviations. z-scores will be interpreted as follows:

Distinction - Scores above the first standard deviation above the median ($> +1$)


Exceeds Expectations - Scores in the first standard deviation above the median (+1)

Meets Expectations - Scores at the median (0)

Approaching Expectations - Scores in the first standard deviation below the median (-1). Students receiving scores Approaching Expectations may be identified as requiring additional educational support and may receive an Academic Warning.

Below Expectations - Scores in the second or third standard deviation below the median (< -1). Students receiving scores Below Expectations are expected to remediate the event and will receive an Academic Warning.

Consistency in grading



Typically, grading assessments is completed by the primary instructor, but for complex assessments, the instructor may enlist the help of other core or adjunct faculty with expertise in the content area. When multiple people are grading, they will take steps to ensure consistency. When there is a lack of consensus, the primary instructor's grade will be posted.

Rounding

In-term assessment grades may be reported to the tenth position, but all final course grades will be rounded to the nearest whole number.

Turnaround time for grades

In general, students should expect to have feedback and their grade on assessments returned within one week. Turnaround time on assignments or exams can vary considerably. Students should be patient and direct any concerns regarding grading time to the instructor or program director.

Use of rubrics

To ensure fairness, consistency, and clarity, all skills checks, practicals, and written assessments will be graded using a rubric. Instructors reserve the right to determine when or if the rubric will be made available prior to the due date. Whenever a rubric has been used to assign grades to an assessment, students will be given an opportunity to review the completed rubric.

Posting of grades

All graded assignments will be posted to the Grades section of Canvas. Comments on assignments will be returned by course email or through Canvas unless otherwise specified by the course instructor. Final grades will be available one week following the completion date of the course.

The SOPT adheres to the Grading System published in the current TUN Catalog.

Academic remediation

Accreditation criteria for Physical Therapy programs require the faculty to assure each student has demonstrated competency in each area of the program. Remediation following a failed attempt on a summative assessment allows the student to demonstrate competency in a course or a component of a course with the help of additional time and study.

Students requiring remediation to pass a summative assessment will be



**automatically enrolled or progressed in the plan for Early Intervention/
Progressive Discipline.**

Failure (Below Expectations) of an in-course assessment

All students receiving scores Below Expectations on summative assessments are expected to remediate. All students remediating an assessment will meet with the instructor, their advisor, and the CSS. Important topics should include:

- The students' reflection on how they prepared for the assessment.
- Their typical study habits.
- Any personal or environmental factors that may have contributed to the failure.
- Identification of a learning plan to optimize the student's opportunity to demonstrate competence on the remediation.

A record of the discussion and the learning plan developed for the remediation will be maintained on EXXAT.

Students who have successfully remediated an assessment will receive the minimum passing score for the assessment.

Failure of a course

A student who has failed all the exams and/or all the practicals in a course has failed the course regardless of cumulative score. A student who has failed to achieve a cumulative passing score has also failed the course.

Students who have failed a course or courses will be subject to review by the SPC. Potential outcomes of the review include:

- Immediate remediation of the course while being allowed to continue enrollment in the next term
- Suspension and repetition of the failed course during the next curricular cycle
- Dismissal
- In some cases, the student will be allowed to take a leave of absence or withdraw from the program.

In any case, the SPC will make their recommendation to the program director who has the final authority in each decision. To understand the program response to course failure, students are referred to the discussion of Phase 4: Decision Process in the plan for Early Intervention/ Progressive Discipline.

A student who is allowed to remediate a course will meet with the instructor, their advisor, and the CSS to develop a learning contract including a specific timeline for the remediation. Every effort will be made to ensure the course remediation is complete prior to the first round of exams in the next term.



Students who fail the remediation will be referred to the SPC for review.

Students who successfully complete the remediation will receive the minimum passing score for the course (75%).

All students who have failed a course but are allowed to continue in the program will be placed on Academic Probation.

Response to Multiple Remediations

The remediation process is designed to support students as they work to master complex content, but frequent remediation may demonstrate the student is unprepared for the rigors of the program. Students who have required three remediations during a single term will be referred to the SPC for review and may receive an Academic Warning or be placed on Academic Probation according to the plan for Early Intervention/ Progressive Discipline.

Grade Appeal

Coursework Grade Appeal


After assessment grades are posted, the grade may only be changed by the course faculty or the program director. A grade appeal must be directed to the instructor within two business days of the grade posting. Grade appeals should be grounded in facts and policy rather than making a plea for lenience based on personal circumstance. The decision of the course instructor will be communicated to the student within two business days of when the appeal was received. If the student is not satisfied with the instructor's decision and/or explanation, the student may submit a grade appeal to the program director. In cases where the program director is the instructor of the course, the written appeal should be sent to the CSS. Appeals on the program director's grading will be heard by the SPC. The program director must make and communicate a decision within two business days of when the appeal was received. The decision of the program director or SPC will be based on information in the syllabus, instructions for the graded component, grading rubric, and academic policies set forth in this handbook. The decision of the program director or SPC is final.

The appeal of grading on individual tests or assignments must be discussed with the course instructor within one week of posted grades.

Course Grade Appeal

An appeal of final course grades must follow the procedure described in the TUN Catalog. Per the catalog:

“After final grades have been submitted, a failing course grade may be changed only by the course faculty or by the Grade Appeal



Committee. Grade appeals must be directed first to the course faculty within two business days of final grade submission. Decision of the course faculty will be communicated to the student within two business days of when the appeal was received. If the student is not satisfied with the course faculty's decision and/or explanation, the student may submit a grade appeal form to their school and/or course director. The school and/or course director must make and communicate a decision within two business days of when the appeal was received. If the student is not satisfied with the outcome, the student may submit a grade appeal form to the Grade Appeal Committee through the office of their college dean. The form and supporting documentation must be received by the college dean within three business days following the school and/or course director's decision. The college dean will forward the form and documentation to the Grade Appeal Committee, and the dean will notify the school/course director that the student has appealed the grade and will request documentation from the faculty and school/department to support the decisions made. The decision of the Grade Appeal Committee will be communicated to all parties involved within fourteen calendar days of when the form was received from the student. Every attempt should be made to reach a decision as quickly as possible. The decision of the Grade Appeal Committee is final."

P-6 Academic Standing

Academic standing is a general descriptive term of a student's academic progress in the curriculum. The following descriptive terms will be used during periodic reviews and in any correspondence, reference, honors or scholarship application that a student requests.

Satisfactory Standing

Students are considered in Good Standing and making acceptable progress towards graduation when all the following items are present in their record:

- Cumulative Numeric Grade Average of $\geq 80.0\%$ (GPA ≥ 3.0)
- Consistently demonstrates the essential functions of the School of Physical Therapy.
- Current record of up-to-date immunizations
- Current record of CPR certification
- Completion of training for:
 - Drug and Alcohol Use
 - Sexual Harassment
 - Confidentiality of Records and Information (HIPAA)
 - Blood borne pathogens
 - Biohazards



Unsatisfactory standing

Students are considered in Satisfactory Standing and making uncertain progress towards graduation when any of the following items are present in their record:

- Cumulative Numerical Grade Average between 75.0% to 79.9% (GPA 2.0-2.9)
- Academic Warning or Academic Probation status
- Incomplete record or out-of-date immunizations.
- Outdated CPR certification.
- Incomplete participation in training for
 - Drug and Alcohol Use
 - Sexual Harassment
 - Confidentiality of Records and Information (HIPAA)
 - Blood borne pathogens
 - Biohazards

P-7 Advisement and Counseling

Faculty availability

SOPT faculty are committed to an open-door policy giving students generous access to their instructors. Availability of faculty to meet with students may be limited due to faculty commitments to teaching, research, clinical obligations, or service responsibilities. Students wishing to speak with faculty about specific issues are encouraged to make appointments. Faculty may use on-campus and virtual office hours or will arrange appointments directly with students for advisement or other student needs.

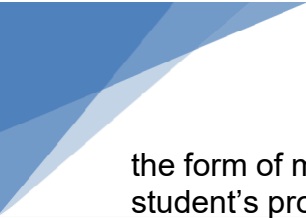
Clinical Faculty

Clinical faculty are those professionals who have been assigned to supervise a TUN SOPT student in a clinical or community setting. When students are assigned to a clinical placement, their schedule will be determined by the normal operating hours of the clinical site and the individual assigned as the supervisor. Clinical faculty are supervised by the DCE for their SOPT activities.

Faculty Advisors

Upon matriculation, each student will be assigned an advisor from the SOPT faculty by the program director. A student may request a change of advisor from the program director and be reassigned at the discretion of the director and with respect to individual faculty workload.

Advisement is an integral element in the growth of a PT student. Although it can take



the form of mentoring, it is also essential in identifying elements that could impede the student's progress. Counseling of the student may also be required from time to time should issues arise. It is the responsibility of both the student and faculty member to ensure that regular meetings for advisement occur. Both parties have the same responsibility should academic or personal issues arise requiring counseling.

If a student is identified as experiencing academic difficulties, the student will meet with the course instructor and their faculty advisor as soon as possible. If the student's advisor is also the instructor, the CSS will step in on behalf of the student. Upon any failure of a summative assessment (i.e., exam, practical, project, presentation, etc.) the student and advisor are required to meet within 1 week from when the student was notified of the failure. Documentation of all counseling/advising sessions will be entered in the student's record in EXXAT.


In certain circumstances, the CSS, DCE, and/or program director may be involved during these meetings. Prior to this meeting, the student should conduct a personal self-assessment focusing on potential sources of difficulty and identifying possible plans for improvement. Following these meetings, the faculty will assist the student in identifying institutional resources and/or student services to assist the student in their continued success in the program.

Roles and Expectations of the Faculty Advisor

- Listen to the student's concerns or needs.
- Be available during posted office hours or by appointment to meet with students to discuss academic difficulties which have not been resolved at the instructor level and to suggest possible remedies.
- Acquaint the student with available institutional resources and student services and, when appropriate, refer the student to specific services, to include student counseling, student health, and OASIS.
- Monitor academic and clinical progress and be available for consultation if the student's progress is in jeopardy.
- When appropriate, share one's professional experience in the areas of professional development, career opportunities, and personal growth as related to the PT profession.

Roles and Expectations of the Student Advisee

- Have a working knowledge of all program policies and procedures.
- Provide contributory information in a clear, concise manner to facilitate the advising process.
- Offer insight into one's academic performance and potential deficiencies.
- Act on academic recommendations and suggestions offered by the course instructor and faculty advisor.
- Be responsible for the successful completion of all coursework and practical

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- experience throughout the professional and clinical components of the program.
 - Follow-up on referrals for student services which may include professional counseling, campus healthcare services, disability services, learning support, etc.

To protect each student's privacy, visitors and guests are not allowed to attend meetings between the student and faculty or staff of the School of Physical Therapy except by prior arrangement.

P-8 Dress code

The SOPT adheres to the dress code presented in the TUN Catalog. Students must maintain a neat and clean appearance befitting students attending a socially conservative professional school; therefore, attire should convey a professional appearance whenever the student is on university grounds or off campus for co-curricular activities or clinical rotations.

Hygiene

Students are expected to consistently maintain the highest standard of personal hygiene and professional appearance during class and clinical activities.

Hair and skin are expected to be clean and odorless. Students should refrain from wearing scented perfumes and lotions.

Hair must be neat and clean. Long hair should be pulled neatly back so as not to interfere with laboratory or clinical duties.

Facial hair must be neatly trimmed.

Hands and nails should be clean and smooth. Fingernails should be cut short so that the nail is not visible from the palm side. During clinical experiences, only clear or muted beige colored polish may be worn.

Daily dress

On campus the mode of dress is determined by each student's professional judgment. Clothing should be clean, in good condition, and cover the individual, at a minimum, from mid-thigh to the shoulder area. Exposure of cleavage on women should be minimal. Clothing should not have cut out, torn or frayed areas, or net or mesh inserts that expose the region between thigh and shoulder.

Clothing having caricatures, messages, symbols, etc., that can be construed based on societal norms to be vulgar, offensive, or contribute to creating a hostile learning environment is unacceptable and demonstrates inappropriate professional judgment that is subject to review and action by the course instructor, CSS, SPC, and/or program director.



Lab attire

To ensure modesty and adequate access to the body for lab activities, all students are expected to comply with this policy unless exempted by the instructor.

Both men and women should wear 5" lifting or running shorts, preferably with a built-in brief, in black or other dark solid color. Women should wear a conservative sports bra, in black or other dark solid color, with a racer back, and that provides adequate coverage of the chest.

Lab clothing should not have lace or net inserts, cutouts, patterns, or graphic messaging. Students may wear T-shirts, sweaters, sweatshirts, or lightweight jackets and pants for warmth and additional coverage when not assuming the patient role.

The course instructor may indicate that lab clothing is not required; otherwise, the student should be properly dressed at the start of lab. Failure to dress in lab clothing may result in an Academic Warning and the deduction of professional behavior points, up to 2% for each occurrence. If the student is non-compliant after one warning, the instructor reserves the right to ask the student to leave, give the student a zero on lab assignments for that day, and, if appropriate, refer the student for progressive disciplinary action.

Clinical and Ceremonial Dress

Clinical or Ceremonial dress is suggested several times during the program for events like ceremonies and presentations, acceptance of awards, or attendance at professional conferences/meetings.

Clinical dress. Men and women are to wear TUN logo polo shirts with solid dark- or khaki-colored slacks, track pants, skorts of mid-thigh length, or leggings that do not contain bold wording, cutouts, mesh or net inserts. Skirts are not acceptable for clinical dress. Students should wear conservative walking shoes in muted colors. Shoes should be in good condition and show minimal signs of wear. Shoes must cover the toe and heel, have a street appropriate sole, and be fully laced or strapped.

All students are expected to appear in ceremonial dress for all ceremonies including, but not limited to, White Coat and Commencement.

Ceremonial dress. "Ceremonial dress" implies wearing formal business attire.

Guidelines for ceremonial dress follow:

Shirts, Tops, Blouses, and Jackets. Men and women may wear collared shirts or dress shirts, sweaters, and turtlenecks. For men, a dress shirt and tie is appreciated. Women must choose a top with a conservative neckline. Inappropriate attire includes tank tops, midriff tops, tops with plunging necklines or backs, golf shirts, sweatshirts,



and screen-printed t-shirts and tops.

Slacks, Pants. Slacks and pants must be of a uniform color (no bold prints) made of a woven material such as cotton or cotton blends, wool, and flannel. Track pants, leggings, jeans or any pant made of denim, spandex, or other form-fitting pants that might be worn for exercise are unacceptable. All pants must be secured at waist level.

Skirts and Dresses. Dresses and skirts should be appropriate for conservative occasions. They should be of a solid color or subtle pattern, and should not be heavily embellished (i.e. fringe, glitter, ruffles, etc.). Dresses should not be strapless, one-shouldered, or expose undergarments. They should have a conservative neck and hemline (mid-thigh or longer). They must not have slits that extend above the knee. Plunging necks or backs are not acceptable. Skirts and dresses must not be form fitting, ride up the thigh, or be split above the knee. Skirts and dresses may have subtle patterns

Shoes and Footwear. Shoes must cover the toe and heel, have a street appropriate sole, and preferably lace or strap. Shoes must be in good condition and show minimal signs of wear. Loafers, oxfords, or conservative athletic shoes in good repair and in muted colors. Shoes should be flat or have a low heel (≤ 4 ") that allows the student to walk quickly and safely for moderate distances. Sport specific or boldly colored athletic shoes, tennis shoes, thongs, flip-flops, slippers, platforms > 2 " , stilettos and any casual shoe with an open toe are not acceptable.

Accessories and Jewelry. Hair, piercings, tattoos, and jewelry should reflect a moderate to conservative style. Piercings should be tasteful and clean. Controversial tattoos should be covered. Hair tints and dyes should be in muted colors. Other than religious or academic headwear, hats or head coverings may not be worn to events designated for clinical or ceremonial dress.

Makeup, Perfume, and Cologne. Excessive makeup is unprofessional and impractical for the clinic. Remember that some colleagues, patients, and clients are allergic to the chemicals in perfumes and makeup, so wear these substances with restraint.

All clothing should be clean and pressed for clinic or ceremonial dress situations.

Attempts by students to interpret these guidelines in a humorous or mocking manner will result in professional behavior penalties or discipline. Students failing to be dressed appropriately for any 'professional or clinical dress' activity may be requested to leave and return in appropriate dress, receive a grade deduction or a zero for the event. Faculty will post their specific penalty in the syllabus.

For the dress code during clinical experiences or visits, students are referred to the SOPT Clinical Education Handbook.



Computers, Books, Supplies, Living Expenses and Travel

Computers

All students must have daily access to a computer and the Internet. Students are responsible for the timely maintenance and upgrade of their institutional laptops. At times, technology fails; however, if the technology failure is found to be the result of inadequate maintenance and upgrade by the student, they may be subject to academic or professional penalties.

Many assignments are submitted electronically through Canvas or e-mail. It is the student's responsibility to upload files in an appropriate format for viewing by the instructor.

Books

Students are responsible for securing all books and supplies required for courses and clinical practice experiences. Lists of required books and supplies will be posted on the website with notification sent to the students prior to the start of each term. The SOPT will make every attempt to provide students with accurate information, but in cases of publisher updates, students should always purchase the most recent edition of the text. The SOPT is unable to duplicate or otherwise post sections of required textbooks for students due to copyright laws.

Transportation, room, board, and incidentals

Completion of clinical practice experiences may require the student to relocate out of town to accommodate the availability of clinical sites. Each student is required to assume costs for transportation, room, board, and incidentals occurred in the completion of course requirements.

Academic Writing

The accepted writing style for the SOPT is APA, Seventh Edition. Students are encouraged to obtain a copy of the American Psychological Association's Publication Manual:

APA Manual (Publication manual of the American Psychological Association) (7th ed.). (2019). Washington, DC: American Psychological Association. ISBN-10: 143383216X ISBN-13: 978-1433832161



PART 3: SCHOOL OF PHYSICAL THERAPY ORGANIZATIONAL STRUCTURE

The SOPT is administratively located in the College of Health and Human Services (CHHS) of TUN. The SOPT is led by a board of directors consisting of the Program Director, the Chair of Student Services (CSS) and the Chair of Curricular Development (CCD). The Program Director has final decision-making authority, represents the program to the institution and community, supervises the faculty and staff, and has ultimate responsibility for ensuring program compliance with all regulatory, legal, and policy requirements. The Program Director is responsible for ensuring the program engages in ongoing and systematic assessment, routine policy review, and completes timely reports as required by the accrediting agencies. The Chair of Student Services has responsibility for the students from application – through the Admissions Committee – to graduation – through the Student Promotion Committee. The Chair of Curricular Development has responsibility for curricular scheduling and development through the Curriculum Review Committee.


The faculty may include individuals with full or part-time appointments as Core Faculty, or Adjunct Faculty. The Clinical Faculty consists of those members of the professional community who serve as Clinical Instructors for students during their Clinical Experiences. Hiring, promotion and evaluation of the faculty is performed in accordance with TUN policies and procedures. The purpose of this organizational structure is to provide an efficient, yet comprehensive plan to supervise and assess the business of the SOPT in an on-going fashion.

Communication is essential in all organizations. The SOPT will use frequent communication in many forms to remain current with administration, faculty, staff, students, and external stakeholder groups. Email, webpages, print materials, and face-to-face meetings will be used as the primary modes of communication. It is the responsibility of all members of the administration, faculty, staff, students, and external stakeholder groups to read circulated or posted materials or attend scheduled functions to keep themselves apprised of information or events.

The faculty holds regular faculty meetings at least twice each month. They also meet twice each year for full-day retreats to allow time to reflect on the operations of the SOPT and consider future planning. In the fall, at the Summative Retreat, the faculty will meet to review the results of assessment in the previous academic year. In the spring, at the Formative Retreat, the faculty will meet to plan for specific adjustments or indicators that will be assessed in the next academic year.

Chain of command

Chain of command is the line of authority and responsibility along which communication and decisions are made within and between different units. Communication should flow both up and down the chain of command from administration to faculty, staff, and students. Decisions and requests for action are transmitted down the chain of



command, from a higher-level to the lower-level individuals. In general, requests for action or disciplinary actions are transmitted only to those directly below the individual in the chain of command. Requests for reconsideration of actions should be made up the chain of command to the level immediately above the individual with a grievance or request. Individuals who appeal for action to levels above his/her immediate supervisor or submit grievances about his/her immediate supervisor to a level above in the chain of command are likely to be reprimanded or disciplined for not observing the chain of command.

In addition to regular faculty meetings, the business of the faculty will be conducted by committees or work groups. As needed, the board of directors will form work groups to conduct the business of the committees. Except where specifically excluded, the program director is a presumptive member of all standing committees.

Standing Committees

The program is committed to on-going, formal, and comprehensive assessment to ensure program effectiveness and foster program improvement (CAPTE 2A). The standing committees are responsible for conducting assessment in their given areas according to the objectives identified in the Assessment Matrix that is reviewed each fall at the Summative Retreat.


The standing committees are also charged with ensuring that the program initiates, adopts, evaluates, and upholds academic regulations specific to the program and compatible with institutional policies, procedures and practices that address, but are not limited to, admission requirements, grading policies, minimum performance levels, professional and ethical behaviors of faculty, staff and students, and student progression through the program (CAPTE 4L).

Except where specifically excluded, the program director is a presumptive member of all standing committees. All core faculty are expected to serve on at least one departmental and one institutional committee except new faculty members (≤ 1 year) who are not required yet to serve on committees (CAPTE 4C). Service as a committee chair will be incorporated into the faculty member's workload (CAPTE 3C).

Admissions Committee (AdC)

The AdC is made up of all full-time faculty members. The Chair of Student Services is responsible for conducting an annual review of the activities and effectiveness of the committee.

The AdC is responsible for evaluating and recommending candidates for admission to the SOPT and, based on their assessment and other evidence, recommending changes to admission requirements. The AdC is charged with ensuring the program policies, procedures, and practices related to student recruitment and admission are based on appropriate and equitable criteria and applicable law, are written and made available to



prospective students, and are applied consistently and equitably. Specifically, the AdC will ensure that the recruitment practices of the SOPT are designed to enhance diversity of the student body (CAPTE 2B1, 5A).

The AdC ensures that prospective and enrolled students are provided with relevant information about the institution and program that may affect them including, but not limited to, catalogs, handbooks, academic calendars and hosts the first week Orientation activities (CAPTE 5B).

Each year the AdC will review recruitment activity with the Department of Student Affairs (DOSA) to identify successful strategies and trends. Information tracked by the AdC may include the number of applications received, demographics of applicants and of those recommended for and accepting admission.

The AdC coordinates with DOSA to ensure that all prospective and current students receive timely access to information regarding total cost to student, financial aid, and other pertinent print and/or electronic information (CAPTE 5B). The AdC will ensure that enrollment agreements comply with institutional accrediting agency and state requirements are only executed with prospective students after full disclosure of the information described herein (CAPTE 5C).

Student Promotion Committee (SPC)

The SPC is made up of the full-time core faculty of the School of Physical Therapy, excluding the program director. The Chair of Student Services is responsible for conducting an annual review of the activities and effectiveness of the committee.

The SPC is charged with evaluating the academic progress of each student and ensuring that they are ready for promotion and, at the end of the professional curriculum, that they are safe and ready for progression to the Clinical Education component of the program (CAPTE 4N).

The SPC will meet periodically throughout each term to review concerns that may be raised by individual instructors or Student Advisors about academic performance or professional behavior. The SPC will meet within 14 days of the end of each semester to consider student promotions to the next term. The SPC makes recommendations to the program director that may include but are not limited to commendation, Early Intervention/Progressive Discipline, course remediation, suspension, or dismissal. The program director has the authority to accept or modify the committee's recommendations.

The SPC is responsible for ensuring that the policies, procedures, and practices of the program related to student retention and student progression through the program are based on appropriate and equitable criteria and applicable law and are applied consistently and equitably. The retention practices of the program are designed to support a diverse student body (CAPTE 5D).



Curriculum Review Committee (CRC)

The CRC is made up of a minimum of three full-time faculty members. The Director of Clinical Education is responsible for conducting an annual review of the activities and effectiveness of the committee.

The CRC ensures program compliance with the SOPT Curriculum Plan and makes recommendations for modification based on their assessment and other evidence (CAPE 6A). The CRC is responsible for ongoing review of the curriculum relying on course evaluations, and input from students, clinical faculty, lab assistants, and faculty.

An annual cumulative review will be performed and, when appropriate, recommendations for curricular or course changes will be presented to the faculty. The faculty is responsible for reviewing recommended changes and taking appropriate action if necessary.

The CRC assesses the extent to which the collective core and associated faculty meet program and curricular needs (CAPTE 2B3). The CRC analyzes the extent to which the core and associated faculty are appropriately licensed as physical therapists and have doctor preparation, contemporary expertise in assigned teaching areas, and demonstrate effectiveness in teaching and student evaluation (CAPTE 4A, 4D). The CRC ensures that the collective core and associated faculty include an effective blend of individuals with doctoral preparation (including at least 50% of core faculty with academic doctoral degrees) and individuals with clinical specialization sufficient to meet program goals and expected program outcomes as related to assigned program responsibilities (CAPTE 4K).


The CRC analyzes the extent to which students are achieving accreditation (Standard 7), institutional (ISLO), program- and course-level learning objectives by conducting regular and systematic course reviews.

The CRC analyzes the extent to which the resources of the institutional library system and related learning resource centers are adequate to support the needs and meet the learning and teaching goals of the program faculty and students for the professional component of the program (CAPTE 8E).

Policy Review Committee (PRC)

The purpose of the PRC is to review SOPT policies and procedures to determine how well they meet the needs of the program and the extent to which they are fairly and equitably adhered to. The PRC is made up of a minimum of three full-time faculty members appointed by the program director who is responsible for conducting an annual review of the activities and effectiveness of the committee.

It is the responsibility of the PRC to ensure that program policies and procedures are compatible with institutional policies and with applicable law (CAPTE 3G) and that



relevant institutional policies and procedures meet program needs. The PRC analyzes the extent to which program practices adhere to applicable policies and procedures (CAPTE 2B5).

The PRC analyzes the extent to which institutional policies related to academic standards and to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and professional aspects of the physical therapy program, including providing for education in teaching load for administrative functions (CAPTE 3C). For example, serving as a committee chair will be incorporated into the faculty member's workload.

The PRC ensures that policies and procedures exist to facilitate equal opportunity and nondiscrimination for faculty, staff and prospective and enrolled students (CAPTE 3C).

The PRC ensures that policies, procedures, and practices that affect the rights, responsibilities, safety, privacy, and dignity of program faculty and staff are written, disseminated, and applied consistently and equitably (CAPTE 3E).

The PRC ensures that program policies, procedures, and practices (P-1) provide for compliance with accreditation policies and procedures (CAPTE 3H).

The PRC ensures that policies, procedures, and practices exist for handling complaints and with handling complaints that fall outside the realm of due process, including a prohibition of retaliation following complaint submission. The PRC ensures that the policies are written, disseminated, and applied consistently and equitably. The PRC maintains records of complaints about the program, including the nature of the complaint and the disposition of the complaint (CAPTE 3F).


The PRC ensures that course syllabi are comprehensive and include all CAPTE expectations and are compliant with institutional guidelines for standardized syllabi (CAPTE 6G).

The PRC ensures that a formal evaluation of each core and associated faculty member occurs in a manner and timeline consistent with applicable institutional policy and that the evaluation includes assessments of teaching, scholarly activity, and service, and any additional responsibilities (CAPTE 4E, 4F).

The PRC analyzes the extent to which the collective core faculty initiate, adopt, evaluate, and uphold academic regulations specific to the program and compatible with institutional policies, procedures and practices that address, but are not limited to, admission requirements, the clinical education program, grading policy, minimum, performance levels, including those relating to professional and ethical behaviors, and student progression through the program (CAPTE 4L).

Assessment Committee (AC)

The AC is made up of a minimum of three full-time faculty members appointed by the



program director who is responsible for conducting an annual review of the activities and effectiveness of the committee.

The purpose of the AC is to promote and support a continuous self-evaluation process by which the success of the program can be measured (*CAPTE 1C, 2A*).

- 1) The AC assesses program progress toward achieving the goals and objectives set forth by TUN, CAPTE, and the SOPT. ,
- 2) The AC curates program documents including, but not limited to the program Mission, Vision, and Goals (*CAPTE 1A, 1B*), the SOPT Handbook, the Curriculum Plan, the Assessment Matrix and coordinates the actions of the faculty, who are responsible as a whole, for the achievement of the goals set forth, assessment, routine review and modification of these documents.

The AC curates the SOPT Strategic Plan and ensures that the strategic plan takes into account program assessment results, changes in higher education, the health care environment and the nature of contemporary physical therapy practice (*CAPTE 2D*).

The AC aggregates program-wide assessment conducted by the faculty and the standing committees to prepare program reports to accrediting boards, institutional departments and the program director and faculty.


The AC will ensure that materials related to the institution and program are accurate, comprehensive, current, and provided to students in a timely manner. The AC ensures that the SOPT Handbook and annual revisions to the TUN Catalog are submitted to the TUN Registrar in a timely manner and provided to all faculty, staff, current and prospective students (*CAPTE 5D*).

The AC ensures that the SOPT website contains accurate and current information regarding the program's accreditation status, the process to register a complaint with CAPTE, and other print and electronic information (*CAPTE 5B*).

The AC analyzes the extent to which the program meets expected outcomes related to its mission and goals (*CAPTE 1C6*).

The AC regularly assesses and reports to the faculty whether program resources are meeting, and will continue to meet, current and projected program needs including, but not limited to, financial resources, staff, space, equipment, technology, materials, library and learning resources, and student services (*CAPTE 2B4*).

The AC assesses the extent to which program enrollment appropriately reflects available resources, program outcomes and workforce needs (*CAPTE 2B2*) and the extent to which academic services, counseling services, health services, disability services and financial aid services are available to program students (*CAPTE 8H*). The AC will analyze the extent to which each core faculty member has a record of institutional and professional service (*CAPTE 4C*).



The AC ensures that an organized plan for development of the faculty is implemented based on the formal evaluation of the core and associated faculty (*CAPTE 4E*). The AC ensures that the collective core and associated faculty include an effective blend of individuals sufficient to meet program goals and expected program outcomes (*CAPTE 4K*).

The AC analyzes the extent to the program is achieving accreditation (Standard 7), institutional (ISLO), program- level learning objectives across the curriculum by conducting regular and systematic program-wide assessment.

The AC analyzes the extent to which the collective core faculty is sufficient in number to allow each individual core faculty member to meet teaching, scholarship and service expectations and to achieve the expected program outcomes through student advising and mentorship, admissions activities, educational administration, curriculum development, instructional design, coordination of the activities of the associated faculty, coordination of the clinical education program, governance, clinical practice, and evaluation of expected student outcomes and other program outcomes (*CAPTE 8A*).

The AC analyzes the extent to which the program has, or has ensured access to, space, equipment, technology and materials of sufficient quality and quantity to meet program goals related to teaching, scholarship and service (*CAPTE 8D*) including:

- Classroom and laboratory environments supportive of effective teaching and learning (*CAPTE 8D1*)
- Space sufficient for faculty and staff offices, student advisement, conducting confidential meetings, storing office equipment and documents, and securing confidential materials (*CAPTE 8D2*)
- Ensured student access to laboratory space outside of scheduled class time for practice of clinical skills (*CAPTE 8D3*)
- Equipment and materials are typical of those used in contemporary physical therapy practice, are sufficient in number, are in safe working order, and are available when needed (*CAPTE 8D4*)
- Technology resources meet the needs of the program (*CAPTE 8D5*)

The AC will analyze the extent to which program graduates meet the expected outcomes as defined by the program (*CAPTE 1C5*).

The AC is charged with coordinating the activities of the Advisory Board and other communities of interest to ensure that the collective core faculty have input that can be used for the development, review and revision of the curriculum (*CAPTE 4M*).



Review Processes

On-going program-wide assessment is conducted by the standing committees as described in Policy 15 (P-15). The process of student recruitment is the work of the Admissions Committee. Ensuring students are appropriate for promotion from term-to-term, from the professional component to the clinical education components and, finally, to graduation is the work of the Student Promotion Committee. The Curriculum Review Committee ensures that the faculty and curriculum are meeting the needs of the program and facilitating student achievement of the accreditation-, institution-, and program-level learning objectives. The Policy Review Committee is charged with ensuring that program policies are compatible with legal, institutional, and accreditation requirements and that they are enforced fairly and equitably. The Research Committee facilitates the scholarly success of the faculty and students. The Program Review and Assessment Committee (AC) analyzes the program's achievement of accreditation, institutional and program goals and aggregates the assessment reports of the other committees for review by the faculty.

The Assessment Matrix identifies the program outcomes and the committees responsible for assessment in each section. The AC aggregates the reports of the committees and presents the Report of the Assessment Matrix to the faculty at the Summative Retreat each fall. Action items identified at the Summative Retreat are discussed at the Formative Retreat in the spring when the faculty identify changes and projects to be addressed in the coming year.

Two years prior to the end of the accreditation period, the program completes the Institutional Program Review. The standing committees' complete sections of the program review relevant to their unique areas of responsibility and the AC will aggregate the reports and submit the report to the program director who submits it to the Office of Institutional Effectiveness.

In the year prior to the on-site visit, the program completes a self-study using the methodology prescribed by CAPTE in a similar fashion. The standing committees will complete those areas of the self-study identified in P-15 Standing Committees. The AC will aggregate the committee reports and submit the completed study to the faculty for review prior to submission to the program director and administration. The program director will submit the self-study to CAPTE.

P-9 External Complaint Handling (CAPTE 3F)

The Touro University Nevada School of Physical Therapy (SOPT) supports the concept of continuous improvement. To this end, the SOPT recognizes that individuals external to the institution may register complaints concerning the program, faculty, staff, or students of TUN SOPT. All such complaints shall be investigated, and a resolution proposed by the Director or designee.

Complaints concerning programs, faculty, students, or staff other than SOPT, will be



referred to the applicable Director, Dean, or Vice-President.

Procedures

While this policy is in effect, the program will follow these steps in resolving complaints.

Notice of Rights to Complain. The SOPT will post in a conspicuous place a notice supplied stating that complaints may be submitted to the program director for resolution. The notice will also contain information that unresolved complaints may be submitted to TUN Administration, CAPTE, WASC, or NCPE as appropriate.

Initial response to complaint

The program director is responsible for acknowledging the receipt of all complaints from external sources in a timely fashion (normally within 5 working days). The acknowledgement should inform the complainant that the complaint has been received, an investigation will be initiated, and an approximate date that the complainant will be notified of a resolution.

Investigation of the complaint. The program director or designee is responsible for investigating the complaint. Normally the complainant and individuals targeted by the complaint should be interviewed as well as any witnesses to the events. If the complaint concerns an area of operations for which a standing committee is identified, the investigator shall involve the chairperson of the committee in the investigation. A written report of findings shall be created.

Resolution of complaints. The program director or designee is responsible for considering all evidence and the report of the investigation before coming to a resolution. TUN Legal Counsel may be consulted as well. Appropriate conflict resolution and mediation techniques should be considered in reaching a resolution acceptable to all parties. The program director will inform the complainant in writing of the resolution also informing the complainant of other avenues of action if the resolution is not acceptable.

Other avenues of action include the following: Prospective students and the public may file complaints with the Dean College of Health and Human Services. The Dean will use appropriate conflict resolutions to mediate complaints. Parties outside the institution with unresolved complaints will be informed of their right to file complaints with either WASC or NCPE. The name and address of the accrediting body will be included in recruitment brochures, website, and the College catalog.

Records of Complaints and Resolutions. The SOPT Director is responsible for maintaining a file of both formal and informal complaints received by the program. An annual summary report will be prepared by the Policy Review Committee for presentation to the faculty at the Summative Retreat. Complaints will be maintained for a period of 5 years or until a scheduled review by WASC, whichever is longer, and then disposed of in a secure manner.