

**CC-5.** The physical therapist *professional curriculum* includes content and learning *experiences* designed to prepare students to achieve educational outcomes required for initial practice of the profession of physical therapy. <sup>1(pp43-121),2(pp16-80)</sup>  
The curriculum is designed to prepare students to meet the practice expectations listed in CC-5.1 through CC-5.66.

Evidence of compliance:

Narrative:

- An analysis of how the curriculum as a whole prepares the student to meet the practice expectations
- For each of the following criteria (CC-5.1 through cc-5.66) (tabular format is Acceptable):
  - Identify where the content is presented and provide example(s)/ description(s) of the learning experiences that are designed to meet the practice expectations.
  - Provide a maximum of 5 examples of course objectives that demonstrate the expected level of student performance. Include objectives from clinical education courses. If applicable. If the expectation is a curricular theme, examples of course objectives from multiple courses are required, up to a maximum of 10; and
  - Describe the level of actual student achievement, including outcome data if available.

Appendices:

- Course syllabi, tabbed.

On-site:

- Additional course materials

**Professional Practice Expectation: Accountability**

**CC-5.1** Adhere to legal practice standards, including all federal, state and institutional regulations related to patient/client care and fiscal management.

**CC-5.2** Have a fiduciary responsibility for all patient/clients.

**CC-5.3** Practice in a manner consistent with the professional Code of Ethics.

**CC-5.4** Change behavior in response to understanding the consequences (positive and negative) of his or her actions.

**CC-5.5** Participate in organizations and efforts that support the role of the physical therapist in furthering the health and wellness of the public.

**Professional Practice Expectation: Altruism**

**CC-5.6** Place patient's/client's needs above the physical therapist's needs.

**CC-5.7** Incorporate *pro bono* services into practice.

**Professional Practice Expectation: Compassion/Caring**

**CC-5.8** Exhibit caring, compassion, and empathy in providing services to patients/clients.

**CC-5.9** Promote active involvement of the patient/client in his or her care.

**Professional Practice Expectation: Integrity**

**CC-5.10** Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.

**Professional Practice Expectation: Professional Duty**

**CC-5.11** Demonstrate professional behavior in all interactions with patients/clients, family members, caregivers, other health care providers, students, other consumers, and payers.

**CC-5.12** Participate in self-assessment to improve the effectiveness of care.

**CC-5.13** Participate in peer assessment activities.

**CC-5.14** Effectively deal with positive and negative outcomes resulting from assessment activities.

**CC-5.15** Participate in clinical education of students

**CC-5.16** Participate in professional organizations

**Professional Practice Expectation: Communication**

**CC-5.17** Expressively and receptively communicate in a *culturally competent* manner with patients/clients, family members, caregivers, practitioners, interdisciplinary team members, consumers, payers, and policymakers.

**Professional Practice Expectation: Cultural Competence**

**CC-5.18** Identify, respect, and act with consideration for patients'/clients' differences, values, preferences, and expressed needs in all professional activities.

**Professional Practice Expectation: Clinical Reasoning**

**CC-5.19** Use clinical judgment and reflection to identify, monitor, and enhance clinical reasoning to minimize errors and enhance patient/client outcomes.

**CC-5.20** Consistently apply current knowledge, theory, and professional judgment while considering the patient/client perspective in patient/client management.

**Professional Practice Expectation: Evidence-based Practice**

**CC-5.21** Consistently use information technology to access sources of information to support clinical decisions.

**CC-5.22** Consistently and critically evaluate sources of information related to physical therapist practice, research, and education and apply knowledge from these sources in a scientific manner and to appropriate populations.

**CC-5.23** Consistently integrate the best evidence for practice from sources with clinical judgment and patient/client values to determine the best care for a patient/client.

**CC-5.24** Contribute to the evidence for practice by written systematic reviews of evidence or written descriptions of practice.

**CC-5.25** Participate in the design and implementation of patterns of best clinical practice for various populations.

**Professional Practice Expectation: Education**

**CC-5.26** Effectively educate others using culturally appropriate teaching methods that are commensurate with the needs of the learner.

**Patient/Client Management Expectation: Screening**

**CC-5.27** Determine when patients/clients need further examination or consultation by a physical therapist or referral to another health care professional.

**Patient/Client Management Expectation: Examination**

**CC-5.28** Examine patients/clients by obtaining a history from the and from other sources.

**CC-5.29** Examine patients/clients by performing systems reviews.

**CC-5.30** Examine patients/clients by selecting and administering culturally appropriate and age-related tests and measures. Tests and measures include, but are not limited to, those that assess:

- a. Aerobic Capacity/Endurances
- b. Anthropometric Characteristics
- c. Arousal, Attention, and Cognition
- d. Assistive and Adaptive Devices
- e. Circulation (Arterial, Venous, Lymphatic)
- f. Cranial and Peripheral Nerve Integrity
- g. Environmental, Home, and Work (Job/School/Play) Barriers

- h. Ergonomics and Body Mechanics
- i. Gait, Locomotion, and Balance
- j. Integumentary Integrity
- k. Joint Integrity and Mobility
- l. Motor Function (Motor Control and Motor Learning)
- m. Muscle Performance (including Strength, Power, and Endurance)
- n. Neuromotor Development and Sensory Integration
- o. Orthotic, Protective, and Supportive Devices
- p. Pain
- q. Posture
- r. Prosthetic Requirements
- s. Range of Motion (including Muscle Length)
- t. Reflex Integrity
- u. Self-Care and Home Management (including activities of daily Living [ADL] and instrumental activities of daily living [IADL])
- v. Sensory Integrity
- w. Ventilation and Respiration/Gas Exchange
- x. Work (Job/School/Play), Community, and Leisure Integration or Reintegration (including IADL)

**Patient/Client Management Expectation: Evaluation**

**CC-5.31** Evaluate data from the examination (history, systems review, and tests and measures) to make clinical judgments regarding patients/clients.

**Patient/Client Management Expectations: Prognosis**

**CC-5.34** Collaborate with patients/clients, family members, payers, other

\*taken from the 2006 Evaluative Criteria

professionals, and other individuals to determine a plan of care that is acceptable, realistic, *culturally competent*, and patient-centered.

- CC-5.35** Establish a physical therapy plan of care that is safe, effective, and patient/client-centered.
- CC-5.36** Determine patient/client goals and outcomes within available resources and specify expected length of time to achieve the goals and outcomes.
- CC-5.37** Deliver and manage a plan of care that is consistent with legal, ethical, and professional obligations and administrative policies and procedures of the practice environment.
- CC-5.38** Monitor and adjust the plan of care in response to patient/client status.

**Patient/Client Management Expectation: Intervention**

- CC-5.39** Provide physical therapy interventions to achieve patient/client goals and outcomes. Interventions include:
- a. Therapeutic Exercise
  - b. Functional Training in Self-Care and Home Management
  - c. Functional Training in Work (Job/School/Play), Community, and Leisure Integration or Reintegration.
  - d. Manual Therapy Techniques (including Mobilization/Manipulation Thrust and Nonthrust Techniques)
  - e. Prescription, Application, and, as Appropriate, Fabrication of Devices and Equipment.
  - f. Airway Clearance Techniques
  - g. Integumentary Repair and Protection Techniques
  - h. Electrotherapeutic Modalities
  - i. Physical Agents and Mechanical Modalities

- CC-5.40** Determine those components of interventions that may be directed to the physical therapist assistant (PTA) upon consideration of: (1) the needs of the patient/client, (2) the PTA's ability, (3) jurisdictional law, (4) practice guidelines/policies/codes of ethics, and (5) facility policies.
- CC-5.41** Provide effective culturally competent instruction to patients/clients and others to achieve goals and outcomes.
- CC-5.42** Complete documentation that follows professional guidelines, guidelines required by health care systems, and guidelines required by the practice setting.
- CC-5.43** Practice using principles of risk management.
- CC-5.44** Respond effectively to patient/client and environmental emergencies in one's practice setting.

**Patient/Client Management Expectation: Outcomes Assessment**

- CC-5.45** Select outcome measures to assess individual outcomes of patients clients using valid and reliable measures that take into account the setting in which the patient/client is receiving services, cultural issues, and the effect of societal factors such as reimbursement.
- CC-5.46** Collect data from the selected outcome measures in a manner that supports accurate analysis of individual patient/client outcomes.
- CC-5.47** Analyze results arising from outcome measures selected to assess Individual outcomes of patient/clients.
- CC.5.48** Use analysis from individual outcome measurements to modify the plan of care.
- CC-5.49** Select outcome measures that are valid and reliable and shown to be generalizable to patient/client populations being studied.

**Practice Management Expectation: Prevention, Health, Promotion, Fitness, and Wellness**

\*taken from the 2006 Evaluative Criteria

**CC-5.50** Provide *culturally* competent physical therapy services for prevention, health promotion, fitness, and wellness to individuals, groups and communities.

**CC-5.51** Promote health and quality of life by providing information on health promotion, fitness, wellness, disease, impairment, functional limitation, disability and health risks related to age, gender, culture, and lifestyle within the scope of physical therapy practice.

**CC-5.52** Apply principles of prevention to defined population groups.

**Practice Management Expectation: Management of Care Delivery**

**CC-5.53** Provide culturally competent first-contact care through direct access to patients/clients who have been determined through the screening and examination processes to need physical therapy care.

**CC-5.54** Provide culturally competent care to patients/clients referred by other practitioners to ensure that care is continuous and reliable.

**CC-5.55** Provide culturally competent care to patients/clients in tertiary care settings in collaboration with other practitioners.

**CC-5.56** Participate in the case management process.

**Practice Management Expectation: Practice Management**

**CC-5.57** Direct and supervise human resources to meet patients/client's goals and expected outcomes.

**CC-5.58** Participate in financial management of the practice.

**CC-5.59** Establish a business plan on a programmatic level within a practice.

**CC-5.60** Participate in activities related to marketing and public relations.

**CC-5.61** Manage practice in accordance with regulatory and legal requirements.

**Practice Management Expectation: Consultation**

\*taken from the 2006 Evaluative Criteria



**CC-5.62** Provide consultation within boundaries of expertise to businesses, Schools, government agencies, other organizations, or individuals.

**Practice Management Expectation: Social Responsibility and Advocacy**

**CC-5.63** Challenge the status quo of practice to raise it to the most effective level of care.

**CC-5.64** Advocate for the health and wellness needs of society.

**CC-5.65** Participate and show leadership in community organizations and volunteer service.

**CC-5.66** Influence legislative and political processes.