



UNIVERSITY OF
SOUTH CAROLINA
PHYSICAL THERAPY PROGRAM

Policy and Procedures

***Doctor of Physical Therapy Program
Exercise Science Department
Arnold School of Public Health
University of South Carolina***

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Policies and Procedures

Faculty of and students enrolled in the Doctor of Physical Therapy (DPT) degree program are governed by the policies and procedures of the University of South Carolina (USC) as documented in the [Faculty Manual](#), Arnold School of Public Health [Faculty Guidelines](#) and the [Graduate School](#). This document is designed to set forth the policies and procedures of the DPT Program and is intended to **supplement** (not replace) those of the University, School and Graduate School of USC.

1.0 Administration

Administration of the DPT Program consists of the Program Director (PD), the Director of Clinical Education (DCE), the Associate Director of Clinical Education (ADCE), and administrative assistants to the program. The roles and responsibilities of these positions are described below.

1.1 Program Director (PD)

The PD of the DPT Program administers the daily operation of the Program. The individual employed by the institution, as a member of the Core Faculty, coordinates the activities of faculty related to **accreditation, curriculum, budget, faculty recruitment/hiring, and academic standards**. The PD also evaluates faculty and is the signature authority for the budget. The PD is responsible to the Chairperson of the Department of Exercise Science (EXSC) and the Dean of the Arnold School of Public Health (ASPH).

Physical Therapy Programs are granted accreditation by the Commission on Accreditation of Physical Therapy Education (CAPTE). Accreditation is a Core Faculty responsibility and as such is coordinated by the PD.

It is the responsibility of the PD to insure:

- Timely submission of all required fees and documentation, including reports of graduation rates, performances on state licensing examinations, and employment rates to the appropriate University and Accreditation authorities.
- Timely notification of expected or unexpected substantive change within the Program and of any change in institutional accreditation status or legal authority to postsecondary education to appropriate University and Accreditation authorities.
- Maintenance of a mechanism for handling complaints about the Program and maintaining records of complaints about the Program.
- Restoration of Program compliance with accreditation criteria within two years of being determined to be out of compliance.

1.2 Director of Clinical Education (DCE)

This Core Faculty member is responsible for the planning, coordination, facilitation, administration, monitoring, and assessment of the clinical education component of the curriculum. The DCE(s) is the faculty member of record for the clinical education courses.

1.3 Associate Director of Clinical Education (ADCE)

This Core Faculty member collaborates with and assists the DCE with the planning, coordination, facilitation, administration, monitoring, and assessment of the clinical education component of the curriculum. The ADCE also serves as course director for clinical education courses as determined by the PD.

1.4 Administrative Assistants

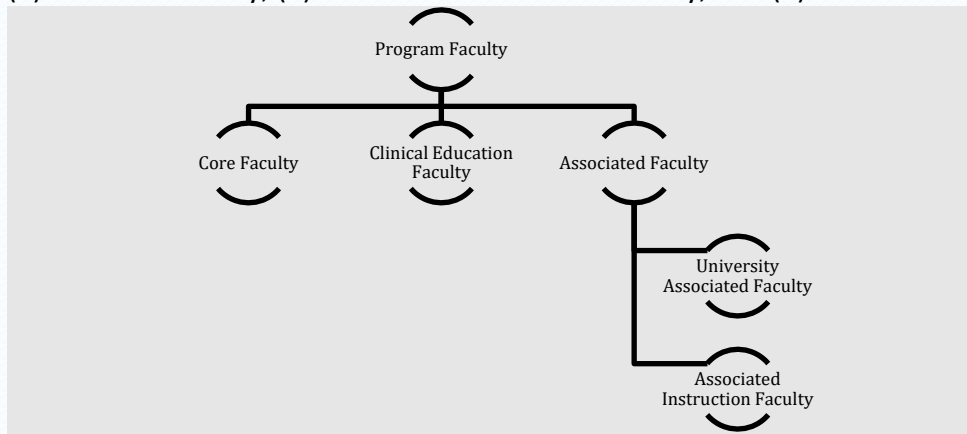
Administrative assistants to the program are responsible for the maintenance of all student communications and records. In addition, the administrative assistants work with the PD and DCE to coordinate and implement the daily activities of the program including scheduling, facilities upkeep, and admissions and student communication.

2.0 Faculty

Faculty in the DPT Program have the same rights and privileges of faculty of similar academic rank at USC which are detailed in the University [Faculty Manual](#).

2.1 Definitions

Faculty of the DPT Program are classified into subcategories to clarify the role of each faculty member and assist in the accreditation process. All faculty involved with the Program, include: (1) the Core Faculty, (2) the Clinical Education Faculty, and (3) the Associated Faculty.



Core Faculty:

Those individuals appointed to and employed primarily in the Program, including the PD, the DCE and other faculty who report to the PD. The [Core Faculty](#) has the responsibility and authority to establish academic regulations and to design, implement, and evaluate the curriculum. Members of the Core Faculty typically have full-time appointments, although some part-time faculty members may be included among the Core Faculty. The Core Faculty includes physical therapists and may include others with expertise to meet specific curricular needs. The Core Faculty may hold tenured, tenure track, or clinical faculty (non-tenure track) positions.

Clinical Education Faculty:

Didactic and clinical education are integrated into one academic experience to develop the student into a physical therapist practitioner. Those individuals engaged in providing the clinical education components of the curriculum, generally referred to as either Site Coordinator of Clinical Education (SCCEs) or Clinical Instructors (CIs). While the educational institution/Program does not usually employ these individuals, they do agree to certain standards of behavior through contractual agreements for their services. The primary CI for DPT students must be a physical therapist; however, this does not preclude a DPT student from engaging in short-term specialized experiences (e.g., cardiac rehabilitation, sports medicine, wound care) under the supervision of other professionals, where permitted by law. CIs and SCCEs at the facility are considered faculty of the University of South Carolina DPT program. Therefore, academic, including professional development, information is shared between faculty located on the University of South Carolina campus and in the clinical facilities providing clinical education.

Associated Faculty:

Associated Faculty are those individuals who have classroom and/or laboratory teaching responsibilities in the curriculum and who are not Core Faculty or Clinical Education Faculty. The University Associated Faculty may include individuals with full-time appointments at the University, but who have primary responsibilities in programs other than the DPT Program. Associated Instruction Faculty is a subdivision of Associated Faculty for those without a primary University appointment. They possess clinical expertise but often have limited academic experience. For this reason, the Faculty is supervised by a member of the Core Faculty.

2.2 Governance

Rights and privileges of the Core Faculty are based upon academic rank and are set forth in the [Faculty Manual](#). Faculty of the Columbia campus, subject to the review of the President and the Board of Trustees have legislative powers in all matters pertaining to the standards of admission, registration, requirements for and the granting of degrees earned in course. As well as the curriculum, instruction, research extracurricular activities, retention of students, the educational policies and standards of the Program, and all other matters pertaining to the conduct of faculty affairs, including discipline of their own members.

Core Faculty of the DPT Program, regardless of rank and appointment, have direct governance over admissions, Program policies and procedures, academic standards, and curriculum. It is the responsibility of the Core Faculty to review these areas and propose revisions. Changes to these areas of responsibility must be brought to the Core Faculty for discussion and approval prior to submission to higher committees. Core Faculty members are also participating faculty members in the Department of EXSC and the ASPH.

2.3 Evaluation of Faculty

Faculty of the DPT Program are considered members of the ASPH. Faculty in the ASPH are appointed to either a tenure or clinical faculty position depending upon their role and

responsibilities. Evaluation is conducted annually and is based on policies and procedures established by ASPH and the type of appointment. The following is a summary of the annual faculty evaluation procedures of the ASPH. Please refer to the [specific documents](#) for additional detail.

All faculty members receive an annual administrative review conducted by the PD and/or department chairperson. The administrative review for members of the Core Faculty serves as the mechanism for the PD and the faculty member to review the past years accomplishments in the areas of teaching, scholarship and service, and plan developmental activities for the coming year. The administrative review is also used for decisions regarding merit salary adjustments.

2.3.1 Tenure Track Appointments

Tenure track faculty, except tenured full professors, participate in the School's annual review process conducted by Tenure and Promotions Committee (*This review is under the supervision of the School's Tenure and Promotion Committee and managed by the Office of the Associate Dean for Academic Affairs*). All faculty participate in an administrative review conducted by the Director of the DPT Program and/or the Chairperson of the Department of EXSC.

Faculty in tenure track positions are also reviewed on a regular basis for progress toward tenure and promotion. The primary responsibility for all tenure and promotion procedures rests with the tenured faculty of the ASPH. General University tenure and/or promotion procedures are outlined in the [Appointment, Tenure and Promotion Procedures](#). The President is the final authority for recommending tenure or promotion to the University Board of Trustees. Final authority for approving recommendations of tenure or promotion rests with the Board of Trustees. The University Committee on Tenure and Promotion offers faculty an annual workshop on tenure and promotion matters where the criteria and procedures are discussed, and faculty are provided an opportunity to ask questions.

2.3.2 Clinical Faculty Appointments

Clinical faculty play an important role in the development and operation of the Program and are critical to the successful pursuit of the clinical, teaching, and research goals of the Program. These faculty are annually evaluated for retention and promotion. Annual letters of appointment detail the specific distribution of effort of these faculty members (teaching, scholarship and service) which may change annually based on the needs of the Program and faculty member. Specific guidelines for this review process and standards for promotion are set forth in the [Clinical, Instructional and Practice Faculty](#) guidelines of the ASPH. Workload distributions are determined based on faculty interest, program needs, and equity across program faculty.

2.3.3 Associated Faculty

Associated Faculty (sometimes referred to as adjunct) make a significant contribution to the foundational and clinical core of the curriculum. Some contribute clinical expertise that

enhances the clinical component of the Program while other faculty provide content and research experience contributing to the foundational core. Associate Faculty are evaluated on several factors that contribute to their effectiveness in delivering relevant instructional content. Evaluation components used as part of evaluative process include; academic credentials, quality of the learning experiences provided to students, instructional effectiveness, student review, student/instructor interaction, and quality of the materials used in instruction. In general, **University Associated Faculty** have academic experience and the Program relies upon this instructional and research expertise to design and implement appropriate instructional experiences. Core Faculty members, acting as content liaisons, provide suggestions and guidance to support faculty ensuring that the content they deliver is relevant for the students enrolled in the DPT Program. Core Faculty have taken the opportunity to meet individually with each University Associated Faculty to review the content of their course and offer feedback. This process of Core Faculty review has proven to be valuable in assisting the Core Faculty to better understand the content of the classes taught by University Associated Faculty and providing Associated Faculty with insight into the relevance of their content to physical therapy (PT).

University Associated Faculty often have academic appointments in a related department or school. Although the Core Faculty depend upon the University Associated Faculty members' home department to insure content and instructional expertise, the Core Faculty reviews the academic credentials of these Faculty members to ensure it meets the need of the DPT Program. The home department of the University Associated Faculty is responsible for their annual evaluation. The PD reviews their instructional performance, as evaluated by students, at the conclusion of each course. Additional informal student assessments of University Associated Faculty provide valuable insight into the quality of instruction provided. If problems are identified, the course liaison or the PD meets with the faculty member to correct the problem. If the problem persists, the chair of the University Associated Faculty's department is consulted to assist in correcting the instructional deficiency. To date, this review process has been used successfully to improve the instruction delivered to our students and guide changes in the curriculum.

Associated Instructional Faculty possess clinical expertise but often have limited academic experience. For this reason, the Faculty are supervised by a member of the Core Faculty. It is the responsibility of the core faculty member to have meetings held prior to the course offering and throughout the semester to discuss course content, delivery and student evaluation. It is further expected that the core faculty member will observe the adjunct faculty's instruction each semester, mentor appropriate and effective instructional strategies/ evaluation techniques, and input the final grades for the course.

The Core Faculty reviews and approves the professional credentials of all Associated Instructional Faculty prior to appointment. Instructional competence is evaluated using both student assessments of instruction and the Core Faculty's assessment of teaching. Faculty with concerns regarding the instructional content and/or effectiveness of an Associated Instructional

Faculty are expected to bring these concerns to the attention of the PD and Core Faculty. If the problem cannot be corrected, the services of the adjunct faculty member will be discontinued. If instructional support of an Associated Instructional Faculty member is necessary/desired, the program is willing to financially support activities designed to increase clinical expertise and/or instructor effectiveness. Associated Instructional Faculty are welcome to attend Program faculty meetings, but do not have voting privileges.

Specific rights and privileges of **Associated Instructional Faculty** include but are not limited to:

- The right to be identified as an Associated Instructional Faculty of the DPT Program.
- The right to a University identification card with the privileges of such as outlined in the Faculty Manual.
- Invitation to all professional seminars in DPT Program.
- Instructional materials and supplies to facilitate instruction.
- Use of a laptop computer for classroom instructional purposes.
- The right to seek instructional assistance using University resources.

2.4 Faculty Mentoring

USC has no formal policies and procedures for mentoring new faculty (tenure or clinical track). For this reason, the DPT Program has established the following policies and procedures to assist new Core Faculty make an appropriate adjustment to USC. These policies and procedures are not intended to diminish the PDs role in faculty development and evaluation but are designed to supplement these efforts.

1. Soon after hiring, the PD or Chair of the Department of EXSC will assign the new faculty member a mentor who has advanced faculty rank (Associate or Full) and tenure (if available).
2. Mentoring of faculty may take place in two settings: formal and informal. Formal mentoring sessions are designed to provide the new faculty member with information and insight regarding the role of faculty and administration in the DPT program. Informal interactions are those in which the mentor and faculty member exchange information of interest to the new faculty member. Information exchanged during informal mentoring sessions is confidential.
3. The mentee is encouraged to actively facilitate questions for the mentor regarding activities required for tenure/promotion and annual review (e.g. peer review of teaching, assignments to School and University level committees, submission of grant proposals).
4. A mentor will continue to be assigned to a faculty member until that faculty member has submitted their tenure and/or promotion file or a clinical faculty member has been on staff for at least five years. At that time, it is up to the faculty member to maintain or discontinue the mentoring relationship.
5. If concerns, by either mentor or faculty member, are raised every effort will be made by the PD to facilitate a positive mentoring experience and reassign the faculty member if necessary.

2.5 Faculty Development

Faculty development activities are designed to (1) fulfill specific program needs identified by the Core Faculty and /or (2) enhance individual faculty instructional/research expertise. Program needs are identified by the Core Faculty and provided to the PD for consideration. The PD at his/her discretion will request specific faculty to participate in developmental activities to address these program needs.

Biennially (every even year), individual Core Faculty establish developmental plans that are reviewed by the PD. Faculty development plans are designed to identify activities intended to maintain and/or enhance instructional/research expertise. The program provides financial support for faculty development activities.

2.6 Content Liaisons

The DPT curriculum contains selected courses taught by non-PT faculty in an interdisciplinary classroom setting. The faculty of the DPT Program has the responsibility to ensure the material presented in these classes meets the needs of the DPT students enrolled in the course. Interdisciplinary courses will have a content liaison assigned whose responsibility is to ensure the needs of the curriculum and students are met. The following guidelines have been established for the faculty of interdisciplinary courses and the content liaison.

1. The semester preceding the offering of a course taught in the DPT curriculum by a non-physical therapist faculty member, the PD will assign a Core Faculty member to act as a content liaison to that course.
2. The content liaison is to act as a resource to the faculty of the interdisciplinary course. The role of this position is to ensure that the content relevant to the DPT students enrolled in that course is presented in a manner to meet the professional needs of these students.
3. As a resource, the content liaison is to review the course schedule of each course and provide input regarding material specific to the field of PT. It is the responsibility of this individual to make available to the faculty of the course those materials that facilitates the delivery of this professionally related content.
4. Students will be informed of the content liaison assigned to each interdisciplinary course. Students will be encouraged to communicate their reactions of the course to the content liaison.

3.0 Students

Enrollment in the DPT program is limited to approximately 30 students per year. Recruitment, admission and retention of students are the primary responsibilities of the Admission Committee made up of Core Faculty and Physical Therapists that are PhD students at USC,

guided by the following policies and procedures:

3.1 Recruitment

Students are recruited to the DPT program using a variety of techniques.

- A web page containing information related to all aspects of the program and which allows students to directly request additional information and/or e-mail Program Administrative Assistants or Faculty
- Direct contact with students and faculty in Exercise Science at our school.
- Publication of faculty and student generated research in professional journal or presentations at meetings.
- Cooperating with the ASPH and the Graduate School in preparing materials for distribution on their recruiting trips.
- Physical Therapy Centralized Application Service (PTCAS)

3.2 Admissions

[Admission](#) to the DPT program at USC involves meeting the admission requirements of the Graduate School, the ASPH and the DPT Program. All applications to the DPT program are taken electronically (PTCAS) and are received by the program once the student has paid a supplemental application fee. The DPT Admissions Committee makes all admissions decisions and forward these to the Graduate School for action.

3.2.1 Arnold School of Public Health Requirements

The ASPH Admission Requirements are described in detail on the [website](#). The admission process is a joint, cooperative effort of the Graduate School, ASPH, and the DPT Program. *No application will be given final consideration until all credentials, fees, etc. have been received.*

3.2.2 DPT Program Requirements

Applicants for the DPT degree in the Department of EXSC must have an earned baccalaureate degree from an accredited institution and will be reviewed for admission by the Core Faculty. Each applicant must pay the non-refundable application fee (\$42) or met waiver requirements and have a verified PTCAS application with: official transcripts from each institution attended showing all previous course work; letters of recommendation; official GRE and TOEFL scores.

The applicant's transcripts, regardless of major, must demonstrate successful completion of the following prerequisites:

	Credit hours
General Physics.....	8*
Chemistry.....	8*
Human Anatomy and Physiology.....	8*
Biology.....	8*

Statistics.....	3
Psychology	3
* Course must include a laboratory	

In rare instances Core Faculty can waive a prerequisite if the applicant demonstrates proficiencies in a specific content area. Applicants interested in obtaining such a waiver should contact the Admissions Administrative Assistant for the appropriate procedures for submitting such a request.

In addition to meeting the academic requirements for admission for the DPT degree, students enrolled in the Program must provide evidence of vaccinations, immunizations, background checks, and CPR certification. This is outlined in the [Clinical Education Guide](#), accessible on the Program Webpage.

3.2.3 Admission Criteria to the DPT Program

The Admission Committee makes recommendations to the graduate school for admission decisions. Admission decisions are made after reviewing a completed admission file and are based on the applicant's academic credentials and personal and professional experiences. Confirmation of undergraduate degree is required if admissions decision is made prior to degree completion. In addition, if an applicant is offered admission prior to completing all prerequisites, that applicant must complete all prerequisites with a grade of "C" or better to matriculate into the class.

3.2.3.1 Academic Credentials

The initial phase of the admission process is designed to ensure that students enrolled in the DPT Program possess the academic credentials to successfully complete the program of study. Several criteria are used during this phase of the admission process, each with a weight assigned by the Admissions Coordinator prior to the admissions process. Criteria used during the initial phase of the admission process includes:

Undergraduate Grade Point Average (GPA): This is defined as the Applicant's total GPA for credit hours taken at the undergraduate level. Applicants who have taken graduate work in a related field will have that work considered. If an applicant has completed a graduate degree in a related field, that GPA may be used in lieu of the undergraduate GPA.

GPA of Prerequisite Course Work: This is defined as the applicant's GPA calculated on the prerequisite courses required for admission into the DPT Program.

Graduate Record Examination Scores: This is calculated by assessing the combined quantitative, verbal scores, and the writing score on the applicant's graduate record examination.

Values for each of the criteria are entered into a formula to produce an admission score that is used for evaluating applicants.

3.2.3.2 Personal and Professional Experiences

The second phase of the admission process is designed to evaluate the applicant's personal characteristics and previous professional and work experiences. This phase of the admission process is designed to identify applicants who possess the characteristics to make successful professionals.

During the admissions process, the committee may evaluate several factors that may be considered for admission. For example, a student's previous graduate study/graduate degree, research experience, and/or relevant work/life experiences may be given priority in the admissions process. The Core Faculty on an individual basis will evaluate applicants possessing such experiences and attributes and consider this information in its deliberations. It is the intent of this process to consider an applicant's demonstrated desire and efforts to seek admission to the Program and not to "substantially change" the academic standards of the Program.

Criteria to be used during the second phase of the admission process are more subjective and include:

Graduate Study / Graduate Degree: Applicants with previous graduate study or a graduate degree will be given credit for their experience based on the extent and quality of their course work and/or degree attained.

Research Experience: Applicants with previous experience (graduate and undergraduate) collecting, analyzing and preparing written or oral reports of research will be given credit for the quality of their experience(s).

Previous Work Experience: Applicants with post graduate work will be given credit for this experience. Work in a rehabilitation field, military service, or past work with disadvantaged populations is rated greater than other unrelated work experience.

Letters of Recommendation: The information provided in the recommendations will be evaluated and used in the selection process.

3.2.4 Transfer Students

The DPT Program does not accept transfer students from other programs. All students must complete the program of study as defined.

3.2.5 Deferment of Admission

DPT Program will consider deferment on an individual basis when extenuating circumstances preclude an accepted applicants' ability to start the program.

3.3 Criminal Background Checks and Drug Screening

This is outlined in the [Clinical Education Guide](#), accessible on the Program Webpage.

3.4 Student Information General

3.4.1 Professional Organizations

Students enrolled in the DPT Program are strongly encouraged to be student members of the national and state chapter of the American Physical Therapy Association (APTA). Students attending professional meetings are required to contact the instructor to determine if this is an excused absence and to determine how to make up content. Students presenting at professional meetings will often be provided with financial support to partially cover their expenses. The amount awarded will be individually determined by Graduate School, ASPH, EXSC, or [DPT](#) program depending on the quality and numbers of application.

3.4.2 Accommodations

The University of South Carolina is committed to providing reasonable and appropriate accommodations and modifications for students with disabilities in all programs and services. Students with disabilities should register with SDRC to determine the appropriate accommodations. Students are encouraged to work with their SDRC coordinator and faculty member **as soon as possible** so that arrangements for accommodations each semester can be made in a **timely manner**.

3.4.3 Dress Code

The DPT Program is a professional program and, as such, it is expected that students maintain a professional appearance including their personal hygiene, grooming, and dress. Professional appearance is essential in reinforcing our standards and values. This policy encourages attire that aligns with the standards of the physical therapy profession, recognizing students as emerging professionals while respecting their individuality.

1. General Guidelines

- a. Clothing should be clean, well-maintained, and respectful of oneself and others.
- b. Clothing should not be disruptive or distracting to the learning environment (i.e. does not advocate violence, weapons, criminal activity, foul language, hate speech, tobacco, alcohol, or drugs).
- c. Clothing should not be excessively tight or form-fitting to the extent that undergarments or body piercings are visible through the fabric.

- d. No part of the buttocks should be exposed except for class-related activities (i.e. certain examination and intervention techniques). Appropriate draping is expected in these situations.
 - e. Undergarments are required for lab activities and undergarments should be completely covered except for class-related activities.
 - f. Closed-toe, non-slip footwear may be required during clinical and laboratory activities upon request of course instructor to ensure safety.
 - i. Footwear should also be clean, comfortable and supportive, as these settings often involve extended periods of standing and walking.
 - g. Business casual attire (see below) should be worn for all presentations by external speakers (individuals who are not core faculty or a primary course instructor) and upon request by any course instructor or the PD.
 - h. Students are expected to maintain good personal hygiene including regular bathing, grooming, and oral care. Perfumes, colognes, and heavily scented products should be minimized to accommodate individuals with sensitivity.
 - i. Faculty members are responsible for enforcing the dress code policy and addressing any violation(s) promptly and respectfully. Students who repeatedly violate the dress code policy may be referred to the SSP.
2. Classroom - Lecture Attire:
- a. Refer to general guidelines above
 - b. Comfortable, casual clothing that allows for transition to lab activities
3. Classroom - Lab Attire:
- a. Lab attire should provide free movement, allow for adequate visualization and palpation of the upper and lower extremity joints, the scapulae and spine when required, and meet requirements outlined in the General Guidelines above.
 - b. Loose-fitting gym shorts of sufficient length to completely cover the buttocks or loose-fitting athletic type pants with a loose-fitting t-shirt that is free of holes/tears and meets the requirements outlined in the General Guidelines is appropriate.
4. Business Casual Attire:
- a. Refer to General Guidelines above
 - b. Business casual attire should be worn when giving presentations, when external guest lecturers are presenting, and upon request of the course instructor or PD.
 - c. Examples include but are not limited to the following: shirts with collars, blouses, casual slacks, skirts of appropriate length, clean closed-toe shoes, etc. Shirts should be tucked in or clearly designed to be untucked and remain professional in appearance.

- d. Head coverings, including but not limited to ball caps, hats, scarves, bandanas, and similar items are generally not permitted except for religious practices, medical conditions, and cultural traditions.
 - i. Head coverings must not interfere with required protective equipment or hygiene standards in laboratory or clinical settings
 - e. Scrubs may be worn if approved by the course instructor or PD.
 - f. Athleisure wear is NOT considered professional attire.
- 5. Clinical Setting Attire:
 - a. Students are required to follow the dress policy of the clinical site that they have been assigned.
 - b. The clinical site or Clinical Instructors will provide this information to the student.
- 6. Accessories
 - a. Sunglasses are to be removed when indoors unless prior approval from the PD has been granted.
 - b. Jewelry should be kept to a minimum, must not pose a safety risk during hands-on activities, and may need to be removed at the discretion of faculty or clinical supervisors to ensure safety and compliance with professional standards.
 - c. Students may be asked to cover tattoos and/or piercings that are considered unprofessional or disruptive in academic or clinical settings.
- 7. Fingernails
 - a. Fingernails must be neatly manicured, short, and clean. Length should not interfere with the essential functions of a physical therapist (i.e. palpation, functional mobility assessment and assistance, interventions, etc.)
 - b. If polished, nails must not distract from the learning environment.
- 8. Hair
 - a. Facial hair, including beards and mustaches, is allowed provided it is neatly trimmed and well-maintained to reflect a professional appearance.
 - b. Long hair must be pulled back or neatly restrained to avoid interference with patient/client care and lab activities.
 - c. Final decisions regarding the appropriate appearance of hair for the academic setting will be made by the PD and Student Success and Progression Committee.
 - d. Final decisions regarding the appropriate appearance of hair for clinical experience will be made by the Clinical Education Team and Clinical Sites.

3.4.4 Transmitted Diseases

Students enrolled in the DPT Program and faculty should be particularly aware of the potential contamination from infectious agents and disease in the health care environment. Students

enrolled in the DPT Program must comply with the ad hoc requirements needed for current infectious disease mitigation and requirements in the [Clinical Education Guide](#).

3.4.5 Use of Clinical Classroom

Students have access to clinical classrooms to practice clinical skills and complete assignments when classes are not scheduled. The following rules govern the use of clinical classrooms.

1. Clinical Classrooms are to be left **neat and clean** after use. Students are to wipe down the tables and chairs/stools when finished.
2. Students should make sure that all equipment is clean, put away, and turned off when completed.
3. Students are to **remove shoes** and any other items that could puncture the leather prior to using the tables.
4. Students are not to use any equipment that they have not been instructed on nor treat individuals other than those enrolled in the program. Students are not to use modalities on themselves.
5. Students should close and make sure clinical classrooms are locked when they leave. When using the clinical classrooms students should always have a **mobile phone** to use in case of an emergency.
6. Do not allow **unauthorized individuals** into clinical classrooms.
7. **Do not share the combination** to the room with anyone other than those enrolled in the program.
8. IN CASE OF AN **EMERGENCY** CALL UNIVERSITY POLICE AT **803-777-9111**.

3.4.6 Computer Use

Computers and printers are available for student use in the Blatt PE Center. The following rules govern the use of program computers.

1. Room is to be left **neat and clean** after use.
2. Do not allow **unauthorized individuals** to use the computers.
3. **Do not share the combination** to the room with anyone other than those enrolled in the program.
4. When done leave the computers on but **log out**.

3.4.7 Use of Electronic Equipment in Classroom

Computers are allowed in the classroom for the purposes of activities related to instruction. All other use during class time is prohibited and considered disrespectful to the instructor and the class. A student violating this privilege may be asked to close their computer or leave class. Repeated violations of policies on use of computers during class may lead to the student not being allowed to use their computers during class and referral to the Student Success and Progression Committee. Individual syllabi may have point deductions for violations to this

policy. Repeated violation of this across multiple classes may result in the loss of class computer privileges for the remainder of the program of study.

All mobile phones should be muted prior to each class. Texting and the reading of text messages in class is not allowed. Repeated violation in a particular class may result in the student being referred to the Student Success and Progression Committee. Individual syllabi may have point deductions for violations to this policy.

3.4.8 Professional Responsibilities - Media Policy

The Program recognizes that electronic forms of communication and social media have assumed a larger role in education, clinical practice, and research. However, an increasingly widespread use of multimedia platforms also means that distinctions between private/personal matters and public information have become blurred. It should be recognized that it is illegal to post protected information and certain activities. In these cases, violations can be subject to civil and criminal penalties, which may include fines and/or imprisonment. In addition, violators may face administrative actions by the Program, which could range from a letter of reprimand to course failure and/or dismissal from clinical experiences. Communication and social applications may include but are not limited to Facebook, LinkedIn, Twitter, Instagram, GroupMe, Snapchat, TikTok, and YouTube.

The following activities are strictly forbidden and may be subject to legal action and/or Program sanctions:

- Students may never post the personal health information of others. De-identifying an incident involves much more than removing an individual's name. Other potentially identifiable information includes the date or location of the encounter, age, gender, race/ethnicity, diagnosis of the individual, and/or treatment plan. This is a federal and state-protected right that holds violators accountable to disciplinary actions and personal legal liabilities.
- Clinical affiliation sites may have specific policies for obtaining limited consent to photograph and/or record patients and clinical care for educational purposes. Social media postings of photographs or videos of surgeries, wounds/injuries, and patients in clinical or class outreach activities may contain identifiable information and thus are forbidden except by consent, clinical site policy or IRB approved research methods.
- It is not permitted to disclose academic information about another student, which may include but is not limited to examination or course grades, clinical education experience evaluations, and academic or disciplinary sanctions. This information is federally protected, and violators are subject to legal and civil penalties.
- Students may not identify themselves as an official of the Physical Therapy Program of the University of South Carolina, or state posted opinions as representative of the Program.

- Similarly, students may not represent themselves as another person (real or fictitious) or obscure their identity to circumvent the social media regulations specified in this policy.
- Students may never make direct or implied threats against others, including but not limited to patients, students, instructors, staff, or clinical faculty.

The following activities are forbidden and subject to Program sanctions:

- Students may not take or post photos, audio or video recordings of lectures, labs or review sessions, or any course materials or exams without the authorization of the instructor. Students should always obtain permission directly from the course instructor before taking or disseminating information.
- Course materials (lecture slides, lab activities, etc.) should not be uploaded to any open-loop artificial intelligence (AI) tool that includes data sharing to train models without the authorization and consent from the course instructor. The student may upload course materials to AI tools affiliated with the University that are closed-loop provided they have logged into the tool per university procedure to ensure data will be kept private.
- Use of generative AI tools (e.g. ChatGPT, Copilot, Gemini, etc.) must follow the expectations outlined in each course syllabus, by each clinical instructor, and in the Research and Evidence-Based Project Guidelines. Submission of work that includes AI-generated text, analysis, or code without disclosure or approval from the course instructor, clinical instructor, or project mentor is prohibited and would be considered a violation of the University Honor Code. The use of generative AI for any assignment or product will be decided on and defined by the instructor/mentor.
- Social media may not be used for unauthorized collaboration on assignments, online quizzes or exams that have been designated as individual work. If the students are not certain whether an assignment is individual or collaborative, they must first ask their instructor for clarification. Unauthorized collaboration in any form for any item that has been designated as individual work is considered a violation of the USC honor code and subject to separate disciplinary action up to and including removal from the Program.

The following unprofessional behaviors are strongly discouraged and may be subject to disciplinary action from the Program, clinical affiliation site, or both:

- Use or display of offensive language, photographs, or videos.
- Photographs, videos, or language that can be interpreted as disrespectful to individuals or groups based upon their age, gender, race, ethnicity, religious beliefs, or sexual orientation.
- Posting of potentially inflammatory or unflattering material on a group or another individual's social media page (i.e., Twitter post, "wall" of another's Facebook page).
- Posting of disparaging remarks about employers, co-workers, clinical sites, faculty, students or the University.

Final Social media considerations: There is significant legal precedence for institutions to use the content of social networking sites as an employment screening tool or as cause for job termination. Therefore, a responsible and professional approach should be used for all personal and professional social media exchanges. Videos or other social media that do not violate laws but present others under a false light, imply professional incompetence, or defame character may be subject to personal civil legal actions filed by individuals.

Remember that even stringent privacy barriers can be breached, and unauthorized individuals may still gain access to a student's webpage or social media site. While a post can be removed from a social networking site, the information may have already been exported or printed by another user. Therefore, content can survive far beyond an initial post, in other sites or media formats.

This policy illustrates the most pressing and most common areas of concern and is not intended to identify every action that does not comply with the law, University policy, or professional standards as outlined in the APTA Guide for Professional Conduct. **Please consider posts carefully.** Use a waiting period or seek consultation if you think there is any possibility the content could be misinterpreted as defamatory, offensive, a violation of privacy, etc. This social media policy also applies to those employed by the DPT program (faculty, staff, TAs)

3.5 Academic Responsibilities and Determination of Standing

Physical Therapy (PT) is a clinical profession and therefore it is vital to public safety that Program faculty are assured that students progressing to their clinical experiences, and those entering the profession have the skills necessary to practice in an effective, safe and ethical manner consistent with contemporary practice. For this reason, Core Faculty of the DPT Program have established formal academic standards that include both scholastic (3.5.1) and professional (3.5.2) responsibilities beyond the standards of the Graduate School. In addition, the Core Faculty make all retention decisions.

3.5.1 Scholastic Responsibilities

Students enrolled in the DPT Program are required to meet the scholastic standards of the Graduate School as detailed in the University Graduate Studies Bulletin and those established by the Core Faculty of the DPT Program.

Graduate School Requirements- Every graduate student at USC has online access to the Graduate Studies Bulletin. The first part of this document contains general information concerning USC and the Graduate School. The Graduate Studies Bulletin also includes a complete section of specific information on the School of Public Health, graduate degrees offered by the Department of EXSC, and a description of graduate courses.

- **Grade Point Average:**
 - The Graduate School requires that students must maintain a grade point average of at least 3.0 on a 4.0 scale on all courses attempted for graduate credit. The student must also maintain a grade point average of at least 3.0 on a 4.0 scale on all courses numbered 700 or above.
 - The DPT program requires that students earn a minimum grade of $\geq$ B or 'Pass' on all courses identified with a PHYT subject code. There are two exceptions: PHYT 702 Musculoskeletal and Gross Anatomy Dissection and PHYT 731 Mechanism of Motor Skill Performance which must be passed with a grade of 'C' or higher. All other courses in the program of study with the following subject code: EXSC, PHPH, and PUBH must be passed with a minimum grade of 'C' or 'Pass' (within the rules of the graduate school).
- **I (Incomplete) to F:** An "I" is a temporary mark that may be assigned at a professor's discretion to allow a specified additional time to finish course requirements following illness, accident, or unusual hardship. A grade of "I" is converted to a grade of "F" after one (1) year if requirements are not met.

3.5.1.1 Course Remediation:

Students receiving less than a passing grade (<79.6%) on any major evaluation (written or practical/skills competency) in a PHYT course may be offered a chance to remediate that content. (Note for PHYT 702 and PHYT 731, the threshold for remediation is <69.6% on any major evaluation (written or practical/skills competency)). The presence, content, and structure of the remediation sessions are course dependent (determined by the instructor). Course Instructors will have specific remediation policies and procedures in the syllabus that outline the content and structure of remediation for their course. **Remediation is considered a second attempt to secure knowledge or clinical skills to facilitate student safety and competence in clinical practice.** Remediation is not used to replace a poor grade in a class. Remediation of an evaluation will not change a student's original score. The original score will be used in final grade calculations for the course.

Students are provided only one attempt at remediation per exam. If that remediation is not successfully passed, the student may be dropped from the class. Any subsequent remediations are at the discretion of the Core Faculty. Failure to earn a final grade of 79.6% or greater score on any practical/skills competency will result in failing the course.

Remediation is a privilege provided by the faculty and is granted to students enrolled in the DPT Program. Core Faculty have the right to withdraw the opportunity for remediation from individual students who repeatedly use this privilege to demonstrate skills, safety or 79.6% mastery of the content. Students having their remediation privilege revoked and not passing an evaluation (written or practical/skills competency) will fail the course and may be dismissed from the program.

Course failure has implications for progress through the DPT Program which is dependent upon the successful completion of each course at the time that it is offered in the program of study. Courses are sequenced in the curriculum to build upon the knowledge gained in previous courses. For this reason, students not successful in completing a course may be restricted from taking additional courses until the student successfully demonstrates that course content/skills or the course is repeated. This may result in the student's graduation being delayed. The faculty will review a student course failure case individually and notify the student of his/her ability to enroll in additional coursework prior to the semester following the deficient coursework. See potential DPT Core Faculty decisions outlined in 3.5.3 (Procedures for Policy Violations).

3.5.1.2 Early Identification of Deficient Academic Performance:

Students are expected to avoid a pattern of repeated need for remediation of exams, skills competencies, or assignments. Individual faculty share course scores less than 79.6% (<69.6% for PHYT 702, PHYT 731, and all EXSC, PHPH, and PUBH courses) to a centralized reporting system for review by core faculty to assist with the identification of students exhibiting patterns of regular remediation. If a student requires remediation twice in a single course or four times across the curriculum in a single semester, they will receive an **Academic Concern**.

If a student receives an Academic Concern, they will meet with their Faculty Mentor, complete a corrective action plan questionnaire, and may be placed on a learning contract.

A learning contract may be developed for a student that demonstrates, through performance on written examinations, assignments and/or practicals/skills competencies, that they lack knowledge, concepts and/or skills relevant to the course and curriculum. The contract will be developed by the course instructor(s) and faculty mentor. This contract will outline the content area(s) that appear to be challenging for the student and suggest options designed to help the student be successful in the course and curriculum. These suggestions may include but are not limited to tutoring, additional meetings with the faculty, group study sessions, or additional assignments selected to demonstrate competency in the materials. The PD and Core Faculty will evaluate each student's progress related to the learning contract independently (on a twice a month basis) and determine if additional action is warranted (e.g., changes or additions to the learning contract).

3.5.1.3 Grading:

Faculty members establish the grading policies and procedures for their individual courses. The DPT program has adapted a set grading scale that is consistent across most courses, this scale and the exceptions are detailed in each course syllabi.

A = 89.6% to 100%
B+= 87.6% to 89.5%
B = 79.6% to 87.5%

C+= 77.6% to 79.5%
C = 69.6% to 77.5%
D+= 67.6% to 69.5%
D = 59.6% to 67.5%
F = <59.6%

In establishing these grading policies, faculty members must ensure student mastery of all course work. Students not demonstrating mastery in specific aspects of the course may, at the decision of the faculty member, be provided remedial work. The opportunities for remedial work may be limited and if available will be delineated in the grading section of the course syllabus. Remedial work may or may not be considered in assigning a final grade by the course instructor. Unsuccessful completion of any PHYT course retaken for remediation will automatically result in dismissal of the student from the program.

3.5.1.4 Comprehensive Exam:

Students at the conclusion of the didactic course work will be required to pass a comprehensive examination. The comprehensive exam will include a written exam and an oral exam.

Written Exam: The comprehensive written examination for the DPT Program will consist of multiple-choice questions in the form of a practice licensure exam. The exam focuses upon the student's mastery of clinical knowledge and practice. The passing grade for the exam will be established each year by taking the **mean class grade + 1.5SD**. Prior to taking the written practice exam, students must attend the on-campus board preparatory course. This course is typically offered prior to the beginning of terminal clinical experiences and is arranged by the DPT Program. If extenuating circumstances arise that prevent attendance, the PD must be notified immediately, and the student may be responsible for the cost of alternative arrangements that are approved by the PD. Failure to attend the board preparatory course may delay the student's comprehensive exam and progression in the program. Students who do not pass the comprehensive written examination will be required to retake it. A second failure will require the student to take an oral exam prepared and graded by the Core Faculty. Pass or failure of the oral examination will be determined by the assessment of the Core Faculty. Failure to pass the oral examination will result in the student not being retained by the program. Students can take the examination a maximum of three times.

Oral Exam: A student's research/evidence-based project presentation and performance on the questions and answers portion of this presentation are considered the oral portion of the comprehensive examination. Pass or Failure of the oral exam will be determined by the project mentor and other committee members or second readers. Failure on the first attempt will be followed by a structured plan to remedy deficient areas and a second meeting to repeat all or part of the project presentation/question and answer portion. Failure to pass the oral examination will result in the student not being retained by the program.

3.5.1.4.b NPTE – Approval to Sit for the Exam Prior to Graduation

To be eligible to sit for the FSBPT NPTE prior to the successful completion of the DPT program (all coursework and clinical education experiences) and official graduation you must:

- Be in good standing within the DPT program, Arnold School of Public, and University. This means not on program or University probation or under any form of remediation or disciplinary action.
- Achieve a score of **600 or higher** on the DPT program's comprehensive exam which is the FSBPT's Practice Exam & Assessment Tool (PEAT). You will have **two opportunities** to meet this requirement, with exams scheduled in **April and early May** of your 3rd year of the DPT program. These exam opportunities are set to occur prior to the start of your 4th and final clinical experience.
- Fully complete and turn in required pre-application materials and application for admission to the NPTE by the deadlines established by the DPT Program as well as the University of South Carolina, which are announced each year based on the NPTE examination date(s) and FSBPT deadlines. The application and dates will be announced by email by the program director or their proxy.

3.5.1.5 Research or Evidence-Based Project:

Students must successfully complete three credits of PHYT 887 or PHYT 888. In each semester of these PHYT 887/888, students must complete the outlined tasks and meet the deadlines established for that semester. Those students not meeting these deadlines may not pass PHYT 887/888 for that semester and will be reported by the faculty mentor to the Success and Progression Committee and the Program Director for action. Actions taken may include, but are not limited to the following:

- Suspension from the program including all course work and clinical experiences until the project deadlines are met.
- Dismissal from the program of a student not progressing in a timely manner.

3.5.1.6 Clinical Performance:

Students receive midterm and final evaluations of clinical performance in all clinical courses. In all clinical courses the CI rates the student using the *CIET*. The Clinical Grading Policy is outlined in *Clinical Education Guide*. In the Clinical Education Policies and Procedures section of the *Clinical Education Guide*, policies and procedures are detailed for 1) Clinical Problems and 2) Repeat or Extension of a Clinical Course.

3.5.2. Professional Responsibilities

In addition to cognitive and psychomotor skills, the education and development of a quality physical therapist also include affective behaviors (i.e. those driven by emotions, feelings, and mood). Education in professional behavior in didactic and clinical environments is an explicit

component of the DPT curriculum. Students must commit to adhering to all regulations regarding conduct established by the DPT Program.

Standards of affective and professional behaviors are critical for professional performance and are incorporated into evaluating student progression through the curriculum. In addition to a core of cognitive knowledge and psychomotor skills, it has been recognized by educators and practicing professionals that a repertoire of professional behaviors is required for success in any given profession. The professional behaviors described for physical therapists are outlined here and can be found at this [link](#) in more detail:

1. **Critical Thinking:** the ability to question logically; to identify, generate, and evaluate elements of logical argument; to recognize and differentiate facts, illusions, assumptions, and hidden assumptions; and to distinguish the relevant from the irrelevant.
2. **Communication Skills:** the ability to communicate effectively [i.e. speaking, body language, reading, writing, listening, social media (see social media policy 3.4.8) for varied audiences and purposes.
3. **Problem-Solving:** the ability to recognize and define problems, analyze data, develop and implement solutions, and evaluate outcomes.
4. **Interpersonal Skills:** the ability to interact effectively with patients, families, colleagues, other healthcare professionals, faculty, staff, fellow students, and the community and to deal effectively with cultural and ethnic diversity issues; to act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability; the ability to recognize their personal biases and not discriminate against others in physical therapist practice, consultation, education, research, and administration.
5. **Responsibility:** The ability to fulfill commitments and be accountable for personal and professional actions and their outcomes. Including punctuality and attendance (see full attendance policy) responding to programmatic requests and emails within a timely manner, and meeting established deadlines
6. **Professionalism:** the ability to exhibit appropriate professional conduct and to represent the profession effectively.
7. **Use of Constructive Feedback:** the ability to identify sources of and seek out feedback and to effectively use and provide feedback for improving personal interaction.
8. **Effective Use of Time and Resources:** the ability to obtain the maximum benefit from a minimum investment of time and resources.
9. **Stress Management:** the ability to identify sources of stress and to develop effective coping behaviors.
10. **Commitment to Learning:** the ability to self-assess, self-correct, and self-direct; to identify needs and sources of learning; and to continually seek new knowledge and understanding.

The DPT Program utilizes multiple assessments throughout the curriculum to ensure the acquisition of entry-level skills and promote the development of professional behaviors. The following documents guide the program faculty and students in understanding, evaluating and improving professional behavior.

- [Code of Ethics for the Physical Therapist](#)
- [Professional Behaviors for the 21st Century](#)
- [APTA Core Values](#)
- [APTA Guide for Professional Conduct](#)
- [University of South Carolina Honor Code](#)
- [University of South Carolina Student Code of Conduct](#)

While professionalism is broadly defined, for our purposes, professional behavior should fit into the scope of what would be expected of a licensed physical therapist.

3.5.2.1 Exemplary Achievement in Professional Behavior:

Students that are observed demonstrating **exemplary** achievement in professional behavior may receive a Notice of Exemplary Achievement to formally recognize students for upholding the highest professional standards. Any student, faculty, staff member, or individual associated with the College's academic programs may nominate a student to receive a Notice of Exemplary Achievement using this *Exemplary Achievement Referral form*. See Appendix A for details. The Exemplary Achievement Referral will be routed to the DPT Student Success and Progression Committee (SSP) to determine if formal documentation is warranted. If SSP determines formal documentation is warranted, the SSP will complete a Notice of Exemplary Achievement which will be sent to the student and saved to the student's file.

3.5.2.2 Unprofessional Behavior:

Though unprofessional behavior will most commonly be identified by faculty members during their routine interactions with students, unprofessional behavior may be observed and reported by any stakeholder. Examples of unprofessional behaviors (not an all-inclusive list) are: honor code violations; not observing the dress code for labs and class; disturbing the class with behavior not in line with engaged listening and participation; using electronic devices in class in an inappropriate manner; conducting unrelated activities during class time (including sleeping in class); unsafe behavior in lab or class which might result in harm to other persons; failure to submit CPR certification and all required health records in a timely manner; verbal, physical, or psychological abuse; and behavior and/or communication (verbal and non-verbal) that violates basic social and professional expectations.

3.5.2.3 Professional Responsibilities- Punctuality and Attendance:

Physical therapy education prepares students for professional clinical practice. Our attendance policy is consistent with those at most clinical facilities. Lectures and labs include didactic material, case presentation, patient demonstrations, informal discussions, and the practice of psychometric skills. Attendance at all scheduled classes, laboratory sessions, examinations,

clinical rotations or other curricular activities is a **requirement of the Program** regardless of the format (face-to-face, online) in which these sessions are presented. Additionally, students are expected to be punctual and engaged. Attendance is more than showing up for class. Students must be attentive and mindful as well. No student may sign in for another student for class attendance purposes. Signing in for another student or using a method to portray oneself as present in class when one is not is considered a professional conduct violation and will be referred to the UofSC Office of Student Conduct and Academic Integrity and the student will receive a Professional Behavior *Warning*.

In all academic and professional settings, students are expected to be **on time, alert and prepared to actively engage in all tasks and duties**. When students are assigned to work with others, it is expected that the student will participate and complete their responsibilities in the group project.

Excused Absences: As a general policy, an *excused* absence is one caused by an unforeseen event. Unexpected absences should be reported immediately by email to each instructor whose class will be affected. Sending word by a classmate is not a substitution for direct notification and will not be accepted. Family obligations, employment, travel, and previous plans are not generally accepted as excused absences. Instructors or the SSP reserve the right to ask for a physician excuse for an illness. Absences for an illness of ≥ 3 days or multiple absences secondary to reported sickness are situations more likely to generate a faculty request for a medical excuse. Students are responsible for making up any missed work during an excused absence.

Examples of excused absences may include:

- Illness or injury
- Family emergency
- Bereavement
- Religious observations
- Jury duty
- Military obligations
- Loss of internet access due to storm or natural disaster or another unexpected event

Absence from class to attend professional events such as a state or national conference will be approved on a case-by-case basis by the faculty. To obtain an excused absence for a planned event, you must email each instructor prior to the event (preferably at the beginning of the semester, but prior to event depending on circumstances).

Unexcused Absences: Absence from class due to other planned events of a personal nature (e.g., routine medical/dental check-ups, weddings, work, personal travel, graduation events outside of those for USC DPT) are considered **unexcused absences**. Final determination if an

absence is excused or unexcused is at the discretion of the individual instructors of affected courses with consultation of the SSP as the instructor deems necessary.

Faculty are under no obligation to review the material missed, offer an alternate exam date, or extend assignment deadlines due to unexcused absences. Assignments due during any absence (except for unforeseen events) must be turned in on or before the original due date and time. Students are responsible for material covered during any absence, and it is the student's responsibility to obtain information from classmates regarding missed class activities. The SSP will not consider absences as reasons for poor performance.

Consequences of Violations for Punctuality and Attendance: It is expected that students will use good judgment when taking an absence, doing so only for legitimate or necessary reasons. Failure to notify the faculty member regarding absences or a pattern of unexcused absences is considered unprofessional behavior.

Students must be present in class in order to receive credit for attendance, in-class quizzes, or participation. A student's attendance record may have a direct impact on a course grade. The consequences for these behaviors are outlined in the course syllabus at the discretion of the faculty. Individual course syllabi will address the academic consequence for **tardy or early exit from class behavior**. A pattern of tardiness or occurrences of early exits from class will be reported to the SSP as a potential professional behavior violation.

Faculty may have attendance policies stricter than those set forth by the Program if the policies are stated in the course syllabus. A medical excuse or other appropriate documentation is required to be submitted if the absence occurs on an exam day unless preapproved by the course instructor.

During each semester of the didactic phase, students' attendance will be tracked at the course and program level by faculty/instructors reporting all excused and unexcused absences to a centralized reporting system. A pattern of unexcused absences in the program that would prompt a referral to the SSP for potential violation of professional behavior expectations is considered **4 or greater** recorded incidents across classes in a semester. A pattern of excused absences, tardiness or leaving classes early that may impact a student's successful completion of a course will be referred to the SSP for potential violation of professional behavior expectations.

3.5.3 Procedures for Policy Violations:

Anyone (including classmates, faculty, staff, clinical instructors, general public) may report a student for lack of professional behavior to the SSP through the Individual Referral Form. If possible, and when behavior is directly observed by faculty, faculty are encouraged to intervene to stop the behavior, address pertinent formation issues immediately and report the incident to SSP. The SSP will follow the steps below and document information on the appropriate form. (See Appendix B):

Upon receiving a report regarding unprofessional behavior, the SSP will follow these steps:

1. If the alleged incident appears to violate the University Honor Code or the Code of Conduct, the SSP is **required** to report the incident to the University of South Carolina's Office of Student Conduct and Academic Integrity which will complete an independent investigation.
 - a. SSP will notify the student(s) about the referral.
 - b. SSP can choose to wait on the Office of Student Conduct and Academic Integrity's decision or can proceed with an independent investigation.
2. The SSP will determine if the report is founded (either by report of the Office of Student Conduct and Academic Integrity, by independent investigation, or both).
 - a. If the report is determined to be unfounded, the involved student(s) will be notified of the outcome and documentation will be kept without student penalty.
 - b. If the report is determined to be founded, the SSP will:
 - i. identify the relationship of the behavior to programmatic professional responsibilities (3.5.2.)
 - ii. determine the severity and urgency of addressing the behavior
 1. Determine if the behavior is appropriate for **professional formation**, defined as appropriate for guidance, coaching, and behavior modification, or
 2. Determine if the behavior warrants **consideration of suspension or dismissal** based on severity and/or prior professional behavior concerns.

If the behavior is appropriate for **professional formation**, the SSP will notify the Student's Faculty Mentor of the incident, background information received, perceived relationship to professional responsibilities, and any prior professional behavior concerns or **warnings**

1. SSP will communicate with the student and faculty mentor (via email or other written narrative) faculty knowledge and perspective on the event, and actions the faculty are considering/taking.
2. Faculty mentor will meet with the student, where appropriate, to discuss the event(s) and pertinent professional formation issues and/or resources.
3. Faculty mentor will **forward their input to the SSP**.
4. The SSP decides whether a Notice of Professional Behavior Concern or a Notice of Professional **Warning** is the appropriate action to document their concerns about the student's behavior.
 - a. A Professional Behavior Concern is an informal notice meant to be supportive and alert the student to a gap in performance vs expectation
 - i. If the student already has one or more Professional Behavior Concern on file, the student will receive a Professional Behavior Warning

- b. A Professional Behavior *Warning* is a formal notice that outlines the observed behavior, expected behavior, and consequences of not aligning behavior with expectations moving forward.
 - i. If the student already has one or more Professional Behavior Warnings on file, the student will be placed on Probation.
- 5. If SSP decides that a Notice of Professional Concern is warranted, the SSP completes the appropriate form, informs student of decision (via email), informs the faculty mentor, and saves the form in the student file.
- 6. If the SSP decides a Professional Behavior *Warning* is warranted, the SSP and faculty mentor will meet with the student (if they have not already), to discuss the event(s) and professional formation issues and/or resources (e.g. taking an ethics course, reviewing APTA core values, devising a plan for tardy behavior).
 - a. The SSP will complete the *Professional Behavior Warning form* and both SSP committee representative and student will sign and date the form.
 - b. The completed form will then be saved in the student's file.

If SSP determines that the behavior warrants **consideration of probation, suspension or dismissal** based on the severity of the behavior and/or prior professional behavior concerns, the SSP will: (See [Appendix C](#)).

- 1. Notify the student's Faculty Mentor of the current incident, perceived relationship to professional responsibilities, and any prior professional behavior concerns or *warnings*.
- 2. Along with Faculty Mentor, meet with the student to notify them, discuss the event and gather information.
- 3. Compose a report with relevant information to the reported behavior and include any previous Notice of Behavior Concerns and/or Professional Behavior *Warnings*.
- 4. Develop recommended actions based on relevant information and policies/procedures outlined. These penalties may include but are not limited to:
 - a. Placement on professional conduct probation
 - b. Suspension from the DPT Program for up to one year
 - c. Dismissal from the DPT Program.
 - d. Examples of serious violations where a student may be dismissed after one infraction (not an all-inclusive list) are: HIPAA violations, Honor Code Violations, Harassment, Discrimination.
- 5. The SSP will present the report and recommended actions to core faculty
- 6. Core Faculty will discuss the incident and relevant information
- 7. Core Faculty will vote on the action(s) to be taken (by majority vote):
 - a. If the Core Faculty vote for suspension, the student may be suspended from the DPT Program for up to one year.
 - b. If the Core Faculty vote for dismissal, the student will be dismissed immediately from the DPT Program with no possibility to reapply or return to the program.

- c. If there is an even number of core faculty, the Program Director will not vote to avoid a tie.
8. The Program Director will communicate the actions to the student and inform the Chair of Exercise Science Chair and the Dean of the Arnold School of Public Health.
9. The SSP will complete a final report, including the Core Faculty decision and save it in the student's file.

If a student has already received one written professional behavior *warning* at any point during their time in the DPT Program, receiving a second professional behavior *warning* will result in a minimum of **Academic Probation** but depending on the severity of the violation may result in suspension or dismissal from the DPT Program.

3.5.3.1 Probation, Suspension, and Dismissal

While on Academic Probation or Academic Suspension (either scholastically or from professional responsibility violations), a student is “not in good standing” and may face specific limitations, which may include but are not limited to:

- Ineligibility to hold leadership positions in student organizations, teaching assistant positions, class officer positions in the DPT Program, or any university-wide leadership positions
 - If a student already holds such a position, the Core Faculty will determine if the student maintains, modifies, or relinquishes said position.
- Ineligibility to receive financial support from the DPT Program to attend professional organization meetings
- Timing and location of and clinical instructor for clinical rotations may be impacted to be able to monitor the student more closely.
 - Communication to clinical instructors regarding professional behavior concerns may occur to assist in monitoring and professional formation while in the clinical learning environment.

A student will be placed on **Academic Probation** if any of the following occur:

1. Scholastic Probation: A student that has required remediation four or more times within a single course will be placed on probation for the remainder of that semester and the next full semester (see 3.5.1 Scholastic Responsibilities for more details)
2. Professionalism Probation: A student has received two written Professional Behavior *Warnings* during their course of study or exhibited severe professional behavior concerns as determined by the SSP committee and voted on by Core Faculty as outlined above in section 3.5.2. A student on probation due to professional behavior will remain on probation for the remainder of that semester and the next full semester.
3. A student returning to the Program after a period of Academic Suspension will be on probation for the first semester of their return (see below).

A student will be placed on **Academic Suspension**, for up to one year, if any of the following occur:

1. A student does not successfully complete a course in the program of study (see section 3.5.1 Scholastic Responsibilities) and the core faculty votes to allow the student to return to the Program.
2. A student has received three written professional behavior **warnings** during their course of study or has exhibited severe professional behavior concerns as determined by SSP and voted on by Core Faculty as outlined above in section 3.5.2 Professional Responsibilities.

Upon return to the Program at the end of an Academic Suspension, the student will be on **Academic Probation** for the first semester after their return. The student will also complete the following:

1. Complete all administrative tasks required to resume course work in a timely fashion (i.e. course registration, prompt responses to communications from the Program, completion of all relevant paperwork)
2. Audit full or portions of previously passed courses to ensure continued competence
3. Present a plan for completion of the Program's research/evidence-based project requirement to the Faculty Mentor
4. Enroll and participate in Seminar for all registered semesters

A student will be **Academically Dismissed** if any of the following occur:

1. A student does not successfully complete a course in the program of study (section 3.5.1 Scholastic Responsibilities) and the core faculty votes not to offer a spot in the returning class.
2. Unsuccessfully completing any PHYT course retaken for remediation in the program of study.
3. A student has received four written professional behavior **warnings** over the course of their time in the DPT Program or as determined by the SSP, Core Faculty and Program director as outlined above.
4. Other factors deemed severe enough for dismissal by a majority vote of core faculty.

3.5.4 Appeal Policy

Students not in compliance with the requirements of the Graduate School should follow the [appeal procedures](#) outlined by the Graduate School. Graduate School appeals will be reviewed by the Core Faculty and a recommendation of the Core Faculty for action will be forwarded to the Graduate School.

Students not in compliance with the requirements of the DPT Program must appeal in writing

(within two weeks of notification) to the PD who will bring the matter to the Core Faculty for complete review. In response to an appeal, faculty may take no action and leave the current ruling in place or change, or modify, the current ruling.

For reinstatement following dismissal, a student must demonstrate extenuating circumstances that **significantly contributed** to his/her performance. [The student may utilize the services of the graduate ombudsman for assistance.](#)

Students, who for reasons above, are suspended or dismissed from the Program have a right of appeal further to the University beyond the Program.

Appeals of suspensions or dismissals from the Program are conducted by the ASPH Grievance Committee. Grievance procedures are initiated following the procedures outlined in the Policies and Procedures of the [Arnold School of Public Health Grievance Committee](#).

3.5.5 Leave of Absence

If the student leaves the Program for a personal/medical reason, documentation of such must be provided to the Program Director. If the student leaves the Program on an approved leave of absence, the student will have the opportunity to re-enroll the following academic year in the semester that the student did not successfully complete. In the case of a medical leave of absence/medical withdrawal, the student must provide a letter of medical clearance to the Director and Registrar before re-enrollment.

3.6 Insurance Requirements

MALPRACTICE INSURANCE: Malpractice insurance in the amount of Two Million/Four Million dollars of coverage per incidence/occurrence is required for the duration of each clinical experience and is provided by USC DPT program. Additional personal student professional liability coverage can be obtained through Healthcare Providers Service Organization. Information regarding this coverage can be found in [Clinical Education Guide](#), accessible on the Program Webpage.

HEALTH INSURANCE COVERAGE: Students are required to maintain health insurance coverage and must keep proof of this insurance coverage on file with the DCE. Failure to provide the required statement of health insurance coverage will prevent the student from attending the required clinical education experience and will likely result in delayed graduation.

4.0 Academic Program

4.1 Program of Study

Students are required to complete the program of study (i.e. sequence of coursework, clinical experiences and research) documented in the program of study. The [program of study](#) of each cohort is available at the program website under the year of expected graduation. **It is the**

responsibility of each student to keep track of his or her progression and ensure they are fulfilling the requirements for graduation. Prior to graduation the office of the PD's office will check to ensure that each student approved for graduation has met the Program's requirements.

4.2 Clinical Education Requirements

Students must successfully complete all clinical experiences. Failure to complete a clinical experience may result in delayed graduation and restrictions placed on academic progression. All clinical experiences must be completed and are regulated by the policies and procedures outlined in the [Clinical Education Guide](#).

4.3 Research/Evidence-Based Project

Students enrolled in a DPT Program must submit an approved research or evidence-based project to the office of the PD to satisfy part of the requirements for the DPT degree. This document is the ultimate requirement of the academic program because it remains as a permanent record of the independent research and creative effort that led to the award of the DPT degree. Guidelines for completing this project can be found in the Research and Evidence-Based Project Guidelines. Authorship on any professional dissemination of a research or evidence-based project completed to fulfill the requirements of the program of study should be discussed with and approved by the project mentor and include the contributing committee members directing the project.

5.0 Essential Functions

It is the policy of the DPT Program at USC to provide **reasonable accommodations** for qualified students with disabilities so they can perform the essential functions required for graduation and the practice of PT. USC Office of Student Disability Services and the DPT Program make the determination of **reasonable accommodation** jointly. These are outlined in the [Essential Functions form](#) on the program website.

6.0 Informed Consent

DPT students are required to sign an ["Informed Consent"](#) document detailing the activities they will experience during laboratory courses throughout the program of study and clinical experiences

The rights and safety of research participants are protected by the policies and procedures set forth by the [Office of Sponsored Awards Management \(SAM\)](#). All research conducted by students enrolled in the DPT Program involving human and/or animal subjects is conducted under the guidelines and review of the Institutional Review Board.

7.0 Program Complaints

There are several methods by which individuals can submit a complaint or comment regarding the DPT Program at USC, its faculty, staff or student.

7.1 Making a Complaint or Comment

For Complaints or Comments Regarding the Program's Accreditation.

The DPT Program at USC is an accredited program by CAPTE, a nationally recognized accrediting agency. As part of the accreditation process, the DPT Program is encouraged to provide a [method](#) by which the general public and academic community can file a formal written complaint regarding any aspect of the program or the conduct of one of its faculty/students.

Complaints can be submitted to the accrediting agency with written testimony regarding the program or file a formal complaint following the procedures detailed at the CAPTE website or by directly contacting: American Physical Therapy Association, Attention: Accreditation Department, 1111 North Fairfax Street, Alexandria, VA 22314-1488; Fax: 703/706-3387; or e-mailed to accreditation@apta.org.

For Informal Complaints or Comments

Informal comments or complaints regarding the program can be made through the office of the Chairman of the Department of EXSC. Individuals wishing to make a complaint or comment about the program, its faculty or students may do so by following these procedures:

- Detail complaint in a brief narrative. Identify all the important details and identify those individuals involved.
- Provide dates when applicable.
- Provide details regarding role in the complaint/comment.
- Submitter should offer suggestions as to how they believe the complaint/comment should be resolved.
- Provide steps that have already been taken to resolve the issue.
- Provide contact information.

Complaints and Comments can be mailed to the Chairman, Department of EXSC, ASPH, University of South Carolina, Columbia, SC 29208. Once the complaint or comment has been submitted, the submitter will be notified regarding the action taken in response to concerns.

For Formal Complaints Regarding the DPT Program

There are established procedures for filing formal complaints about the Program, its faculty and students. If the nature of a concern is major and the individual desires to file a formal complaint with the University, they should contact the Office of the Dean, ASPH, University of South Carolina 29208 to discuss the nature of the complaint and to determine what procedures should be taken to initiate the formal complaint process.

For Complaints that Fall Outside the Normal Mechanisms Listed Above

The Program also has a mechanism for individuals to submit complaints about the Program outside the normal mechanisms of due process. Informal complaints regarding the Program may be submitted at any administrative level via the [Individual Referral Form](#).

7.2 Resolution of the Complaint

Formal complaints or comments forwarded to CAPTE or through the University's due process procedures will be resolved following the policies and procedures of the agency to which the complaint or comment was submitted.

Informal complaints of comments will be investigated by the Office of the Chairperson of the Department of EXSC who will make recommendations to the Core Faculty and PD. Individuals submitting a complaint or comment will expect receive a written explanation of the action taken resulting from the submission within thirty (30) days.

As for the Program and the University of South Carolina there is a **prohibition of retaliation following complaint submission**. This "Non-Retaliation Policy" means that it is a violation of this policy for any person to retaliate, intimidate or take reprisals against a person who has filed a complaint, testified, assisted or participated in any manner in the investigation or resolution of a complaint. Appropriate disciplinary actions shall be taken against any person who has been found to have violated this policy.

8.0 Campus Resources

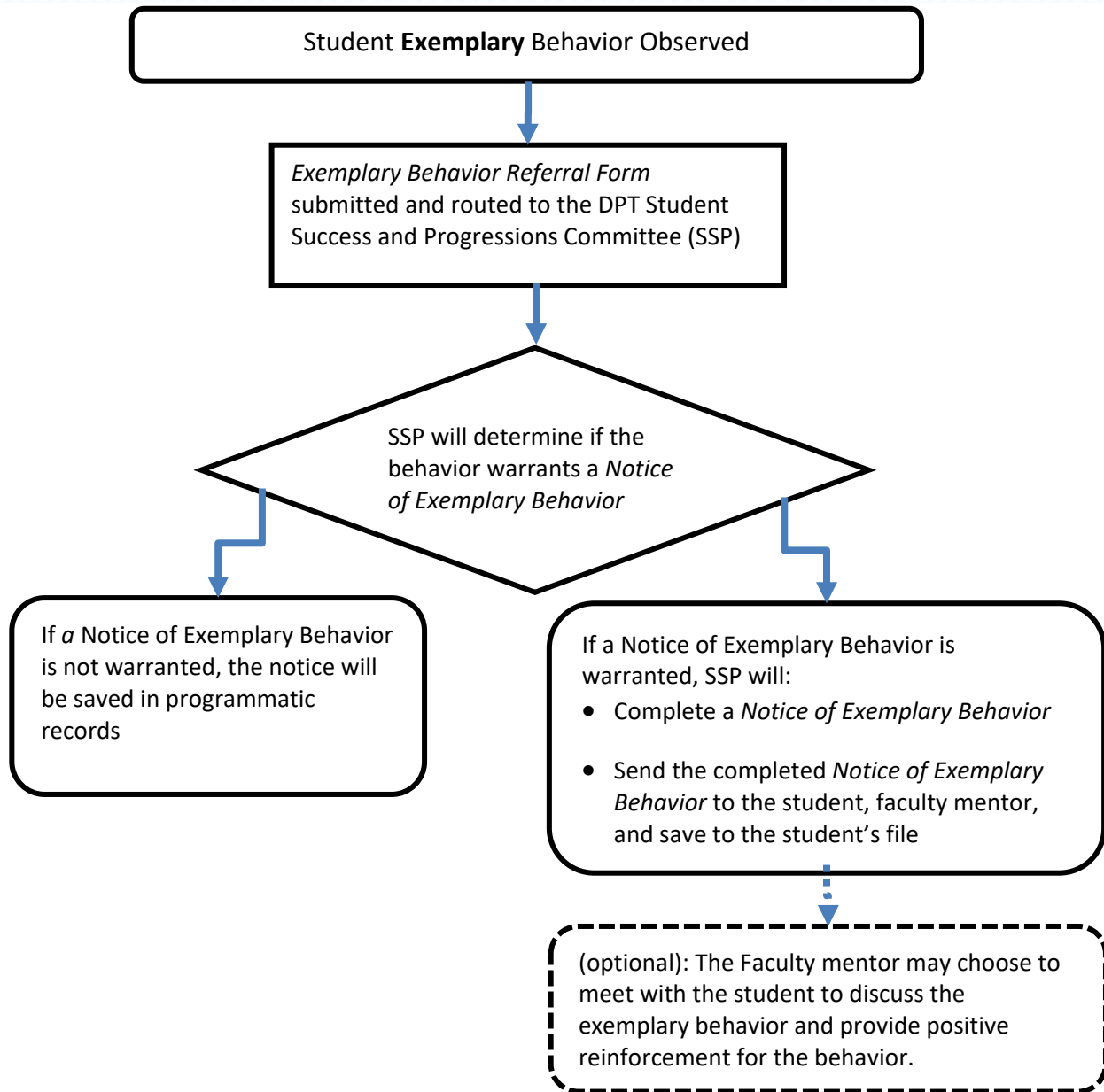
8.1 Counseling

Counseling services feature a multi-disciplinary staff representing psychology, social work, and counseling. Counseling staff provide psychological counseling, education and consultation to the university community, as well as clinical supervision for selected mental health graduate students. Its multidisciplinary team offers services that promote social, emotional, and physical and cognitive well-being for people facing developmental or unplanned challenges. Counseling is available on campus and walk-ins and appointments are welcome.

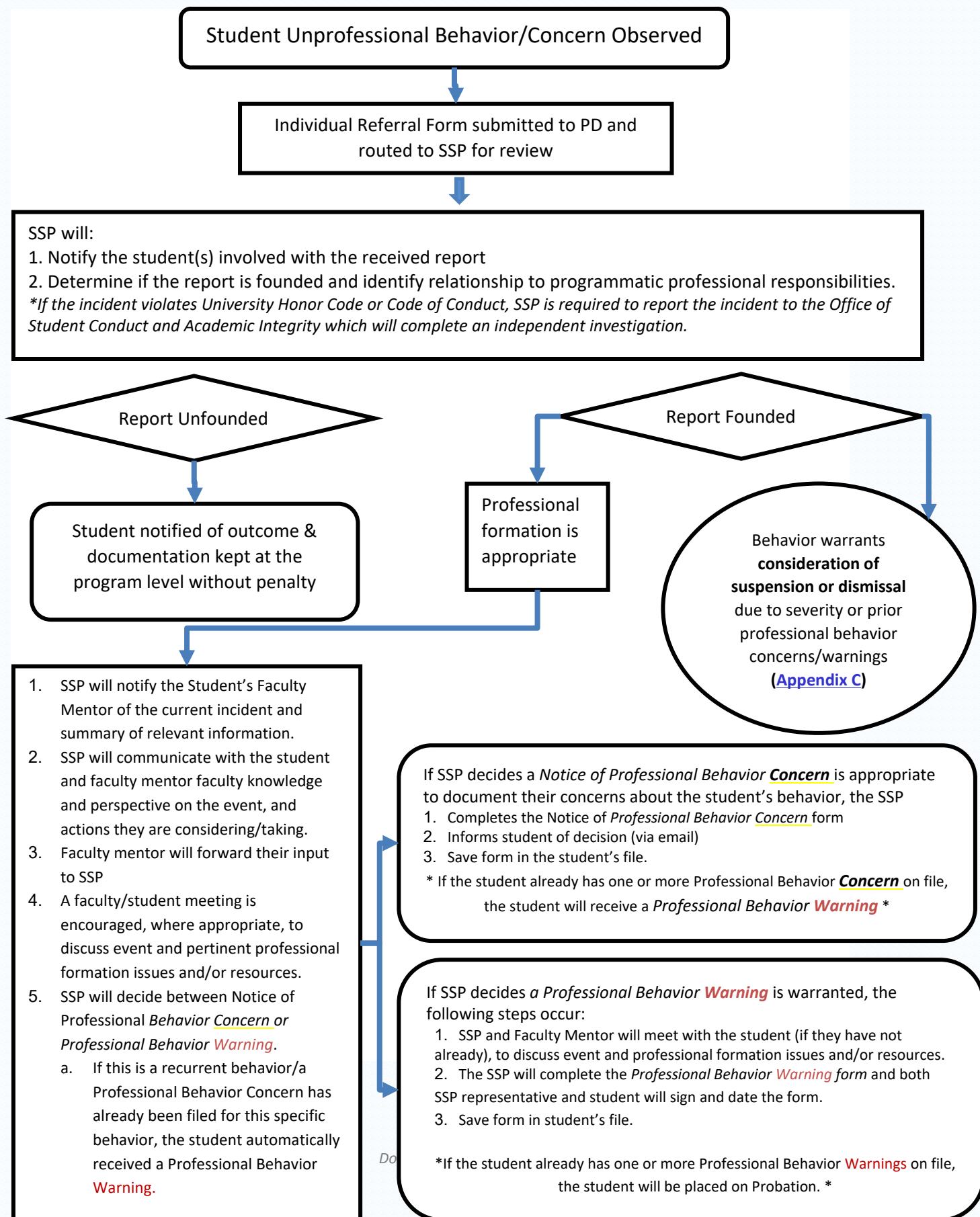
8.2 Financial Aid and Scholarships

Financial Aid and Scholarships is under the division of Student Affairs and Academic Support. This service can help students evaluate costs and determine what type of financial aid support they need. They can also assist with completing the FAFSA, as well as a variety of resources for students including information on cost and aid, grants, loans, and student employment.

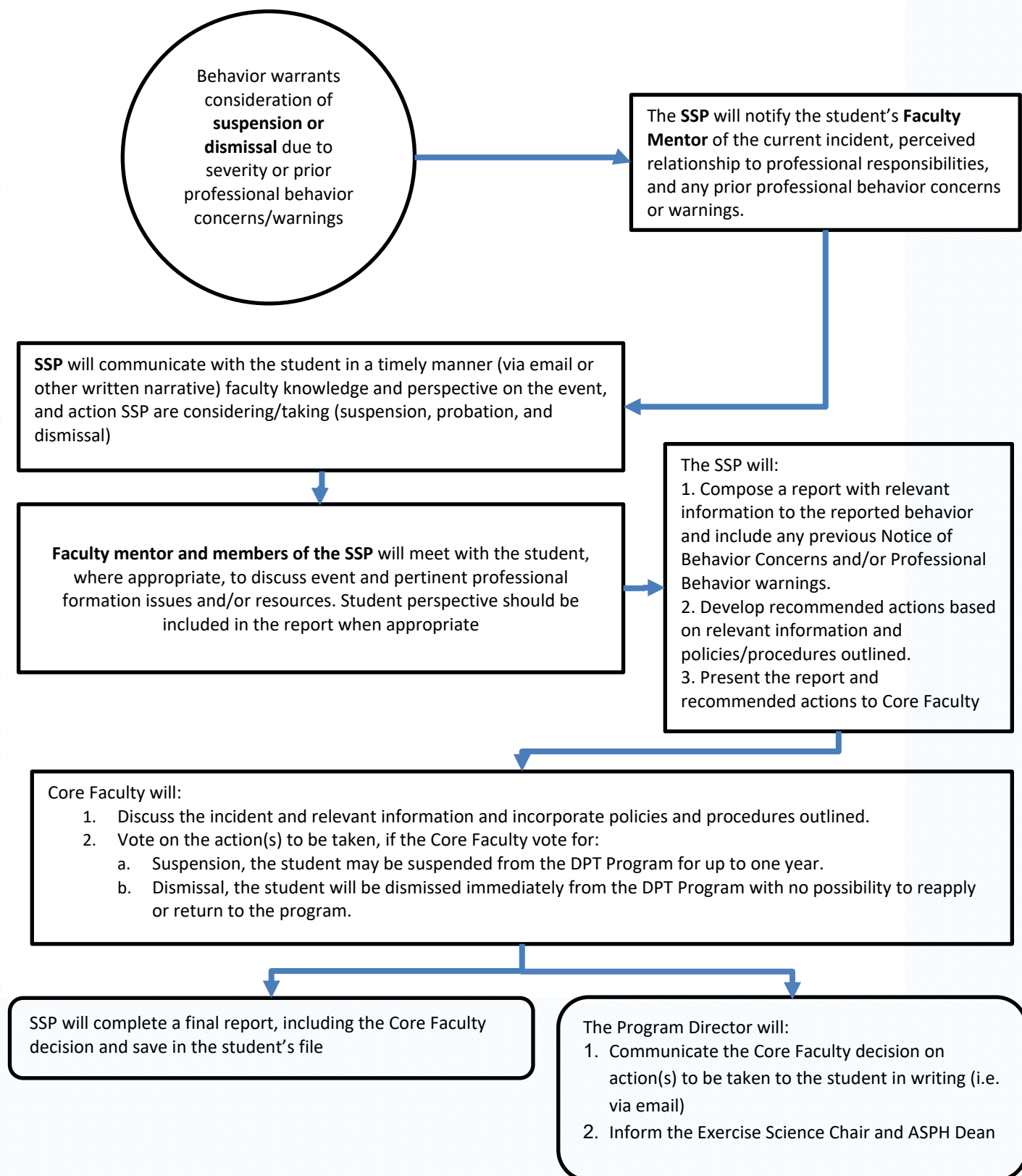
Appendix A: Exemplary Behavior



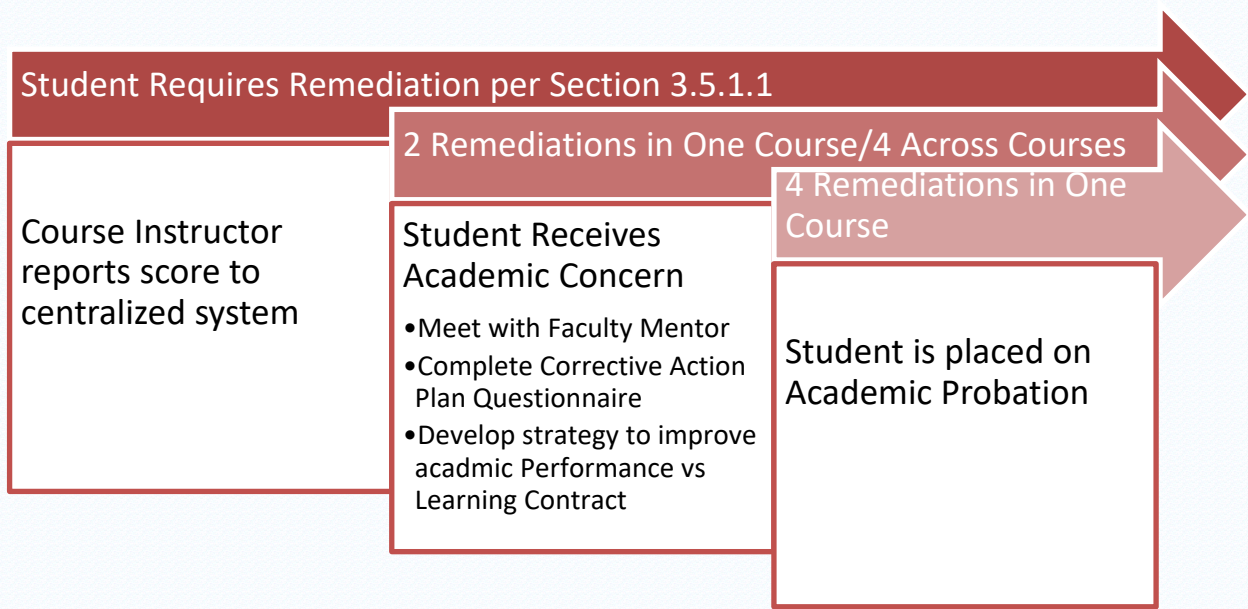
Appendix B Professional Conduct Accountability Pathway



Appendix C: Severe Professional Conduct Accountability Pathway



Appendix D: Academic Success and Performance Accountability Pathway



Appendix E: Professional Behavior and Formation Resources

Professional Formation		
SSP will notify Faculty Mentor and student of the events perceived relationship to professional responsibilities, and any prior professional behavior concerns/warnings	Faculty Mentor will meet with student and develop plan for Professional Formation	Student will submit detailed outline of Professional Formation Plan to SSP which will be filed at Program level

Professional Concern

- Informal & Supportive
- Alert student to gap in performance vs expectation
- Meant for coaching

Professional Warning

- Formal & Punitive
- Formal notice with outline of observed behavior, expected behavior, and consequences of not aligning behavior with expectation moving forward