MARTIN COMMUNITY COLLEGE COURSE SYLLABUS Semester/Year: Fall 2011

COURSE NUMBER: PTA 222 (50)	INSTRUCTOR: Jean Lambert, PhD, PT;
~~~~~	Jamie Van Essendelft, BS, PT
<b>COURSE TITLE:</b> Professional Interactions	OFFICE NO. N/A
CREDIT HOURS: 2	OFFICE NO: N/A
CREDIT HOURS: 2	<b>OFFICE/VIRTUAL HOURS:</b> N/A
CONTACT HRS/WK: 2	
	PHONE NO: (252)792-1521 ext 237
<b>PREREQUISITES:</b> Enrollment in the	
Physical Therapist Assistant Program	FAX: (252)792-0826
COREQUISITES: None	E MAIL.
	E-MAIL:

**COURSE DESCRIPTION:** This course is designed to assist in the development of effective interpersonal skills in the physical therapist assistant setting. Topics include reactions to disability, the grieving process, methods of communication, motivation, health promotion, disease prevention and aging. Upon completion, students should be able to discuss and demonstrate methods for achieving effective interaction with patients, families, the public, and other health care providers. This course will also include personal life as a professional, physical therapy ethics, and professional dress and conduct.

### **PROGRAM LEARNING OUTCOMES:**

- 1. Work as a skilled PTA in performance of assigned duties and patient care activities deemed appropriate by the supervising PT.
- 2. Utilize the knowledge, skills and techniques learned with a degree of competence appropriate for safe and effective patient care.
- 3. Recognize the needs of the patient, family and caregivers as well as document changes in the patient's condition and communicate these changes to the PT.
- 4. Communicate effectively and ethically by way of spoken and written word, information relevant to safe and effective departmental and patient care practices.
- 5. Conduct yourself, at all times, in an ethical, legal, safe ad professional manner as a member of the health care delivery team.

### **COURSE LEARNING OUTCOMES:**

- 1. Demonstrate an understanding of the characteristics of a professional employee and the issues a professional employee can face on the job and in personal life.
- 2. Demonstrate an understanding of appropriate and ethical behavior for the physical therapist assistant.
- 3. Demonstrate a knowledge of appropriate professional conduct and dress for clinical affiliations and clinical site visits.

### Other Outcomes:

- 1. Identify and apply the seven core values of professionalism as identified by the APTA.
- 2. Give a brief definition/description of respect, character traits, virtues, autonomy, and primary goods.
- 3. Describe why respect is so central to the success of the health professional and patient relationship.

- 4. Identify three spheres of values that constitute a value system.
- 5. Discuss how professional values affect a professional who must treat patients whose values differ dramatically from his/her own.
- 6. Identify means by which a health professional can better understand a patient by exploring what a patient's values are.
- 7. Compare the functions of health care institutions directed toward primary, secondary, and tertiary care.
- 8. Compare the perspectives of the individual, institutional, and societal realms of care.
- 9. List three major societal factors that have resulted in our present organizational structure of health care.
- 10. Compare public-and private sector relationships and describe why health professionals and patient interactions are public-sector relationships.
- 11. Compare the characteristics of total institutions and partial institutions of health care.
- 12. List at least three types of laws and policies that have a bearing on how you will practice your profession and what you should be able to expect from the institution in which you work.
- 13. Discuss the idea of patient's rights documents and the purposes they are designed to serve.
- 14. Describe the basis for and the major components of informed consent.
- 15. Define cultural bias and personal bias.
- 16. Identify three sources of personal bias that interfere with respect toward persons or groups.
- 17. Distinguish factors that may cause negative perceptions of another person from factors leading to a positive "halo effect".
- 18. Define prejudice and how it is related to discrimination.
- 19. List primary and secondary characteristics of culture.
- 20. Describe how gender discrimination, ageism, and discrimination based on ethnicity affect the health professions and some ways you can counter their disrespectful dimensions.
- 21. Define cultural sensitivity and cultural competence and describe the steps to achieving each.
- 22. Identify three types of learning that take place during professional preparation and identify the environment in which each kind of learning takes place.
- 23. Explain similarities and differences between the classroom and on-site settings of professional preparation.
- 24. Identify four types of skills associated with professional practice and the eight steps in acquiring skills needed for professional practice.
- 25. List five procedures that should assist the student in adjusting to the on-site education phase of professional preparation.
- 26. Describe the characteristics of critical thinking and their role in professional problem-solving.
- 27. Evaluate several sources of student anxiety and some methods of addressing it effectively.
- 28. Compare important aspects of social and therapeutic helping relationships, describing why maintaining this distinction in everyday practice affects your self-respect as a professional.
- 29. Identify some mechanisms for assuring optimal care when your own areas of competence do not allow you to fully meet a person's health care needs.
- 30. List four criteria for referral of patients.
- 31. List some strength's and potential problems inherent in the team approach.
- 32. Identify and discuss two respect enhancing goals that the interdisciplinary health care team approach is designed to meet.
- 33. Compare the values realized through team decisions that are hierarchy derived and those that are community arrived.
- 34. Describe conditions that enable you to realize self respect through lifelong learning habits.

- 35. List some positive goals health professionals can realize by attending to their own needs and sources of satisfaction.
- 36. Assess some reasons why health professionals may fail to take precautions to safeguard their own health.
- 37. Identify two approaches for constructively adopting good work habits.
- 38. Distinguish the strengths of a Sisyphus type approach to professional tasks from those of a Pandora type.
- 39. Identify some characteristics of solitude and why it is important.
- 40. List four ways to help ensure that you will make time for leisure, play, and solitude.
- 41. Identify bonds among health professionals fostered by several forms of common language.
- 42. Describe conditions under which maintaining wellness becomes a challenge for a person.
- 43. List the most important changes experienced as losses by persons who become inpatients, and some challenges of reckoning with such changes in health care facilities.
- 44. Compare some challenges facing inpatients, ambulatory care patients, and patients who are treated in their homes.
- 45. Discuss the challenges facing patients as they interact with health professionals
- 46. Identify why many patients try to act "brave"
- 47. Name three "advantages" of staying in the patient role.
- 48. Describe three circumstances that may account for a patient's difficulty in sustaining important relationships during a period of serious illness or injury.
- 49. Identify several key challenges that family caregivers face.
- 50. Explain how uncertainty creates anxiety in the patient and family and describe the health professional's role in attempting to alleviate anxiety.
- 51. List sources of support that can help minimize the deleterious effects of stigma for patients and caregivers.
- 52. Discuss how costs can add to the patient's personal problems.
- 53. Distinguish between the different "voices" encountered in the telling of a patient's story.
- 54. Identify some of the literacy forms used in health care communications.
- 55. Describe two of the contributions of the study of narrative to respectful health professional and patient interaction.
- 56. Discuss how a patient might express the experience of illness in a poem, short story, or pathography.
- 57. Relate a patient's narrative to his or her own experiences, values and beliefs.
- 58. Discuss how literary narratives such as poems, short stories, and drama about patients' and health professionals' experiences apply to actual clinical practice.
- 59. Compare and contrast models of communication.
- 60. Describe basic differences between one-to-one communication and working with groups.
- 61. Identify four important factors in achieving successful verbal communication.
- 62. Assess three problems that arise because of the failure to use appropriate vocabulary in communicating with patients.
- 63. Discuss two voice qualities that influence the meaning of spoken words.
- 64. Identify two types of nonverbal communication and describe the importance of each.
- 65. Describe how attitudes such as fear and humor affect communication.
- 66. Give some examples of ways in which time and space awareness differ from culture to culture.
- 67. Discuss ways to show respect through effective distance communication.
- 68. Identify seven levels of listening and describe their relevance to the health professional and patient interaction.
- 69. Describe how trust is a tool that gives shape to the idea of respect between patient and health professions.

- 70. Explain the phenomena of transference and counter transference in the health professional and patient relationship.
- 71. Contrast casualness and genuine caring.
- 72. Describe and compare detrimental dependence and constructive dependence in the health professional and patient relationship.
- 73. Describe how the idea of professional boundaries is relevant to respect.
- 74. Distinguish a respectful professional approach from one based on objectivity and efficiency alone.
- 75. Identify and discuss appropriate physical boundaries in relation to unconsented touching, sexual touching, and sexual contact after a professional and patient relationship has ended.
- 76. Describe three situations in which maintaining emotional boundaries is crucial to showing respect for patients.
- 77. Define "enmeshment".
- 78. Identify some clues that may alert the health professional that his sympathy is becoming pity.
- 79. Describe what it means to "care too much".
- 80. List five practical ways that professional boundaries can be better maintained.
- 81. Identify the optimal mode of respectful interaction between patient and health professional and two key components of the "professional closeness".
- 82. Discuss how integrity conveys respect for other's values thereby fostering professional closeness between patient and health professional.
- 83. Describe six guidelines for helping the health professional make maximum use of the time spent with a patient.
- 84. List several types of "attention to detail" that make patients know the health professional respects then as individuals.
- 85. Identify five levels of intimacy and their appropriateness for a health professional and patient relationship characterized by respect in action.
- 86. Discuss how families serve as bridges to respectful interaction with newborns, infants, and toddlers.
- 87. Identify five processes of the family health system that can lend insight into family and patient dynamics.
- 88. Make several suggestions that will help support healthy functioning of the family during a child's illness.
- 89. Distinguish some key differences that need to be considered on one's approach to newborns, infants, and toddlers.
- 90. List some everyday needs of the infant that may help explain an infant's response to the health professional.
- 91. Describe the steps showing how consistency of approach usually builds trust in an interaction with infant patients.
- 92. Describe five types of play, and show how each can facilitate respectful interaction with the pediatric patient.
- 93. Describe how a toddler's developing need for autonomy enters into the health professional and patient relationship.
- 94. Distinguish some key differences that need to be considered in one's approach to children beyond the toddler stage and to adolescents.
- 95. Discuss in general terms the key development of tasks of children and adolescents.
- 96. Describe how the five types of play are relevant-not relevant-to respectful interaction with older children.
- 97. Identify several aspects of the child's existence that may be creating problems for the child.
- 98. Describe how o child's developing need for successful relatedness enters into the health professional and patient relationship.

- 99. Make several suggestions that will help minimize the disequilibrium of the family during a child's illness.
- 100. List some compelling reasons for giving respectful attention to an adolescent's desire to exercise authority in regard to health care decisions and describe legitimate limits on that authority.
- 101. Discuss four sequential coping phases of adolescent patients.
- 102. Compare some of the unique challenges of development in the middle years with those of childhood and adolescence.
- 103. Discuss the meaning for working adults.
- 104. Discuss "responsibility" as it applies to the middle years of life and how it may affect the response to health professional working with an adult patient.
- 105. Describe some social roles that characterize life for most middle-age persons and consider ways in which showing respect for a patient requires attention to these roles.
- 106. Discuss how stress enters into attempts to carry out the responsibilities of each of the aforementioned roles and some health-related consequences of great stress.
- 107. List some basic challenges facing health professionals who are working with a middle-aged person going through a midlife crisis.
- 108. Discuss in general terms Erickson's assessment of the developmental tasks in the later years of life.
- 109. Describe the roles of friendship and family ties among older people and how these ties can have an impact on an older patient.
- 110. Compare and contrast at least two psychological theories of aging.
- 111. List some basic challenges to well-being that present themselves in old age and the ways in which you, as a health professional, can help older people meet such challenges successfully.
- 112. Describe how the health professional's attention to sensory impairment in older patients who require assistive devices can have a positive effect on interaction.
- 113. Summarize the reasons an established time for treatment and regular routine may be signs of respect toward older patients.
- 114. Discuss appropriate and inappropriate responses to a patient who has acute or permanent cognitive impairment.
- 115. List some values that may become highly prized among many older people, and suggest approaches that the health professional can use to optimize those values.
- 116. Discuss the death-dying relationship and some sources of our understanding about death and dying.
- 117. Discuss denial in regard to its effects on respectful interaction.
- 118. Name four fears of dying that many persons experience.
- 119. List several factors that have a bearing on a patient's response upon learning that he or she has a terminal illness.
- 120. Describe six methods by which, according to historian Arnold Toynbee, humans have sought immortality, and discuss the importance of knowing these methods when trying to show respect for a patient.
- 121. Explain several areas of consideration in setting treatment priorities when a patient is dying.
- 122. Discuss ways to help maintain hope when a patient's condition is irreversible and will result in death.
- 123. Identify some important changes in focus that health professionals should seek when a patient is near death.
- 124. Identify three potential sources of difficulties creating barriers to respectful health professional and patient interaction.

- 125. Discuss how disparities in power within the relationship can lead to anger and frustration on the part of the patient.
- 126. Identify attributes and behaviors of patients, such as manipulative, sexually provocative, or aggressive behaviors, that may challenge the health professional's idea of compassionate care.
- 127. Reflect on personal expectations of what it means to be a "good" health professional and how this impacts interactions with patients.
- 128. Describe environmental factors that may contribute to difficulties in health professional and patient interaction.
- 129. List and evaluate guidelines for managing and, when possible, preventing difficult health professional and patient relationships.
- 130. List and evaluate techniques that can help to change a "difficult" working relationship and the surrounding

## **REQUIRED TEXTBOOKS:**

Purtilo, R. and Haddad, A. (2007) Health Professional and Patient Interaction (7th Edition). Philadelphia, PA: W.B. Saunders.

Gabard, D. L. & Martin, M. W. (2011). Physical Therapy Ethics (2nd Edition). Philadelphia, PA: F.A.Davis.

## SUPPLEMENTAL RESOURCES:

- 1. Audiovisuals
- 2. Power Point Presentations
- 3. Selected Journal Readings
- 4. Web Based Resources

# LEARNING/TEACHING METHODS:

- 1. Audiovisuals
- 2. Power Point Presentations
- 3. Selected Journal Readings Outside Reading Assignments
- 4. Web Based Resources
- 5. Discussion Boards
- 6. Case Studies

### ASSESMENTS/METHODS OF EVALUATION:

- 1. Quizzes: 800 points
- 2. Discussion Boards: 250 Points
- 3. Case Studies: 150 Points
- 4. Final Exam: 200 points

Your final grade will be based on the following scale:

- A = 1295-1400 points
- B = 1183-1294 points
- C = 1071-1182 points
- D = 973-1070 points
  - F= 972 points or less

**GRADING POLICY:** A total of 1400 points are available in this course. The point distribution for the course is as follows:

Ice Breaker-Introduction and Self-Narrative Discussion Board - 25 pts

Module 1 Values Discussion Board - 25 pts

Module 2A Culturally Competent Care Discussion Board - 25 pts Module 2B Quiz - 100 pts

Module 3A Ethics Discussion Board - 25 pts Module 3B Quiz - 100pts

Module 4 Discussion Board - 25 pts Module 4 Quiz - 100pts

Module 5 Ethics Discussion Board - 25 pts Module 5 Quiz - 100pts

Module 6 Case Study - Fictional Patient - 50 pts Module 6 Quiz - 100 pts

Module 7A Ethics Discussion Board - 25 pts Module 7B Ethics Discussion Board - 25 pts Module 7 Quiz- 100 pts

Module 8 PT Practice Act Discussion Board - 25 pts Module 8 PT Practice Act Quiz - 100pts

Module 9 Supervision Discussion Board - 25pts Module 9 PT Supervision Quiz - 100pts

Clinical Rotation #1 - Case Study - Clinical Patient - Discussion Board - 50 points

Clinical Rotation #2 - Case Study - Clinical Patient - Discussion Board - 50 points

Comprehensive Final Exam - 200pts

Scores will be posted in the Grade Book under "My Grades" in as timely a manner as possible.

Your final course grade will be calculated using the following formula:

Total Points Received/Total Points Available in the Course X 100

Example: You receive 1300 of the 1400 points possible in the course. Your grade will be 1300/1400 X 100= 92.8 = 93% (A)

Your final grade will be based on the following scale:

A = 100-93 B = 92-85 C = 84-77 D = 76-70 F= Below 69

The student will evaluate the course as to content and instructional method.

**COURSE OUTLINE:** All assignments are due by 1155pm on the date assigned unless otherwise indicated.

All of the assignments are due at the end week (Sunday night) with the exception of the final (due date on schedule). However you should respond early to the discussion board so that students will have time to respond to each other. You should not wait until the end of the period to complete your assignments. You will not have time to complete them if you wait.

Late assignments and exams will not be accepted except under extreme circumstances. If you have an extreme circumstance (determined by the instructor) you must get PRIOR approval for an assignment to be late. You will not be able to access quizzes or exams after the due date.

Week 1	Topic(s) Ice Breaker	Required Reading Ice Breaker	Assignments E-mail to Instructor, BB Self Assessment Introduction and Self-Narrative Discussion
2	Module 1	Posted Readings	Values Discussion
3	Module 2A	Chapters 1 - 3 - HP and PI; Posted Readings	Culturally Competent Quiz & Care Discussion
4	Module 2B	Chapters 4 - 7 - HP and PI	Mod 2 Quiz
5	Module 3A	Chapters 1 - 2 - PT Ethics Posted Readings	Ethics Discussion
6	Module 3B	Chapters 3 - 4 - PT Ethics	Mod 3 Quiz
7	Module 4	Chapter 8 - 12 HP and PI	Module 4 Discussion; Mod 4 Quiz
8	Module 5	Chapters 5 - 7 - PT Ethics	Ethics Discussion; Mod 5 Quiz
9	Module 6	Chapters 13 - 18 HP and PI	Module 6 Case Study; Mod 6 Quiz
10	Module 7A	Chapters 8 - 10 - PT Ethics	Ethics Discussion
11	Module 7B	Chapters 11 - 12 - PT Ethics	Ethics Discussion; Mod 7 Quiz

12	Module 8	NC PT Practice Act	Practice Act Discussion; Mod 8 Quiz
13	Module 9	Supervision; Posted Readings	Supervision Discussion; Mod 9 Quiz
14	Case Study 1	Clinical 1 Patient Case Study	Patient #1 Case Study Discussion
15	Thanksgiving Break	No Assignments Due	
		0	
16	Case Study 2	Clinical 2 Patient Case Study	Patient #2 Case Study Discussion

See the course schedule for specific week dates and assignment due dates!!!!

### STUDENT ATTENDANCE POLICY: To enter section 50 (Internet) courses, students must do two things:

(1) First, students must complete a technology assessment located on the Blackboard login page.

(2) Second, students must login into Blackboard and complete the first assignment within seven (7) school days.

Both the technology assessment and the first assignment must be completed for students to remain in the course. If students are taking more than one online course, the student ONLY takes the technology assessment ONE time.

The College has a specific absence policy for all courses, which states that students are expected to attend a minimum of 80% of total course. This program abides by the MCC policy You are expected to demonstrate online "attendance" in this course. Your attendance will be taken based on assignments completed. This course has a total of 22 assignments. You will be withdrawn from the course on your 5th missed assignment resulting in a "WF". See the MCC college catalog for further explanation of "WF"

Late assignments and exams will not be accepted except under extreme circumstances. If you have an extreme circumstance (determined by the instructor) you must get PRIOR approval for an assignment to be late. You will not be able to access quizzes or exams after the due date.

COURSE POLICIES: See attendance and grading policies.

If you cannot reach your instructor, you may contact the Dean of Academic Affairs and Student Services at 252-789-0246.

If you have a need for a disability-related accommodation, please notify the Student Services counselor at 252-789-0293.