



2023 - 2024

Physiotherapy Clinical Education Handbook

Approved by the Vice Dean, Graduate Studies August 2023



**McMaster University
Faculty of Health Science
School of Rehabilitation Science
Physiotherapy Program**

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Table of Contents

1.0	MSc (Physiotherapy) Program	7
1.1	Curriculum Overview MSc (PT) Program	8
2.0	Roles and Responsibilities	9
2.1	Director of Clinical Education (DCE)	9
2.2	Centre Coordinator of Clinical Education (CCCE)	9
2.3	Expanded Role – Centre Coordinator	9
2.4	Clinical Instructors (CI).....	9
2.5	Students.....	10
3.0	Clinical Practice - Academic	11
3.1	Clinical Practice Classes	11
3.2	Clinical Practice I - Pre-Placement Preparation	11
4.0	Clinical Practice - Placement.....	12
4.1	Placement Requirements	12
4.2	Placement Opportunities	13
4.3	Placement Hours	14
4.4	Catchment Areas	15
4.5	Northern Studies Stream (NSS)	15
4.6	Placement Expenses	17
4.7	Clinical Practice Overview	17
4.8	Students Independent Work in Clinical Settings	19
4.9	Research/Scholarly Activities as Part of a Clinical Placement: Dual Degree Unique Placement Opportunity.....	20
5.0	Clinical Processes	23
5.1	In Catchment Placement Process	23
5.2	Out of Catchment (OOC) Placement Process	26
5.3	Role Emerging Process	27
5.4	Student Responsibility Following a Match	28
5.5	International Placement Process	30
5.6	Communication Processes and Clinical Placement Strategies	32
6.0	Models of Supervision.....	35
6.1	Individual Model 1:1.....	35
6.2	Cooperative/Collaborative Model 2:1	35
6.3	Split Model 1:2 or More CIs	35
6.4	Shared Supervision Model 1 CI: 2 or More Students	35
6.5	Offsite Supervision	35
6.6	Split Placement Sites	36
7.0	Evaluation of Placements	37
7.1	Evaluation of Placements	37
7.2	Canadian Physiotherapy Assessment of Clinical Performance 2.0 (ACP 2.0)	37
7.3	Learning Contracts.....	38
7.4	Cardiorespiratory and Neurological Hours and Competency Tracking	41
7.5	Evaluation of Clinical Placement	42
7.6	Placement Evaluation of Document Deadlines	42
7.7	Assessment Process.....	43

7.8	Clinical Practice Expectations	45
8.0	Policies and Procedures	46
8.1	Clinical Practice Attendance Policy	46
8.2	Dress Code Policy	49
8.3	Conflict of Interest Policy	50
8.4	Confidentiality	50
8.5	Harassment and Discrimination	50
8.6	Student Accommodations for Clinical Placement	50
8.7	CPR Certification Requirements	51
8.8	Equity, Diversity and Inclusion	51
8.9	Guidelines for Social Media	51
8.10	General Safety Considerations	52
9.0	General Information	53
9.1	What to Bring on Placement	53
9.2	Workplace Safety and Insurance Board (WSIB).....	53
9.3	Establishment of Placement Guidelines	56
9.4	Unplanned Interruptions of Placement.....	57
10.0	Protocol for Completion of Final Placement	58
11.0	Useful Website Links.....	59
12.0	Appendices.....	61

Abbreviations

The following is a list of abbreviations used in the Clinical Education Handbook:

Academic Coordinator of Clinical Education	ACCE
Avenue To Learn	A2L
Canadian Physiotherapy Assessment of Clinical Performance 2.0	ACP 2.0
Canadian Physiotherapy Association	CPA
Cardiorespiratory	CR
Centre Coordinator of Clinical Education	CCCE
Clinical Instructor	CI
College of Physiotherapists of Ontario	CPO
Director of Clinical Education (Physiotherapy)	DCE(PT)
Institute for Applied Health Sciences	IAHS
Intensive Care Unit	ICU
Master of Science (Physiotherapy) Program	MSc (PT) Program
Musculoskeletal	MSK
National Association for Clinical Education in Physiotherapy	NACEP
Neurological	NR
Program Academic Study Committee	PASC

This handbook is designed for Master of Science (Physiotherapy) (MSc (PT)) Program students, administrative staff, and faculty members. It outlines general information and contains resource materials related to the student's professional (clinical) preparation for practice as an autonomous, self-regulated health professional. This handbook is created as a supporting document to the MSc (PT) Program Handbook and readers will be referred to the Program Handbook to avoid duplication of information. All material is subject to change. Any changes will be communicated via Avenue to Learn (A2L).

A new handbook will be available at the beginning of each academic year (Approximately July). Each student is responsible for reviewing the handbook and is expected to abide by the policies and procedures found within this handbook.

The McMaster MSc (PT) Clinical Education Team is comprised of the Director for Clinical Education and the Clinical Education Assistant. Correspondence should be addressed to the following:

Director of Clinical Education (Physiotherapy) (DCE):

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The MSc (PT) Program supports The Canadian Physiotherapy Association's (CPA) Position Statement on the clinical education of physiotherapy students. See [Section 11.0](#) for a link to the full document.

Clinical education is a critical component of physiotherapy education programs and is essential to the future provision of quality physiotherapy health care to Canadians. Physiotherapists perform a vital role in clinical education by sharing their professional and clinical expertise and knowledge with physiotherapy students. (Position Statement, Clinical Education of Physiotherapy Students, CPA, 2012. Approved November 2008)

1.0 MSc (Physiotherapy) Program

Overview - Please refer to the MSc (PT) Program Handbook for:

- The MSc (PT) Program's Mission, Values, Student Attributes and Program Outcomes
- The MSc (PT) Program's Educational Philosophy
- An overview of the Physiotherapy Profession
- An overview of the MSc (PT) Program's Curriculum
- Program and Non-Academic Requirements
- Accommodations
- Professional Behaviour Code of Conduct for Graduate Learners – Faculty of Health Sciences
- McMaster University, Faculty of Health Science, School of Rehabilitation Science, and PT Program Policies, Procedures and Guidelines (e.g. Academic Integrity, etc.), and Terms of References for Committees including the Program Academic Study Committee (PASC)

1.1 Curriculum Overview MSc (PT) Program

Program Sessional Calendar

CLASS OF 2025 SESSIONAL DATES - MSc PHYSIOTHERAPY

SUBJECT TO CHANGE

YEAR 1												
AUG	SEPT 2023	OCT 2023	NOV 2023	DEC 2023	JAN 2024	FEB 2024	MAR 2024	APR 2024	MAY 2024	JUN 2024	JUL 2024	AUG 2024
O-WEEK	UNIT I ACADEMICS PHYSIOTH 741, 751, 761, 771 September 5 - December 12 (14 weeks) Exam Week: December 13 - 20 PASC: December 21			BREAK Dec 22 - Jan 2	CLINICAL PRACTICE I & BREAK PHYSIOTH 781 ----- Jan 8 - Feb 21* (6 weeks) PASC: Feb 23		UNIT II ACADEMICS PHYSIOTH 742, 752, 762, 772 ----- Feb 26 - May 24 (13 weeks) Exam Week: May 27 – June 3 PASC: June 5			CLINICAL PRACTICE II & BREAK PHYSIOTH 782 June 10 – Aug 2 (7 weeks) PASC: August 7		UNIT III ACADEMICS Aug 12 - Oct 17 (10 weeks)
YEAR 2												
SEPT 2024	OCT 2024	NOV 2024	DEC 2024	JAN 2025	FEB 2025	MAR 2025	APR 2025	MAY 2025	JUN 2025	JUL 2025	AUG 2025	NOV 2025
UNIT III ACADEMICS CONT'D PHYSIOTH 743, 753, 763, 773 ----- Aug 12 - Oct 17 (10 weeks) Exam Week: Oct 21 - Oct 25 PASC: Oct 28		CLINICAL PRACTICE III PHYSIOTH 783 ----- Oct 30 - Dec 17* (7 weeks) PASC: Dec 20	BREAK Dec 23 - Jan 3	UNIT IV ACADEMICS PHYSIOTH 744, 754, 764, 774A ----- January 6 - March 28 (12 weeks) Exam Week: Mar 31 - Apr 7 PASC: April 8			CLINICAL PRACTICE IV & BREAK PHYSIOTH 784 ----- April 10 - June 11* (8 weeks) PASC: June 13		UNIT V ACADEMICS PHYSIOTH 745, 755, 765, 774B & Elective (701, 702, 703) ----- June 16 - August 22 (10 weeks) Exam Week: August 25-29 PASC: September 3		CONVOCATION**	

* Individual clinical practice dates vary, depending on clinical facility availability

** Official Convocation date to be confirmed by the Office of the Registrar, in early 2025

Definitions:

PASC = Program Academic Study Committee. Please refer to the PT Program Handbook for more information regarding academic review processes, and the PASC Terms of Reference.

PT Class of 2025 Sessional Dates; Approved by PTCC January 18, 2023; Approved by PTEC January 30, 2023

2.0 Roles and Responsibilities

2.1 Director of Clinical Education (DCE)

The DCE is a McMaster University Faculty member who is responsible for the development of and coordination of all activities related to the Clinical Education component of the program. The DCE will liaise with the clinical facilities to ensure that the educational philosophy and goals are mutually acceptable.

Responsibilities:

- Identify and develop clinical placements;
- Develop clinical education policies and procedures and present changes to the sites with which an affiliation agreement exists;
- Orient clinical instructors (CI) and centre coordinators to goals and objectives for each clinical placement;
- Respond to concerns of a student or CI;
- Review written evaluation forms and recommend final grades for clinical education courses to the MSc (PT) PASC;
- Review feedback from each clinical placement to assess needs and evaluate policy or curriculum;
- Organize clinical education workshops and online information sessions for CIs and centre coordinators;
- Liaise with government and professional bodies; and
- Develop clinical objectives, evaluation forms, policies/procedures, guidelines, and letters of agreement.

2.2 Centre Coordinator of Clinical Education (CCCE)

An individual who is appointed to act as a liaison between the physiotherapy program and a facility to ensure educational philosophy and goals are mutually acceptable. NOTE: not all facilities have a dedicated CCCE

Responsibilities:

- Identify the number of clinical placements within the facility where competency in specific objectives can be demonstrated and evaluated;
- Identify therapists who would be appropriate as CIs in a specific placement;
- Orient the student to policies and procedures and learning resources specific to the facility;
- Ensure that the CI has a copy of all necessary forms and that evaluation forms are returned to the DCE after completion;
- Liaise with the DCE concerning any problems with a student and or CI; and
- Attend meetings at the University and send relevant material back to the facility.

2.3 Expanded Role – Centre Coordinator

Some facilities may have individuals, with expertise in clinical education, who wish to take on added responsibilities and an expanded role.

Responsibilities:

- Respond to problems of the students or CIs and facilitate a mutually acceptable solution;
- Facilitate development of Clinical Instructors role, e.g. reference material or in-service education; and
- Assistance and/or participate in evaluation process.

2.4 Clinical Instructors (CI)

Responsibilities:

- Orient the student to their environment and the roles and responsibilities that physiotherapists assume within the environment;
- At the beginning of placement, the CI is to meet with the student to develop and review a learning plan, as well as to discuss any other relevant information for how the placement will proceed;

- Demonstrate specific administrative, professional, and clinical skills negotiated with the student;
- Assume responsibility for the actions of the student while on placement. A student is practicing under the license of the CI while on placement;
- Make arrangements for the student to be supervised and supported by another licensed practitioner who accepts responsibility for the student, in the event that a CI is unreachable;
- Provide informal feedback to students on a regular basis during clinical placement.
- Provide formal feedback/evaluation to the student in writing and online during midterm and final evaluations;
- Provide ongoing feedback to the student and the DCE on the student's attainment of clinical objectives as negotiated;
- In the event that a student is experiencing difficulty in a clinical setting, contact the DCE as soon as possible;
- Abide by McMaster University policies, procedure and guidelines; and
- Abide by the McMaster University Conflict of Interest Guidelines (see [Section 11.0](#) for a link to the document).

Please see [Appendix 19](#) for a checklist that can be used by CIs to guide general placement responsibilities. There may be responsibilities outlined above that are not captured in this checklist.

2.5 Students

Responsibilities:

- Have a working knowledge of McMaster University, Faculty of Health Science and PT Program policies, procedures, and guidelines in general, and as related to clinical education;
- Have a working knowledge of the College of Physiotherapists of Ontario (CPO) standards (or standards of any regulatory body where a student is completing a placement – i.e. international, out of province);
- Assume responsibility for practicing under the license of the CI while on placement;
- Possess a working knowledge of unit objectives and utilize the information to maximize clinical learning and to develop a Learning Contract for each clinical education course;
- Identify own areas of strength and areas for improvement to the CI to enhance quality of patient care;
- Provide written/online evaluation of the CI and facility at midterm and final evaluation;
- Abide by the facility's policies and procedures;
- Abide by the PT Program guidelines related to clinical education, and PT program policies, procedures, and guidelines;
- Abide by the School of Graduate Studies, Faculty of Health Science and McMaster University policies, procedures and guidelines;
- Abide by the College of Physiotherapists of Ontario and the Canadian Physiotherapy Association codes of ethics;
- Communicate any concerns regarding the placements (e.g., related to performance, concerns with the clinical instructor, concerns with the clinical site) **immediately** to the DCE;
- Communicate any concerns regarding the placements (e.g., related to performance, concerns with the clinical site) **immediately** to the CI and the DCE;
- Complete an online self-evaluation using the forms provided at both midterm and final evaluation;
- Ensure all paperwork is returned to the School **within one week of completion (with the exception of the Learning Contract due within 24 hours of completion)** of each placement;
- Ensure that all non-academic requirements remain up-to-date throughout the entire duration of the Program; and
- Ensure possession of a vulnerable sector check that is valid for the entire duration of the clinical placement PRIOR to placement start.

3.0 Clinical Practice - Academic

3.1 Clinical Practice Classes

Clinical practice classes are arranged in each academic Unit across the program, and they cover core content and essential competencies. Students are expected to be present at all sessions. In most instances these classes will be offered during the Physiotherapy Practice (PT Prac) Course time during the unit.

In Units 1-4 Clinical Practice is a separate course, Clinical Practice Course, - and consists of both classes in the academic term and a clinical placement. Objectives of Clinical Practice Courses academic content for each Unit will be published in the individual Unit handbooks. Students will typically participate in a minimum of 2 sessions (either online or in person) and complete an assignment during the academic term. See [Section 7](#) for grading criteria of academic sessions.

3.2 Clinical Practice I - Pre-Placement Preparation

Prior to starting Clinical Practice I, all students will be expected to participate in pre-placement preparations in the academic setting.

More information about the dates, times, and professional expectations for Clinical Practice I will be posted on A2L and identified in the Unit handbook during the Unit 1 academic session. Pre- Placement Preparation will typically occur in the Clinical Practice Classes organized throughout the academic unit

4.1 Placement Requirements

Clinical practice placements are organized in a variety of locations including teaching hospitals, community hospitals, health care agencies, specialized centres, private clinics, and other community facilities. During placements, students practice under the supervision of CIs, who are physiotherapists and/or other professionals employed by the facility.

To be eligible for graduation from the MSc (PT) Program, all students must complete the following:

1. Each student must acquire a broad clinical experience including a minimum of 100 hours each in areas of clinical practice with patients/populations who have the following types of conditions:
 - Cardiovascular / Pulmonary
 - Neurological
 - Musculoskeletal
2. Practice Settings
Each student must acquire clinical experience in each of the following settings:
 - Acute / Hospital Care
 - Rehabilitation or Community Care
 - Ambulatory Care or Private Practice Application

Setting Definitions:

Acute / Hospital Care: physiotherapy care, as part of an interprofessional team, provided for patients during an acute illness, an acute exacerbation or a surgical intervention which necessitates admission to an acute care facility.

Rehabilitation or Community Care: physiotherapy care, as part of an interprofessional team, provided for a patient to maximize functional independence. Typically following the diagnosis of a new condition, an injury leading to a disability, an acute illness or surgical intervention and/or the progression of a chronic condition. Rehabilitation or community care could be provided within a rehabilitation hospital/unit, clinic, homecare, schools, etc.

Ambulatory Care or Private Practice: physiotherapy care, as a sole physiotherapy service or as part of an interprofessional team, for a patient who lives in the community and attends physiotherapy as an out-patient. This care could be provided at private or public physiotherapy clinics, work sites, etc.

3. A minimum of 1025 hours in clinical practice placements.
 - A minimum of 820 hours must be in settings that provide direct, clinical patient care.
 - Students may complete one placement (or components of more than one placement) in a setting that does not involve direct clinical care for patients (examples: Physiotherapy Association, Lung Association, Sports Science Council, Research Lab) if the student has (or will have, by graduation) successfully completed the required mix of clinical experience (i.e., hours, areas of practice and practice settings).
4. The majority of clinical practice hours are supervised and evaluated by a qualified physiotherapist.
 - While the majority of clinical education hours are supervised by qualified physiotherapists, students may at times be supervised by other qualified professionals (subject to provincial /

territorial regulatory requirements). These clinical education opportunities may allow students to gain experience in more non-traditional and/or role-emerging settings.

Collectively the placements must also provide students with experience working with individuals who are:

- Living with complex or multi-system conditions; and
- Of various ages (across the lifespan).

Notes:

- 1) *Due to the integrated nature of each academic unit, students should expect to participate in a placement in any setting during each placement time block; and*
- 2) *Clinical practice requirements are based on national guidelines for clinical education for physiotherapy students*
- 3) *For the purposes of allocating setting assignments across the program, the Clinical Education Team will use the terms Acute (Acute/Hospital Care), Rehab (Rehabilitation or Community Care) and Community (Ambulatory Care or Private Practice)*

Throughout all placements students can, and should be, involved in multiple activities that will enhance their learning and provide valuable contributions to the setting and clinicians with whom they are placed.

Such activities may include:

- Contributions to client/patient education boards in the facility;
- Preparation of educational materials to augment treatment and client recommendations;
- Preparation of summaries and critical appraisals of evidence and literature related to practice area topics;
- Completion of individual learning objectives related to administration activities e.g. Billing practices, entrepreneurship, that could be pursued with individuals other than the CI;
- Marketing of innovations through development or revision of brochures
- Research; and
- Development of contact and resource lists relevant to client populations.

CIs and clinical sites are encouraged to develop a cache of research questions and project outlines for students that can be completed as part of their clinical practice expectations.

To contribute back to the facility in which they are placed, **students are expected** to complete at least one project (see examples from above) for each clinical placement. It is the expectation of the MSc (PT) Program that work on the project activities takes place outside of the student's clinical hours, unless otherwise negotiated with the DCE/CI. If the student will be completing their placement at multiple sites, they are able to select one site where this project will be completed unless previously arranged by the DCE and the clinical sites at the time of securing the placement offer. Project work completed for the clinical placement courses cannot be used for assignments in other courses. Students may be required to complete additional unplanned project work (e.g. due to unforeseen circumstances that may limit a student's ability to engage in direct placement activities). In cases where the unplanned project work exceeds 37.5 hours, students must submit their work to the Program. Any project work is evaluated by the Supervising Clinical Instructor. The Program will only collect this work so that it is maintained within the student clinical education file.

4.2 Placement Opportunities

All students are required to participate in all clinical practice placements during their course of study in approved settings under the supervision of qualified professional staff. The DCE is responsible for the arrangement of all placements. The DCE makes the final decision on placement assignments, considering the choices and needs of the students and the requirements of the facilities. Students are not permitted to approach facilities to negotiate

their own placements. Should a student wish to recommend a clinical facility, a clinical facility recommendation form is provided on the Clinical Education website (see [Section 11.0](#) for link to the website).

Placement Notes:

- Although every effort will be made to place students in their preferred area, the Physiotherapy Program reserves the right to assign students to a placement that meet the needs of fulfilling a student's clinical practice requirements as well as considering the unique clinical practice needs of student cohort;
- Placements are limited and subject to availability;
- Satisfactory completion of all clinical practice courses is required for graduation;
- Once students are matched to a clinical practice placement, they are expected to declare any known conflict of interests immediately by contacting the DCE(PT) (see [Section 11.0](#) for a link to the Conflict of Interest Policy);
- A student may decline a placement; however, due to limited availability of placements such action may lengthen the student's time in the program, delay graduation, and be associated with additional tuition and supplemental fees;
- Students may **not** make any personal arrangements with individual facilities, CIs, or any other Academic Coordinators of Clinical Education (ACCE) or DCEs without prior written permission from the DCE (PT) from McMaster;
- Students are **not** permitted to alter the dates of their clinical experience without permission from the DCE;
- Students are not eligible to complete a clinical placement at a facility where they have previously completed a placement or volunteered or worked (see [Section 11.0](#) for a link to the Conflict of Interest Policy). Special considerations for exceptional circumstances will be presented to PASC for discussion and decision;
- Students who are currently employed by a clinical facility may be ineligible to attend clinical placement at sites considered to be direct competitors. This is since the student may be privy to confidential and strategic company information and business practices. In this instance, it is the student's responsibility to disclose a potential conflict PRIOR to the placement match occurring; and
- The MSc (PT) Program reserves the right to reassign placements as necessary.

4.3 Placement Hours

Students are required to complete all 4 placements and obtain a minimum of 1025 hours of clinical practice to meet the MSc (PT) Program's graduation requirements. Students may need to be absent on clinical placement due to extenuating circumstances across the program. Where possible, make up time for any absence will be done in the current placement based on placement timing, and site availability; however when not possible any outstanding time will be added to the final placement (see [Section 8.1](#) for attendance policy).

Students can expect to spend an average of 37.5 hours on placement per week; however, it is an expectation that students attend placement during the hours the CI has outlined for the student, which may be more than the 37.5 hours average. Students should also be aware that while the Clinical Education team will do their best to provide students with an idea of the placement schedule at the time of the placement match; days and hours of placement may vary and may not be available at the time of the match. Students will be required to complete a clinical placement schedule survey during their first week of placement. Completion of this survey is **mandatory**

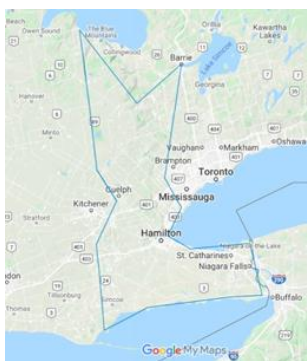
The purpose of the survey is for the Clinical Education team to confirm placement schedule, and this information is required for workplace insurance purposes. During clinical practice placements, students may be required to attend evening and weekend hours. Whenever possible, students will know in advance if evening and/or weekend hours are required. If there are significant changes to placement schedules that occur during a placement and have not been identified in the schedule survey, students are required to connect with the Clinical Education team via email to advise as soon as this information is known. 'Extra' hours accumulated during one placement cannot be carried forward to reduce time required for subsequent placements.

It is the student's responsibility to meet the requirements for clinical practice hours to meet the degree requirements of the MSc (PT) program. For example, it is the student's responsibility to inform the DCE (PT) and the Clinical Education Administrative Assistant if placement hours are not accumulating to a minimum of 37.5 hours per week.

4.4 Catchment Areas

In Canada, geographical regions are divided into "catchment areas". Each University is responsible for soliciting clinical placements in their designated catchment area. There are five Universities that offer Physiotherapy programs in the province of Ontario. In addition, the Northern Ontario School of Medicine (NOSM) University supports physiotherapy student placements in Northern Ontario. Thus, there are six catchment areas in Ontario ([Appendix 1](#) outlines the catchments for the five Universities; [Sections 4.5](#) and [4.6](#) provide more detail on Northern Ontario placements).

4.4.1 McMaster Catchment



The current McMaster catchment area extends from Georgian Bay in the North to Niagara Falls in the South, and from Paris in the West to Milton in the East. Students will be expected to complete placements within all areas of the designated McMaster catchment.

Catchment areas in Ontario have been determined by the National Association for Clinical Education in Physiotherapy (NACEP) and are subject to change.

Priority is given to utilizing all existing placements in the McMaster catchment area. Efforts are made to take into consideration student preferences; however, students should be prepared to accept any assigned placement.

4.4.2 McMaster Clinical Partners

A list of clinical partners associated with the McMaster MSc (PT) program is posted on the School of Rehabilitation Science – Master of Science (Physiotherapy) – Clinical Education Web site (see [Section 11.0](#) for link to website). This list is not comprehensive but is provided as a resource for students to help familiarize themselves with placement opportunities.

Other Catchment Areas in Canada

Physiotherapy placements in Canada are organized through members of the National Association for Clinical Education in Physiotherapy (NACEP). NACEP is made up of the ACEs and/or the DCEs from each University program and the provincial or regional coordinators of clinical education. Each NACEP member is responsible for a geographical catchment area.

NACEP members have a national policy on how they receive and request out of catchment, national, and International Placement requests. Students are permitted to make requests to complete an out of catchment placement to the DCE/ clinical education team at McMaster who will facilitate requests to other catchment areas in Ontario and Canada. Out of catchment (OOC) placements can occur in Clinical Practice II – IV. Refer to [Section 5.2](#) (Out of Catchment Placement Process), for details on the application process.

4.5 Northern Studies Stream (NSS)

A list of clinical partners associated with the Northern Studies Stream (Northern Ontario) is posted on the School of Rehabilitation Science – MSc(PT) – Clinical Education website (see [Section 11.0](#) for the link to the website).

This list is not comprehensive but is provided as a resource for students to help familiarize themselves with placement opportunities. Approximately 30 students will participate in clinical placements in the NSS during the two years of the program. Prior to their assigned NSS placement, students will submit preferences of location and clinical practice area online to the NSS Clinical Coordinator. See link to the online application in [Section 11.0](#). Please refer to the MSc(PT) Program Handbook for an overview of the NSS.

NOSM - Indigenous and Francophone Pathways

This pathway is for learners who self-identify as Indigenous or Francophone, and /or who have significant previous experience working with one or both groups in a healthcare setting.

Students in this NOSM Pathway will be able to complete a minimum of two of their clinical placements in Northern Ontario through NOSM University, which is committed to including and being responsive to the needs of Indigenous and Francophone individuals and communities. Part of this responsiveness includes encouraging Indigenous and Francophone students to complete their training in Northern Ontario. Where possible, placements will be organized to provide students with experiences in Indigenous or Francophone communities. There is a specific application process for these pathways. Information on the application to the pathways is posted on A2L for student's reference.

Submitting Placement Preferences for NSS

In Unit 1, a mandatory NSS information session is offered through McMaster University. All students are expected to attend (the session may be delivered online or in person – information will be shared at the beginning of Unit 1). Following this session, **ALL** students will complete a preference form indicating their level of interest and a letter of intent (NOSM Letter of Interest) if applicable. Students will select their top choices of Units in which they would like to participate in the Northern Studies Stream. A student's letter of intent is weighted against a rubric that has been provided to programs by the Northern Ontario School of Medicine. Students will be assigned to a Unit based on their preferences. Based on the number of placements allocated and preferences, random assignments to Units may be required. Interested students who do not receive a placement assignment will be placed in order on a waiting list. Preceding their assigned Unit, students will submit preferences of location and clinical practice area to the NSS Clinical Coordinator.

Once students have been assigned an NSS placement, it is their responsibility to fulfill this agreement. The only reason that is considered for withdrawal from an NSS placement is for medical concerns (documentation must be provided) or extenuating circumstances. Any considerations for withdrawal are to be communicated to the Program Manager. Students may be directed to student accessibility services for consideration of withdrawal requests. If required, please speak to the DCE for direction and guidance on NSS placement withdrawal after an assignment has been made.

Notes:

- In general, and based on placement availability, students are permitted to complete one funded placement in the NSS over the course of the program, unless participating in the Indigenous / Francophone NOSM pathway
- There may be circumstances or pathways where students are permitted to complete more than one funded placement in the NSS. The DCE will provide information on when and how these opportunities can be secured.
- Occasionally, additional funded and/or unfunded placement opportunities may arise, and students will be informed of the application process as these opportunities become available.

Inquiries related to the NSS should be addressed to:

Bethany Beaudoin and Jennifer de Bakker

Northern Ontario School of Medicine (NOSM), Clinical Placements

955 Oliver Road; Thunder Bay, ON P7B 5E1

Email: hsplacements@nosm.ca

Table 1.0 – Communities in Northern Ontario

Atikokan	Huntsville	Nipigon
Bracebridge	Iroquois Falls	Parry Sound
Blind River	Kapuskasing	Red Lake
Chapleau	Kirkland Lake	Sault Ste. Marie
Dryden	Little Current	Sioux Lookout
Elliott Lake	Manitouwadge	Smooth Rock Falls
Emo	Marathon	South Porcupine
Espanola	Matheson	Sudbury
Fort Francis	Mattawa	Terrace Bay
Geraldton	Mindemoya	Thunder Bay
Hearst	New Liskeard	Timmins
Kenora	North Bay	Wawa

4.6 Placement Expenses

Students may be required to complete some of their placements outside of their area of preference/place of residence. Students are responsible for their own transportation and associated costs to complete clinical practice requirements. The MSc(PT) Program does not provide funds to assist the student to cover related costs. Costs that may be incurred include, but are not limited to, relocation, accommodations (in addition to rent for Hamilton-area residence), commuting, parking, additional medical coverage costs, and/or food. Students may also need to obtain access to a vehicle to participate in Clinical Placement activities.

4.6.1 Northern Studies Stream

For NSS assigned placements some funding is available. Travel to and from cities where clinical placements are offered, and accommodations may be arranged and covered to a maximum cost paid for by the NSS, through funding made available by the Ontario Ministry of Health and Long-Term Care.

4.6.2 Out of Catchment (OOC) and International Placement Expenses

All costs incurred for OOC and International Placements are the responsibility of the student. Costs may include, but are not limited to, application fees (see [Section 5.2](#) on OOC Applications), travel, relocation, accommodations (in addition to rent for Hamilton residence), vaccinations, insurance, food, etc. The PT Program does not provide funds to assist the student to cover related costs.

4.7 Clinical Practice Overview

Students in the MSc(PT) Program are graduate level students and are expected to be available for academic activities during the full 24 months of the Program, as per School of Graduate Studies Graduate Calendar. Students are expected to be available for the time periods identified for clinical practice placements on the sessional date document, even though they may not be scheduled for classes or clinical placements for the full duration. Until the placement match is made, and the placement is confirmed, the DCE is not able to guarantee specific placement dates for any student as it is typical for a placement time period to be longer than the total number of weeks expected on clinical placement. Please note that even when a placement is confirmed, placements can be cancelled at the discretion of the clinical site or the DCE on short notice. Consequently, students are not to make any arrangements for the clinical placement time periods. If timing conflicts occur, it will be the responsibility of the student to resolve the conflict with the non-clinical practice related event.

Academic Unit	Clinical Practice Course Code	Placement Length*
Essentials of Physiotherapy Practice I	PT *781	6 weeks
Optimizing Physical Function and Mobility Across the Lifespan: Multi-system Dysfunction	PT *782	7 weeks
Optimizing Physical Function and Mobility Across the Lifespan: Multi-system Dysfunction and Emerging Roles	PT *783	7 weeks
Transition to Independent Practice	PT *784	8 weeks

Course descriptions can be found in the SGS Calendar:

(https://academiccalendars.romcmaster.ca/search_advanced.php?cur_cat_oid=48&search_database=Search&search_db=Search&cpage=1&ecpage=1&ppage=1&spage=1&tpage=1&location=33&filter%5Bkeyword%5D=Physioth&filter%5Bexact_match%5D=1)

4.7.1 Clinical Practice I - Placement

Clinical Practice I includes a placement that is six weeks in length. Students who are not participating in the NSS will be placed within the McMaster catchment area. Students are **not** eligible to apply to an OOC placement for CP I. Placements will take place at a variety of clinical facilities and settings. Refer to [Section 4.2](#) for additional details re: where students are *not* eligible to complete a clinical placement.

If offered in CP I, students may participate in 'role emerging' placements (see [Section 5.3](#) for more information on the Role Emerging placement process). If a student has intentions of completing an International Placement during Clinical Practice IV, they may not be eligible for a role emerging placement – please speak with the DCE directly about this.

Mandatory in-class clinical practice sessions outlining the policies and procedures that apply to clinical practice and discussion of clinical practice evaluation expectations will be scheduled prior to the start of the placement.

Student's responsibilities for placement are outlined in the Clinical Practice I - IV Checklist ([Appendix 3](#)). Students can check the status of current placement offerings on HSPnet prior to the preference submission deadline.

4.7.2 Clinical Practice II - Placement

Clinical Practice II includes a seven-week placement that will take place at a variety of clinical facilities and settings such as home care, acute care facilities and private practice. Students are **not** typically permitted to return to sites where they have previously completed a placement. If offered in CP II, students may participate in 'role emerging' placements (see [Section 5.3](#) for more information on Role Emerging placement process). If a student has intentions of completing an International Placement during Clinical Practice IV they may not be eligible for a role emerging placement – please speak with the DCE directly about this. Refer to [Section 4.2](#) for additional details re: where students are *not* eligible to complete a placement.

Students are eligible to apply for an OOC placement for Clinical Practice II. Instructions for how to apply for an OOC placement will be provided to students during the academic term and are outlined in [Section 5.2](#). Students who are successful in obtaining an OOC placement will be notified as soon as confirmation is received. Students who are not going OOC or participating in the NSS will be located within the McMaster catchment area. The Clinical Education

Team will update the class regularly through A2L to the status of placements. Mandatory Clinical Practice classes will be scheduled to discuss the details and expectations surrounding placement.

Students' responsibilities for placement are outlined in the Clinical Practice I - IV Checklist (Appendix 3). Students can check the status of current placement offerings on HSPnet prior to the preference submission deadline.

4.7.3 Clinical Practice III - Placement

Clinical Practice III includes a seven-week placement. Students are reminded of clinical practice requirements that must be met for graduation (see [Section 4.1](#)). Students are not typically permitted to return to sites where they have previously completed a placement. If offered in CP III, students may participate in 'role emerging' placements (see [Section 5.3](#) for more information on Role Emerging placement process). If a student has intentions of completing an International Placement, they may not be eligible for a role emerging placement– please speak with the DCE directly about this. Refer to [Section 4.2](#) for additional details re: where students are *not* eligible to complete a clinical placement.

Clinical Practice III placements may be completed OOC, in-catchment, or in the NSS. Role emerging opportunities may also be available to students. The Clinical Education Team will update the class regularly through e-mail and A2L, as to the status of placements.

Students' responsibilities for this placement are outlined in the Clinical Practice I - IV Checklist ([Appendix 3](#)). Students can check the status of current placement offerings on HSPnet prior to the preference submission deadline.

4.7.4 Clinical Practice IV - Placement

Clinical Practice IV includes an eight-week placement. A variety of clinical facilities and settings will be offered, including home care, rehabilitation centres, geriatric centres, paediatric treatment centres, and community and teaching hospitals. Students are not typically permitted to return to sites where they have previously completed a placement (refer to [Section 4.2](#) for additional details re: where students are *not* eligible to complete a placement).

Students are reminded of Clinical Practice requirements that must be met for graduation (see [Section 4.1](#)). In this unit students are encouraged to select placements where they assume a different role from previous placements and/or where they will treat patients and clients more complex/multisystem problems. If offered in CP IV, students may participate in 'role emerging' placements (see [Section 5.3](#) for more information on Role Emerging placement process). If a student has intentions of completing an International Placement during the Clinical Practice IV placement timeframe, they may not be eligible for a role emerging placement in earlier placements – please speak with the DCE directly about this.

Clinical Practice IV placements may be completed OOC, in-catchment, internationally, and with the NSS. Role emerging opportunities may also be available to students. The Clinical Education Team will update the class regularly through email and A2L as to the status of the placements.

The students' responsibilities for this placement are outlined in the Clinical Practice I - IV Checklist (Appendix 3). Students can check the status of current placement offerings on HSPnet prior to the preference submission deadline.

4.8 Students Independent Work in Clinical Settings

Under certain circumstances a student may be expected to work independently in non-clinical activities during a placement.

Examples of when independent work may occur are:

- When the CI works part-time or has non-work days;
- When the CI has a planned or unplanned absence; and
- When the CI is engaged in duties, which cannot include the student.

Examples of independent work in which students could engage include:

- Planning and preparation for the next days or weeks in placement;
 - Research about clients, diagnoses, assessment and treatment;
 - Client treatment plan development; and
 - Preparing/reviewing/synthesizing client information into reports.
- Practice of documentation skills;
- Shadowing other clinicians at other facilities;
 - Students/CIs must inform the DCE if the student will be travelling off site and /or working atypical hours. In instances where a site agreement is not already established with the potential site of travel, and the travel is an elective opportunity (i.e. not a mandatory component of the placement), the student and the CI must complete and submit a Field Trip form (the required Field Trip Approval Form can be found on A2L and in [Appendix 17](#) of this handbook) in advance of the scheduled travel.
- Observations of surgery or other procedures;
- Shadowing/collaborating with other health care providers in the same facility; and team treatment opportunities.
- Placement related project work as directed by the CI, this can include but is not limited to: development of patient education material, literature review, critical appraisal of assessment or intervention.
- Please also see [Section 4.1](#) for potential research/project activities that may be considered.

4.9 Research/Scholarly Activities as Part of a Clinical Placement: Dual Degree Unique Placement Opportunity

In recognition and appreciation that many students enrolled in the dual degree MSc(PT) Program/PhD Rehabilitation Sciences are developing their academic and clinical expertise to apply for and fill clinician scientist and/or academic positions, the MSc(PT) program supports dual degree students with unique placement opportunities.

Specifically, in either Clinical Practice (CP) III or Clinical Practice (CP) IV, dual degree learners can apply for a placement that integrates customized research/scholarly activities for up to 20% of the total allocated placement time. The following parameters must be met for the placement opportunity to:

1. The dual degree student must identify the specific research / scholarly activity that they will be involved in during the CPIII or CPIV placement period. Examples may include but are not limited to submission of an abstract for presentation at a scientific conference, attending a workshop, etc. The time cannot be used for data collection specific to their thesis or for dedicated time to write thesis chapters.
2. The dual degree student's PhD supervisor must agree to be the supervisor for the research activity (travel with student to conference / workshop is not required) and will be referred to herein as the Research Activity Clinical Instructor. Supervision as the Research Activity Clinical Instructor will entail:

- Submitting a letter of support confirming commitment to supervise the proposed research/scholarly activities of the placement, due at least 6 months in advance of the proposed placement start date;
 - Collaboratively establishing TWO learning objectives with the student during the first week of the placement period that are related to the proposed research activity. These learning objectives will be included on the student's Learning Contract for the specified placement period;
 - Assigning a grade for the two objectives on the learning contract at the mid-unit and final time points of the placement.
3. The dual degree student must have successfully completed CP I and CP II with no concerns (clinical, professional, or otherwise) identified on the ACP 2.0 or Learning Contracts.
 4. The dual degree student must submit a request via email for a unique placement to the DCE (PT), Assistant Dean (RS) and Assistant Dean (PT) a minimum of 6 months in advance of a clinical placement start date, that will include the following:
 - Description of the research activity with any supporting evidence (no more than 250 words) (e.g. proof of submission for presentation at a conference);
 - Letter of approval from PhD supervisor (see above);
 - Travel package (if applicable – see Parameter 5)
 5. If the research activity involves any travel, the student will also need to prepare and submit a travel package no less than 6 months in advance of the planned travel time that includes but is not limited to*:
 - a. Confirmation of acceptance to the conference/workshop or registration at the conference/workshop;
 - b. Name, location, and conference/workshop dates (if applicable) to confirm the conference activities fall during the sessional dates of CP III or CP IV clinical placements (note: travel to a conference/ workshop will not be approved during the academic terms);
 - c. Clearly outlined travel plans (including but not limited to date of departure, airline details as applicable, emergency contacts) that demonstrate the student will travel to and from the scholarly activities directly (i.e., no additional travel days added for personal reasons).
 - i. Note: Only the time at the scholarly activities will be counted towards the placement hours; the two travel days (one to get there and one to return) would not count towards placement hours.
 - d. The student may need to complete McMaster's RMM 801 or Field Trip Forms (as directed by the DCE(PT) based on the location of travel), and may be required to complete Full-Time Off Campus (FTOC) paperwork.

*NOTE: Additional documentation may be requested before the application is approved

6. The DCE will organize a meeting with the student to discuss the 'clinical' portion of the placement. The student will advise on preferences for a clinical site and geographical location within their assigned setting.
 - Note: There is no guarantee that a student will be matched to a 'clinical' site that aligns with their preferences. By electing for a placement with scholarly/research activities the student will be

withdrawing themselves from the opportunity to site select on HSPnet for the specified placement period.

7. The request will be reviewed and approved by the Assistant Dean (Rehabilitation Sciences), Assistant Dean (Physiotherapy) and Director of Clinical Education (DCE) (PT) and will be dependent on the student remaining in good academic standing and without professional behaviour concerns. In the case of any international travel, additional approvals will be required, and this will extend the required times for approval. The students' direct care placement hours and practice hours will also be considered in determining approval.

At all times, the priority to complete the minimum clinical education requirements for graduation from the MSc(PT) Program will take precedence over granting a dual degree learner the opportunity to engage in this type of placement. As such, the placement may be cancelled at any point if unforeseen circumstances arise (i.e., change in placement settings). Students are encouraged to purchase travel insurance for any arrangements made prior to the date of departure.

5.0 Clinical Processes

5.1 In Catchment Placement Process

For Clinical Practice Placements I - IV the process* for matching a student to a placement in catchment is as follows:

Step 1

- Placement request emails are sent to all clinical sites within the McMaster University catchment area by the Clinical Education Assistant.
- The Director of Clinical Education (DCE) follows up with the facilities, ensuring an appropriate number of offers are provided, and attempts to ensure there are enough offers in each setting to meet student needs.
- **Students may not make any personal arrangements with facilities, with CIs, or with any other Clinical Coordinators, without written permission from the DCE.**

Step 2

- As placements are confirmed, they will be added to the appropriate placement Unit in HSPnet. Students will be able to login and view placement offers prior to placement preferences being due (See Appendix 6)
- Each facility's offer description may include: placement dates, site name, clinical instructor, placement setting, treatment population, other special instructions/requirements (clinic hours, police check, special dates).

Step 3

- DCE will assign students to an area of practice (i.e., community (ambulatory care/Private Practice), acute, rehabilitation).
- Clinical Education Assistant will list the assigned settings on Avenue2Learn.
- Students are to select placements in their assigned area of practice* (Note: settings may change based on placement availability)

Step 4

- Eligible students will log in to HSPnet and select preferences within their assigned setting, in the Site Selector.
- It is the student's responsibility to ensure that their preferences are selected correctly and submitted before the Site Selector is closed.
- Students who do not submit site selections on time will be randomly assigned to a placement without consideration of preference.

Step 5

- HSPnet will be used to assign students to placements available. The process is as follows:
 - 1) HSPnet will run an algorithm to match as many students as possible to preferences.
 - 2) Students who select preferences from only their assigned area of practice are more likely to be matched first using the random matching process.
 - 3) Students who submit preferences outside of their assigned setting are more likely to be randomly matched second.
 - 4) If all of the student's preferences have been previously assigned to other students, the student will be randomly matched to a remaining site, which may not be within the initially assigned setting.*

Step 6

- The DCE will review the selections made by HSPnet and confirm that all students have a placement and all needs/requests received in a timely manner have been considered appropriately.
- The Clinical Education Assistant will finalize the selections in HSPnet, releasing the individual placement information to the students.

Step 7

- Students have the opportunity to switch placements. See Section 5.1.1 - Placement Switching Process
- All decisions regarding final student assignments and placement switching are made by the DCE.

Step 8

- Once all placements are finalized, sites are notified of their student assignment.
- Students are informed that they are able to begin contacting their site. Students are required to email the site contact indicated on the placement match results, no later than two weeks following the placement match.

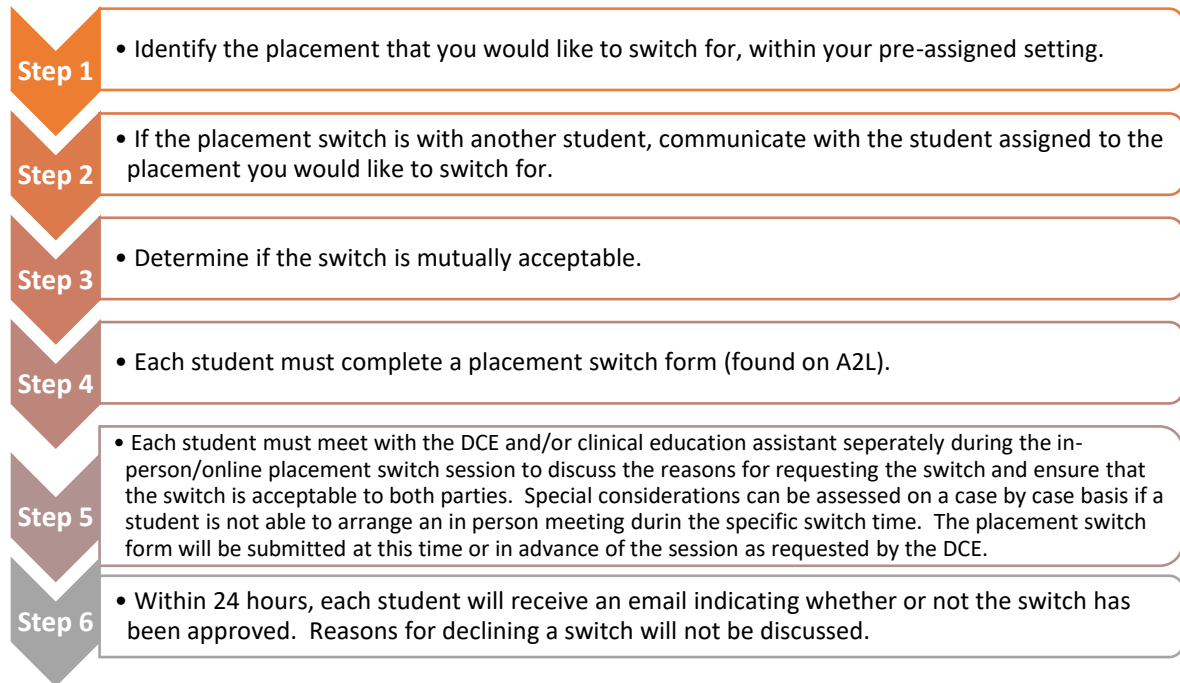
Important notes on placement processes:

- **Preference submission is a privilege, not a right.** Although students are given the opportunity to submit preferences, they are not guaranteed to receive any of them. Often, the chance of receiving a preference is dependent on what choices classmates make and the availability of placements;
- When considering what placement options to submit, students are welcome to investigate sites via their websites. Please do not contact the facilities directly. Doing so could jeopardize your assignment to a clinical site;
- The availability of OOC placements are dependent on the host University. In some instances, the student may be requested to decide re: waiting for a response from the host University vs. being matched in catchment; in the event that the host University is unable to provide a definite response within 3-4 weeks of the potential placement start date, the DCE may choose to withdraw an OOC request and place the student in catchment to ensure that the student has a placement;
- There is a possibility that some placements may be changed or cancelled because of unforeseen circumstances. These situations are beyond the control of the MSc (PT) Program and may result in the student being re-assigned to a new placement after placements have been confirmed;
- Occasionally, extreme/out-of-the-ordinary situations arise which will be individually assessed. These situations may include, but are not limited to, medical or extenuating personal circumstances. Please inform the DCE as soon as possible regarding these situations. The DCE will consult with the Assistant Dean in these situations as appropriate;
- If you require accommodations during clinical placement, these must be made through Student Accessibility Services (SAS) (see [Section 11.0](#) for the website link) at McMaster University. Please start the process of registering for formal accommodations early in the program to ensure your needs can be adequately addressed for your success. Refer to the PT Program Handbook for more information;
- On occasion, students are unsuccessful in placements. If a student is required to repeat a placement, the placement will have to satisfy the PASC requirements, and is subject to availability. All students are required to successfully complete the MSc (PT) Program requirements for Clinical Practice. The requirement of a remedial placement will result in the student registering for a remedial course within the PT Program (course code determined based on Unit of study). See the MSc (PT) Program Handbook for details about the remediation course and process;
- The program may, in appropriate circumstances, defer a student's clinical placement or remove a student from a clinical placement. These circumstances arise (but are not limited to) when a student fails to maintain timely and professional communication with the program, exhibits behaviours that place clients or others at risk, or fails to comply with other program (academic or non-academic) requirements (e.g., obtain and receive clearance for mandatory health screening, mask fit testing, etc.);
- Deficits in matters pertaining to work in clinical settings, research ethics or professionalism when interacting with human or other subjects may result in restrictions of the work in a clinical placement or research project. Unsatisfactory standing or serious deficits in matters pertaining to professional skills, which include but are not limited to patient safety, professionalism, ethical behavior and technical skills, as described in the Essential Competency Profile for Physiotherapists in Canada (<https://www.collegept.org/rules-and-resources/physiotherapy-essential-competencies>) may result in a decision to terminate the clinical placement or research project;

In most situations termination of the clinical placement or research project constitutes a failure and will result in the student receiving a grade of F in the Clinical Education course or the Research and Evidence-Based Physiotherapy Practice course, and may result in dismissal from the Program.

5.1.1 In-Catchment Placement Switching Process

Following the placement match, students are given the opportunity to propose a placement switch to the DCE. Placements may be switched with another classmate or with an unmatched placement (as available). A request to switch placements does not guarantee that the switch will be made. For switches between two students, both students must agree to the switch. The DCE is responsible for the final decision related to approving placement switches; reasons for declining a switch will not be provided to the students. All students must follow the switching process as follows:



5.2 Out of Catchment (OOC) Placement Process

Students who meet MSc (PT) Program requirements are permitted to apply for out of catchment (OOC) placements starting in Clinical Practice II and typically complete no more than one requested OOC placements while in the Program. (*Note: Participation in NSS or an International Placement does not count as an OOC placement*). There may be circumstances where more than one OOC placement within the program is considered. These requests will be assessed on an individual case by case basis and in consultation with the PT Program (i.e. Assistant Dean, DCE, Program Manager).

In extenuating circumstances, if enough placements cannot be secured in the McMaster catchment area, students may be assigned an OOC placement in communities within driving distance from the McMaster catchment (e.g., Waterloo, Mississauga). Every effort will be made to minimize this possibility; however, should a student be placed OOC without an OOC request being submitted, travel expenses will be the responsibility of the student. As for all other placement assignments, students may decline a placement, however, this action may result in delayed progression through the MSc (PT) Program, and the student will incur additional tuition and supplemental fees, and potentially a delayed graduation.

Students can apply to for an out of catchment placement multiple times if they are not successfully placed in the previous Units. *Note: Each Canadian Physiotherapy Program has different parameters about accepting out-of-catchment placement requests and these may vary each year. The Host University has the final decision re: accepting an OOC placement request.*

All costs incurred with OOC placements are the responsibility of the student.

5.2.1 Academic Requirements for an OOC Placement

Students must demonstrate a passing grade (70% or higher) in the mid-term exams of the Unit if they wish to complete an OOC placement. If a student does not pass a mid-term exam, their OOC request will be withdrawn for that Unit; and

- Students granted remediation in one Unit are not permitted to go OOC for the placement immediately following that Unit and/or the placement relevant to the Unit requiring remediation.

5.2.2 Additional Requirements for an OOC Placement

- There must be favourable consensus that the student demonstrates the requisite professional behaviours (e.g. independence, maturity) in both academic and clinical placements by the DCE and Assistant Dean for a student to apply for an OOC placement.

5.2.3 Applying for an OOC Placement

- Students wishing to complete a clinical placement outside of McMaster University catchment area (but within Canada) may submit an OOC Request Form (see [Appendix 8](#) & [Appendix 9](#)) and request three choices of city, type, and area of practice in one other University catchment area. All OOC applicants will be charged a \$50.00 OOC application fee, which will be debited from their McMaster student account. Please note, the application fee will not be charged to their student account if their name is not forwarded to the host University (i.e. in the instance that the host University has indicated they are not accepting applications). However, once a student's name is forwarded to a host University, payments will be added to the student account, regardless of if a placement is ultimately secured for the requested placement period;
- Students can only request an OOC placement to a single University at a time and may not request specific sites (except BC);
- In cases where an OOC request has been submitted to the host University and an application fee collected, if a student is unable to meet the expected academic and professionalism requirements, no refund will be processed for the application fee.

- Deadlines are set each year for all OOC requests across Canada. The Clinical Education Team will inform students of these deadlines. Incomplete forms will be returned to the student and must be completed within a timely manner to be considered. Late forms will not be accepted;
- OOC requests are forwarded to the appropriate host University for matches. The availability of OOC placements is outside the control of McMaster's DCE and may vary from unit to unit. Once the form has been submitted, changes can only be made in extenuating circumstances, in consultation with the DCE;
- If the host University is unable to provide a definitive answer 3-4 week in advance of the placement start date, the DCE reserves the right to withdraw the OOC request and to place the student in catchment to ensure that sufficient time for pre-placement preparation to occur (i.e. contacting the clinical site, obtaining clinical clearance);
- Students are required to accept an OOC placement if it meets any of the criteria listed on their request form or with the DCE's express permission, find another student willing to take their place; and
- The Clinical Education Team is responsible for keeping students apprised of OOC status as information becomes available.
- Students who do not submit their application fee within the specified deadline may forfeit their opportunity to apply for an out of catchment placement for the applicable placement period.

5.2.4 *Important Notes on OOC Placements*

- In some circumstances University programs may reconsider accepting OOC requests. As the DCE is made aware of any changes, information will be forwarded to students.
- Students are not permitted to approach potential Clinical Instructors, potential placement sites, or contact another DCE without the written permission of their DCE. Students who do so forfeit their opportunity to submit OOC requests.
- Due to the large number of requests received, some universities may cap the number of requests accepted per year. In the case that the number of McMaster requests exceeds the number of allowable requests to another catchment, a random draw of students who meet the eligibility criteria and who have applied for the OOC placement will determine the names forwarded. If a student has already completed one OOC placement in a given territory, and student interest exceeds the number of available spaces, priority will be given to students who have not yet completed an OOC placement.
- Students going to McGill, Laval, University of Montreal, or University of Ottawa catchment areas will have an increased chance of being placed if bilingual (please indicate on the application).
- Students going to British Columbia, Alberta, and Manitoba must join the Provincial College of Physiotherapists before the placement commences (please check the appropriate website for more information regarding this process and any associated fees).
 - Note: The University of British Columbia has restricted all OOC applications to their student led clinics only for all students.
- It is the student's responsibility to ensure they have met all specified requirements for their OOC placement prior to the commencement of that placement (e.g., an updated Vulnerable Sector Check, completed medical documentation).
- OOC placement availability varies from year to year; therefore, little information is available beforehand to students regarding OOC placement availability.

5.3 Role Emerging Process

The purpose of role emerging placements is to provide students with experiences in settings which: may include physiotherapists as part of their workforce in the future; focus on research, health policy or program development related to health care; and focus on health education/promotion that are not typically clinically oriented. In most instances, completion of a role emerging placement will satisfy the criteria for a community/ambulatory placement; however, the final placement setting will be assigned based on the location and nature of the role emerging placement.

Examples of role emerging placements include those in which the physiotherapist is working primarily as a consultant, educator, administrator and/or researcher. Areas of specialty may include population health, employee health, diabetes, HIV, oncology/palliative care, home care, arthritis. These placements may or may not include direct clinical practice.

Beginning in Clinical Practice I and based on placement offers, students may have the opportunity to complete a role emerging placement. Given that many role emerging placements do not include direct patient care, depending on status of tracked hours, the DCE will work with students to determine if they are well positioned to apply for a role emerging placement. Depending on the clinical placement settings previously completed, some students may only be considered to complete a role emerging placement in later placement periods (i.e. CP III and CP IV).

The following process will be used for applying to and matching students to role emerging placements:

1. Role emerging placements that are available for each Clinical Practice Course will be posted with the other in-catchment placement offers. A detailed description of the placement will be posted on A2L;
2. A role emerging application form will also be posted on A2L. Students who are interested in applying for a role emerging placement will be required to complete one role emerging application form for each of the placements that they are interested in applying for, and to submit to the A2L Drop Box on or before the date that their placement selections close in HSPnet;
3. Role emerging applications will be reviewed by the DCE for the following information:
 - a. Past experience that would contribute to a student's success in the placement;
 - b. The relevance of the student's stated learning goals to the placement objectives; and
 - c. Additional information as requested by the site.
4. Other considerations prior to assigning students to a role emerging placement will include:
 - a. Whether the student has completed a role emerging clinical placement in the past;
 - b. The progress the student is making towards achieving the required cardiorespiratory, neurological and musculoskeletal hours; and
 - c. The student's overall professionalism throughout the Program to date.
5. If more than one student applies for the role emerging placement, the DCE will review and consult with the supervising Cl/s to determine the most suitable candidate. If the application form is considered equal, then the random matching process will be used to assign a student to the placement. After this assignment occurs, the student's application will be reviewed to ensure that the student has articulated placement goals for this opportunity;
6. The Clinical Education team will inform students if they were successful in their application for a role emerging placement. If the student is not assigned to a role emerging placement, a non-role emerging placement will be assigned to the student based on their in-catchment preference submission;
7. If no candidates apply for the role emerging placement, a student may be assigned to the clinical placement without an application;
8. Students assigned to a role emerging placement may be expected to meet with the DCE prior to the start of the clinical placement; and
9. At the end of the clinical placement, the student may be required to complete an exit interview with the DCE and complete an online survey related to the role emerging clinical placement process.

5.4 Student Responsibility Following a Match

5.4.1 Introductory Letter, Documents and Initial Contact

Once a placement has been finalized (an announcement will be made on A2L), the student is **required** to submit an Introductory Letter to the facility **no later than one week** following the finalization of the placement. See [Appendix 8](#) for the Introductory Letter template that students are required to use. By signing this letter, students are attesting they have reviewed all modules and completed all checklists outlined in this communication.

Each student's Introductory Letter must include:

- Student's contact information (i.e. local address and phone number);
- Student's McMaster email address. Email correspondence with clinical instructors and clinical facilities should ONLY be made through the student's McMaster email address. Other email accounts (i.e. Gmail, Hotmail) are not permitted;
- Expiration dates of Program & Non-Academic Requirements (i.e. CPR/VSC expiry date);
- Emergency Contact Information (name, telephone number);
- Confirmation that the modules from the College of Physiotherapists of Ontario will be reviewed in advance of the placement; and
- Confirmation that the Infection Prevention and Control Checklist has been completed.

In addition to the student Introductory Letter, it is the student's responsibility to submit all pre-placement documentation and any additional required information to the clinical site (refer to [Appendix 14](#) Student Directed Document Requests to identify where the documents can be accessed). The student is responsible for determining details about the nature of their placement and to clarify any other relevant issues. *Note: If a site initiates contact with the student, the Introductory Letter, Student Placement Profile (SPP), and CV must still be sent for the site to have on file.*

This includes, but is not limited to:

1. Student Placement Profile ([Appendix 10](#))
2. Certificate of Clinical Clearance (CCC)
3. CV ([Appendix 9](#))
4. Confidentiality forms
5. Other site orientation material

In some instances, clinical sites require the completion of pre-placement training modules or the submission of additional paperwork PRIOR to placement starting. It is the student's responsibility to inquire about pre-placement requirements in the introductory letter sent to the site. See [Appendix 3](#) for a checklist of information to be sent to the clinical site in advance of starting placements in the Clinical Practice I-IV Courses.

Some sites may have health and safety requirements that vary from the MSc(PT) program. It is the student's responsibility to ensure they are aware of and adhere to any site-specific mandates in advance of the clinical placement start.

In all instances, notice needs to be provided to the appropriate parties (i.e. DCE, Health Screening Office) about the completion of additional paperwork **no later than two weeks prior to the start of placement.**

The student is responsible for ensuring the clinical site receives all student documentation in a timely manner. The Clinical Education Team does not have access to the student's VSC and/or medical documentation. Failure to submit the required documentation within the timelines stated by the clinical site may jeopardize a student's ability to start placement and could result in delayed graduation and additional tuition and supplemental fees.

Per the Faculty of Health Sciences [Police Records Check Policy](#), Vulnerable Sector Checks must be valid for the entire duration of each placement; therefore, a student may need to update their VSC more frequently than annually. Students must have a VSC that is valid for the entire duration of the clinical placement. Students ***will not be allowed to start a placement*** if their VSC on record does not cover the full duration of the placement. Some placement sites may require a more recent VSC (e.g every 6 months), therefore it is the student's responsibility to be aware of the sites requirements prior to placement. Failure to adhere to this policy may result in a disruption of clinical placement.

All students are responsible to ensure that a [McMaster University Safety Orientation Checklist](#) is completed by the end of the first week of every placement. You will submit this document at the end of placement.

There are some pre-established requirements for some of the larger clinical sites. As the Clinical Education Team becomes aware of these requirements, information will be posted on A2L. These are subject to change at any time. It is each student's responsibility to check the Clinical Facility Information on A2L to confirm requirements with the site to ensure all pre-placement requirements are completed prior to starting each placement.

5.4.2 Updating Contact Information

It is an expectation of the School of Graduate Studies (SGS) at McMaster that students inform the SGS within two weeks of any change in personal information, such as address, name, telephone number etc. Prior to a clinical placement, students should ensure MOSAIC has the correct personal contact information.

5.5 International Placement Process

Students may undertake a placement outside of Canada in their final placement (CP IV) only if they meet specified criteria. The DCE will arrange a session in the first year of the Program to discuss the procedure for International Placements.

There is a \$50.00 administrative fee due at the same time as the letter of intent and reference letters (the fee will be added to the students McMaster account). The fee is non-refundable, even if a student chooses not to and/or is no longer eligible to pursue an international placement later in the program.

The Physiotherapy Program supports the philosophy that an international learning experience:

- Enhances student's sensitivity to other cultures, awareness of global health issues and different health care systems.
- Prepares health care professionals to adapt their practice to their own culturally diverse communities.
- Supports and promotes the profession internationally (International, in the context of this document, is interpreted to encompass the developed and developing world).

These learning experiences should assist the student in developing a perspective of the profession as part of the international health community.

5.5.1 International Site/Personnel Requirements

The selected international site or personnel must be approved by the Programme Academic Study Committee (PASC) of the MSc (PT) Program based on recommendations provided by the DCE.

For approval, facilities must meet the following criteria:

- Not located in a country that has a travel advisory posted by the Government of Canada (<https://travel.gc.ca/travelling/advisories>) that indicate non-essential or all travel should be avoided. Countries that have a travel advisory that indicate to 'exercise a high degree of caution' will be evaluated on a case-by-case basis;
- Possess a Letter of Understanding (LOU) with McMaster University;
- Be accredited by the recognized professional organization in that country and/or by the World Confederation of Physical Therapy;
- Provide a copy of a provisional offer of a Clinical Placement for the student confirming the facility can meet the educational requirements of the learning experience. This will include the following:
 - a) Description of service (including name, address, telephone and fax numbers of the clinical facility, CI & director of facility); and

- b) Student program available.

The supervising physiotherapist (CI) must:

- Agree to structure of the placement to meet the student's learning objectives;
- Agree to use the evaluation process and criteria established by the MSc (PT) programme;
- Have at least one year's clinical experience;
- Be able to communicate effectively in English; and
- Submit a copy of an abridged resume outlining previous supervision and clinical experience and credentials to the MSc (PT) program (i.e. through the student or directly to DCE) showing graduation from a program recognized by the MSc (PT) Program.

5.5.2 Student Requirements and Responsibilities for an International Placement

McMaster University and the MSc(PT) Program have a set of requirements which students are required to fulfill; however, requirements from each host country and facility will vary. Therefore, it is the student's responsibility to identify the country/facility requirements and to address them accordingly (e.g. visa arrangements, medical coverage, etc.).

The student must:

- Be responsible for ensuring all documentation has been obtained prior to the placement and has been reviewed by the DCE;
- Maintain academic good standing in the MSc (PT) Program;
- Consistently demonstrate professional behaviours throughout the Program;
- Follow the RMM 801 Field Trips, Student Placements and Research Activity Planning and Approval Program Process; and
- Be responsible for all costs related to the experience, including, but not limited to:
 - Health requirements;
 - Visa arrangements;
 - Accommodation;
 - Travel;
 - Insurance coverage; and
 - Correspondence (telephone, fax, etc.).

*It is preferred for students to be able to communicate effectively in the language of the country selected for an International Placement.

The determination of the student's eligibility to pursue an International Placement is based on:

- Personal Letter of Intent;
- Reference Letters:
 - One academic and one clinical reference that attest to the student's ability to cope with an International Placement;
- Interview with the International Practicum Advisory Committee (IPAC);
- Any other requirements requested by the DCE;
- Successful completion, without remediation, of all academic Units and clinical placements preceding the International Placement; including maintaining good academic standing and demonstrating professional behaviours
- Proof of travel insurance that includes medical evacuation insurance:
 - This includes acknowledging an awareness that in the event of an emergency while travelling abroad that International SOS can provide assistance;
- Proof of completion of the assigned pre-departure training modules;

- Medical clearance confirming the student is in a state of satisfactory health and all immunizations for the country of destination are fulfilled;
- An itemized itinerary including the dates and locations of personal travel plans (must span the entire travel time); and
- Contact information related to travel and placement timeframe (i.e. cellphone/accommodation phone number etc.)

Any exceptions to the stated eligibility and requirements will be considered on individual basis, by the PASC.

On approval of the placement, the student confirms in writing to the site a commitment to the placement. A copy is forwarded to the DCE. At this time, all placement details including proper legal name of the facility, current mailing address, contact name and title, email address, phone and fax number, and placement dates need to be forwarded to the DCE and Physiotherapy Clinical Education Assistant. If a student requires a Certificate of Insurance (COI) or proof of attendance at a University, please advise the Physiotherapy Clinical Education Assistant in writing or via email three months prior to the commencement of the International Placement.

It is the student's responsibility to ensure all requirements, including, but not limited to, their Vulnerable Sector Check or Immunizations, are up-to-date and that the student has the proper documentation requested by the facility to support this.

A more detailed schedule of the International Placement process will be released to students in their first year of the program.

5.5.3 DCE Responsibilities for an International Placement

The DCE is responsible for:

- Presenting student requests to PASC for discussion;
- Facilitating a signed affiliation or written agreement with the facility upon request;
- Providing necessary documentation and resource material to the facility;
- Providing student with a letter validating their status as a student in the MSc PT Program.
- Corresponding with the facility at midterm to ascertain the student progress;
- Presenting final course evaluation to PASC;
- Sending a letter of appreciation to facility when placement is completed; and
- Facilitating RMM 801 requirements/process.

5.6 Communication Processes and Clinical Placement Strategies

Throughout the academic Units and during placements, the Clinical Education team will update the class regularly through posting announcements on A2L. Should an individual student wish to clarify an issue regarding placement, please communicate via email with the Clinical Education Team. If a meeting is required, email is the most expedient way to set up a mutually convenient time. In cases where members of the Clinical Education Team will be out of the office or unreachable, a designate will be appointed and communicated to students, for emergency situations. It is the student's responsibility to check McMaster email and Avenue to Learn regularly during placement to keep up to date. For these reasons, it is the student's responsibility to ensure that their McMaster email address is working at all times. Other email accounts (i.e. personal Gmail, Hotmail) will not be used.

If you have questions or concerns in relation to a placement, there are several formal and informal avenues available. Many individuals can provide insightful and valuable information:

1. Pre-Clinical Placement:
 - Clinical Education classes;

- Individual meeting with DCE;
- Email with DCE;
- Email with the Clinical Education Assistant; and
- Consultation with faculty advisor, community physiotherapists.

2. During Clinical Placement:

- Resource persons within the facility (e.g. Clinical Instructor, CCCE, director/supervisor);
- Phone call, email, individual meeting with DCE (or designate); and
- Consultation with relevant faculty.

At any point during placement, regardless of where the placement is located (in catchment, OOC, NSS or International), if a student requires support related to clinical activities or learning, please contact the DCE or stated designate immediately.

3. Post-Clinical Placement:

- Individual meeting with DCE

In all instances where a student is experiencing difficulty (e.g., may be unsuccessful in passing their clinical placement), the DCE should be notified immediately by **both** the student and the CI(s). In the event any incidents occur after midterm evaluation, the DCE should be notified **immediately**. If conditions warrant, the DCE may visit the facility to gather further information.

Serious deficits in matters pertaining to work in clinical settings, research ethics or professionalism when interacting with human or other subjects, may result in termination of the work in a clinical placement. Unsatisfactory standing or serious deficits in matters pertaining to professional skills, which include but are not limited to patient safety, professionalism, ethical behavior and technical skills, as described in the Essential Competency Profile for Physiotherapists in Canada, may result in a decision to terminate the clinical placement. In most situations termination of the clinical placement constitutes a failure and will result in the student receiving a grade of F in the Clinical Practice course and may result in dismissal from the program.

In some facilities, there may be a CCCE or a Centre Coordinator who has taken on an expanded role – these individuals may be a resource for CI or students who are experiencing difficulty. The role of the individual at each facility varies and should be clarified. Students needing further support in the clinical setting should contact the DCE about clinical issues.

Tools to assist students having difficulty on clinical placement, such as the Anecdotal Record form and Critical Incidence Reporting form, can be found on the PT Clinical Education website (see [Section 11.0](#) for link to website).

Refer to [Appendix 12](#) for the process to follow once a CI has identified that a student is having difficulty in the clinical setting.

Table 4.0 provides students and CIs with examples of strategies that may assist in resolving issues that can arise during clinical placements. If at any point, a student and/or CIs have concerns about the placement they are encouraged to contact the DCE (PT) or stated designate as soon as possible.

Table 4.0 – Strategies for Clinical Placement

<i>Issues</i>	<i>Strategies</i>
Ambiguity / uncertainty of role	<ul style="list-style-type: none"> ● use of content learned from courseware ● have confidence on “creating” & “testing” new role ● use of theoretical framework to guide process ● be comfortable with this issue
Decreased physical access to the Physiotherapy Clinical Instructor	<ul style="list-style-type: none"> ● use of & appreciation of other resources e.g. teachers, health care providers, family ● develop clear communication system ● identify and utilize other physiotherapists as resources
Lack of Accountability for own actions	<ul style="list-style-type: none"> ● develop organized schedule of activities ● view of self as extension of Physiotherapy Clinical Instructor
Uncertainty of learning experience	<ul style="list-style-type: none"> ● use of Learning Contract ● use year 2 students as resources ● view of placement learning as a continuum ● view of self as change agent

6.0 Models of Supervision

Students will be involved in many different supervisory relationships in the clinical placement setting. The following are examples of the models that students may be exposed to over the four placement periods. All models of supervision must meet the College of Physiotherapists of Ontario Standards.

6.1 Individual Model 1:1

The assignment of one student to one Clinical Instructor (CI):

- One CI is responsible for tasks related to administration, teaching, consulting and evaluation for the student.

6.2 Cooperative/Collaborative Model 2:1

The assignment of two students to one CI:

- Students encouraged to consult and learn from each other (collaboration);
- Each student must send an independent letter of introduction and SPP to the CI; and
- *Students must complete a separate evaluation form for the CI that is assigned to their placement*

6.3 Split Model 1:2 or More CIs

The assignment of one student to two or more CIs:

- One student to 2 or more CIs who may or may not be in the same clinical location or work within the same institution;
- Many part-time PTs prefer this model;
- Students are required to contact both CIs prior to starting placement with their Introductory Letter
- Students must also complete a separate evaluation of clinical placement form for each CI that is assigned to their placement regardless if they are from the same clinical site or not. If they are from the same clinical the student evaluation will be set up such that there will be an opportunity to evaluate each CI independently; and
- In this model the student will divide the number of learning objectives on their Learning Contract up between the two CIs (i.e. if with one CI for 3 days per week, 3 learning objectives will be specific to that CI and 2 for the other CI). In this model, the student must meet placement expectations in both clinical settings / locations.

6.4 Shared Supervision Model 1 CI: 2 or More Students

The assignment of a group of students to one group CI:

- Students encouraged to consult and learn from each other (collaboration);
- Each student must send an independent letter of introduction and SPP to the CI; and
- Students must complete a separate evaluation form for the CI that is assigned to their placement.

6.5 Offsite Supervision

The assignment of a student(s) to an off-site CI:

- The onus on the student(s) to be self-directed, organized and to manage learning opportunities and evaluation;
- Usually occurs at sites where the PT role is emerging; and
- Will often include some student independent work (see [Section 4.8](#)).

These are only examples of supervision for students while on placements. Students may be exposed to other supervision models. In all cases, if a student is unclear who their CI(s) are once they are on site, it is the student's responsibility to clarify this information by speaking with the individual identified on the assignment sheet, the CCCE or the DCE.

6.6 Split Placement Sites

In some instances, student's placement will be split between multiple facilities and clinical instructors. Students assigned to multiple placement sites, will receive separate evaluations from both sites (i.e. ACP 2.0 at mid-term and final evaluations). Both evaluations will be considered to determine the student's overall success in the placement (i.e. no concerns at either site must be identified) on any of the evaluation tools.

To facilitate the volume of paperwork associated with split sites the student completes the following:

- One (1) self ACP 2.0 evaluation at mid-term and final that is used and completed for each site:
 - Separate notes can be used on the same document to denote differences for each site;
- One (1) Learning Contract used for both sites:
 - The total number of goals does not change – however, the number of goals per site will reflect the time at each site. For example, if a student is at one site (site A) 2 days per week, and another site (Site B) 3 days per week, the Learning Contract will have 2 learning goals for Site A and 3 learning goals for Site B;
- One (1) combined tracking form that reflects the cardiorespiratory and neurological hours from both clinical placement sites;
- A separate student evaluation of clinical placement at mid-term and final for each clinical location;
- A separate clinical experience summary form for each location; and
- A separate survey submission on Avenue to Learn by the end of week 1 of placement to confirm placement days and times for each setting.

7.0 Evaluation of Placements

7.1 Evaluation of Placements

In Clinical Practice I-IV Courses the *Canadian Physiotherapy Assessment of Clinical Performance (ACP 2.0)* and the *Learning Contract* are used to evaluate student performance during clinical placements. The evaluation documents are considered part of the student's official academic records.

7.2 Canadian Physiotherapy Assessment of Clinical Performance 2.0 (ACP 2.0)

ACP 2.0

The ACP 2.0 is a Canadian designed clinical evaluation tool. This evaluation is based on the 2017 Canadian Competency Profile for Physiotherapists (ECP), and the rating scale has been modified from the revised original ACP. Clinical instructors and students will be required to complete an online training module prior to completing the assessment for the first time. The ACP 2.0 is a copyrighted instrument.

ACP 2.0s submitted after the assigned deadline may impact a student's ability to progress to the next academic term. In addition, students are expected to perform or complete a self-evaluation at both midterm and at the end of the placement. By submitting the evaluation electronically, at mid-term and at final evaluations, the **student is not indicating that they agree with the evaluation, but rather that they have discussed the evaluation with their CI(s).**

Important Notes:

- The ACP 2.0 should be completed, and the Learning Contract reviewed at the mid-point and end of the placement by both the student and the CI;
- The Learning Contract and the ACP 2.0 should include comments/examples to support the assigned mark/evaluation;
- Scores assigned on the ACP 2.0 should reflect a typical performance or that performance which most closely describes a student's behaviour over the period evaluated (e.g., the midterm mark reflects performance from the beginning to the mid-point of the placement and the final mark reflects performance from the midterm evaluation to the end of the placement);
- Information about how to access the online module that provides instruction on how to use the ACP 2.0 is posted on A2L;
- At McMaster, benchmarks have been set for each placement. These benchmarks are used to determine if the student has obtained a mark of 'credit' at the end of the placement period;
- Clinical Instructors will be directed to consider that, if safety/ professionalism is a **major** concern, resulting in one or more domains being marked below benchmark, the CI should recommend a grade of **NO CREDIT**; and
- If students do not meet expectations as identified above, the CI will may be directed to consider a final grade recommendation of **CREDIT with RESERVATION** unless safety/professionalism is a **major** concern, in which case no credit should be recommended.

ACP 2.0

A student will be formally presented to the PASC with a recommended grade by the DCE for a final grade assignment if they have one OR more of the following on the ACP 2.0 (there are a total of 18 rating scales on the ACP 2.0);

- 3 or more rating scales that have been evaluated below the expected benchmarks in the final ACP 2.0
OR
- 2 or more rating scales that have been evaluated at greater than one level below the expected benchmark in the final ACP 2.0
OR

- Have received an overall recommendation of Credit with Reservation or No Credit in the final ACP 2.0
OR
- The comments in the Final ACP 2.0 have highlighted an area of concern
OR
- As otherwise identified in the Program and Clinical Education handbook or Graduate Calendar (i.e. withdrawal of a placement)

To assist in understanding the expectations by unit the following documents are available on A2L and shared with the CIs in advance of the placement starting:

- A summary of benchmarks by unit (ACP 2.0 Quick Reference Guide: Clinical Placement Expectations) and
- Both a general table and a comprehensive table outlining how each domain changes by unit (ACP 2.0 General Reference Guide: Clinical Placement Expectations and ACP 2.0 Comprehensive Reference Guide: Clinical Placement Expectations)

To assist CIs and students with evaluating performance in role emerging/administrative placements using the ACP 2.0, a separate table has been created (ACP 2.0 Administrative/Project Reference Guide: Clinical Placement Expectations).

Students who have rating scales on the final ACP 2.0 that do not meet the expected benchmarks, but do not meet the criteria stated above to formally present to PASC, will be brought forth to PASC at an awareness level for tracking across the Program and advised of the occurrence(s) by the course coordinator.

7.3 Learning Contracts

OBJECTIVES	LEARNING RESOURCES (TECHNOLOGY AND TOOLS)	EVALUATION METHODOLOGY	CRITERIA FOR EVALUATION	SUCCESS RATES	FINAL SCORE	FINAL COMMENTS
1. What are your goals for this placement?	Research on geriatric learning of	A. What are your goals for this placement? B. How will you evaluate your placement experience?	What are the characteristics of this placement setting that will help you achieve your goals?	100% 100% 100%	100% 100% 100%	
2. What are your goals for this placement?				100% 100% 100%	100% 100% 100%	
3. What are your goals for this placement?				100% 100% 100%	100% 100% 100%	
4. What are your goals for this placement?				100% 100% 100%	100% 100% 100%	
5. What are your goals for this placement?				100% 100% 100%	100% 100% 100%	

Student Signature (Student): _____ Student Signature (Preceptor): _____
 Preceptor Signature (Instructor): _____ Preceptor Signature (Student): _____
 Date (Student): _____ Date (Preceptor): _____

In addition to the ACP 2.0, a Learning Contract is used for all placements to maximize the opportunities for student learning within the placement setting.

A Learning Contract is an agreement between a student and a CI outlining in detail five learning objectives, the resources required to meet the objectives, the type of evaluation to be utilized, and the specific characteristics that will be evaluated.

Learning Contracts are utilized in the MSc (PT) Program to reinforce our philosophy of self-directed learning. Student's complete components of the Learning Contract in clinical and academic courses throughout the program.

The MSc(PT) Program believes that the use of Learning Contracts reinforce the student's role as an active participant in the process of learning rather than as a passive recipient. Learning Contracts allow the student to have more individuality and flexibility within the clinical setting. In addition, as a physiotherapist, it is important to pursue learning throughout their career. The ability to become a life-long learner requires the ability to set goals, state means of attaining goals and formulate methods of evaluating when goals are achieved. The

Learning Contract is one strategy that develops these skills. Learning needs should be distinct for each clinical setting and placement and should be appropriate for the student's level of learning.

7.3.1 SMART Goals

Learning Contracts must be written using SMART goals. Examples of how to write "SMART Goals" and examples of "SMART Goals" are available on the College of Physiotherapists of Ontario website.

7.3.2 Steps in Developing the Learning Contract

i) Self-evaluation

The student should assess their strengths and weaknesses and consider past performance during previous clinical placements. Consider:

- What knowledge and skills do I already have?
- What knowledge and skills do I need?
- What knowledge and skills would I like to learn?

ii) Identification of Learning Needs (objectives)

Individual behavioural objectives will depend on the self-evaluation and the clinical setting. Clinical Instructors and students should consider whether the objectives are feasible within the setting and within the placement timeframe.

Consider:

- Are my objectives described clearly?
- Are my objectives realistic and feasible?
- Will it be possible to measure my objectives?
- Do the objectives describe what I propose to learn?
- Are there other objectives I might consider?

iii) Identification of Learning Resources and Strategies

All resources, including literature, facilities, and people, should be identified. The feasibility and timeframe of the strategies should be negotiated between the student and CI. Consider:

- How will this strategy help to accomplish my objectives?
- Is this strategy feasible within the learning situation and timeframe?
- How will I acquire the resources? Are they current?
- What knowledge and skills are required to use this resource?
- Are there other resources to consider?
- What are the available resources in the facility?

iv) Identification of Evaluation Methodology

The student should consider means of providing evidence of learning and the most appropriate person to evaluate the objective. This is most often the CI, but other team members or colleagues could be utilized.

Consider:

- Why select this method?
- What knowledge/skill will it help you demonstrate?
- How and when will this be evaluated?
- What alternative methods have you considered?
- Does the method demonstrate variety and creativity?

v) Identification of Criteria for Evaluation

Criteria should reflect the learning objectives and be described in behavioural terms. It is important for the CI and student to agree on the appropriate criteria for the student's level. Consider:

- Are the criteria clear, relevant and able to be applied?
- Do the criteria relate to my objectives?
- Are the criteria appropriate for my level/timeframe?
- What alternative criteria have I considered?

A sample Learning Contract will be posted on A2L to provide an example of a SMART goal for a clinical placement learning objective.

7.3.3 Marking of Objectives

Learning Contracts are scored out of 10 with a maximum of two marks per objective at both the midterm and final evaluations:

Score	Criteria
2	All criteria for that objective were met successfully
1	Minor elements have not been demonstrated
0	Major elements were not demonstrated

Every effort should be made to create the Learning Contract in collaboration with the Clinical Instructor to ensure it will reflect the caseload and opportunities available to the student in the placement setting. However, if caseload/ site considerations are identified at mid-term that would prevent a student from completing a learning objective, a new objective can be created to ensure best opportunity for successful completion. If a student's clinical knowledge or clinical skills are preventing the attainment of a learning objective, a new goal cannot replace an existing goal and the DCE should be contacted.

Students who achieve less than 7/10 on their Learning Contract at the final evaluation because of lacking clinical skills or knowledge will be presented to the PASC for review. In these circumstances, the DCE will follow up with the clinical site in advance of making the grade recommendation, if sufficient information is not provided by the CI on the evaluation document.

Students who achieve a 0/2 for any specific goal, but at minimum 7/10 overall will be contacted by the DCE. The DCE will also follow up with the clinical site in these circumstances.

7.3.4 Submission Timelines

It is expected that students present a draft of their Learning Contract to their CI by the end of the first week of placement. The learning contract should be finalized (at latest) by the middle of the second week of placement. In the first week of any clinical placement, students will have the option for the DCE or a delegate to review their Learning Contract to provide feedback on: if the goals are SMART in nature and appropriate for the student's academic level. However, the Learning Contract must be submitted by the end of the first week of placement, in an electronic format.*

*Note the DCE/delegate will not comment on if the goals are appropriate for the assigned placement, as identifying appropriate goals is the responsibility of the student and the CI.

The Learning Contract is due and must be submitted on Avenue to Learn within 24 hours of clinical placement completion.** It is the student's responsibility to ensure the Learning Contract is complete, accurate, and

submitted on time. Failure to submit documents by stated deadlines may result in suspension of placement preferences for upcoming placement periods and may delay the progression in the Program as the Learning Contract is required to assign a course grade

An electronic copy of the Learning Contract and resources for completing the Learning Contract can be found on A2L (for students) or on the Clinical Education website.

***Please note that the platform to complete and submit Learning Contracts is currently under review. Any changes to the process will be communicated to students directly and as updates are made.*

7.3.5 Grading Guidelines

The DCE is the course coordinator for all Clinical Practice courses. Final grades are recommended by the DCE to the PASC, and the PASC assigns a final grade to every student. The DCE takes into consideration the recommendation of the CI on the ACP 2.0 at final evaluation, ACP 2.0 ratings on each domain, subjective comments on the ACP 2.0, and completion of the Learning Contract and its associated objectives.

The DCE will communicate with the CI(s) and student as necessary to clarify any information contained in the ACP 2.0 or Learning Contract, and this information may be taken into consideration when recommending and assigning a grade.

Any students who demonstrate safety/professional behaviour issues in relation to clinical placement or who did not meet expectations as on the Learning Contract and/or ACP 2.0, will be reviewed by PASC, and may be assigned a grade of FAIL for the placement.

Standard academic regulations apply to the mandatory pre-clinical education classes. In cases where students are experiencing difficulties meeting the objectives satisfactorily, the DCE should be consulted as soon as possible.

7.4 Cardiorespiratory and Neurological Hours and Competency Tracking

Students are expected to track Cardiorespiratory and Neurological contact hours on all placements and during the clinical observation experience to ensure they are meeting Clinical Practice graduation requirements (see [Section 4.1](#)). Tracking expectations will be reviewed in the Clinical Practice classes.

An electronic tracking document is provided for students to complete and must be verified by the CI at final evaluation. Some CIs may request to review and verify the tracking sheet on a more frequent basis. Students should consult with the CI at the beginning of placement, on how frequently and in what method (electronic vs. hard copy) they would like to review. The number of hours documented in the tracking document must match the hours that have been identified in the Clinical Education Summary document.

Suggested time credits can be granted based on the following:

- 1 assessment = 1 hour of time (including charting);
- 1 reassessment = 0.5 hours of time (including charting); and
- 1 treatment = 0.5 hours of time (including charting).

Note: These time allocations are **suggested averages** and include the charting and preparation / research time associated with patient care. It is recognized that assessment and treatment time either performed or observed may vary across clinical practice course settings and patient populations and hence tracking time associated may also vary.

The tracking document is to be submitted to the school, via drop box on A2L, at the end of each placement. The DCE will then review the spreadsheet to ensure students are on track to meet graduation requirements.

Examples of what can be tracked for cardiorespiratory (CR) hours include, but are not limited to: blood pressure assessment, monitoring oxygen saturation levels, suctioning, chest physiotherapy techniques, and patient mobilization for the prevention or management of a CR related condition, exercise prescription that includes assessment of vital signs. A more detailed outline of CR activities is posted on A2L, in addition to other resources (i.e. document and video 'how to' related to tracking).

Examples of what activities can be tracked for neurological (NR) hours include but are not limited to: assessments and treatments for individuals with progressive neurological conditions (i.e. ALS), concussion or vestibular assessments and treatments, paediatric assessment and treatments when related to an underlying neurological condition (i.e. Cerebral Palsy), spasticity assessment and management. A more detailed outline of NR activities is posted on A2L.

Cumulative competencies are also tracked across the program. Cardiorespiratory and Neurological competencies are required to have been achieved by the end of CP IV. These competencies include, but are not limited to treatment techniques, assessment techniques (CR history/lab results), assessment techniques (subjective and objective), analysis and planning. In addition to tracking CR and NR competencies, following each clinical placement period, students are required to submit a Clinical Education Summary Document signed by their CI which outlines additional competencies that are tracked by the Program. Information collected and tracked from the Education Summary document includes, but is not limited to, exposure to various age ranges, hours spent on research/project work/ administration and exposure to complex care.

7.5 Evaluation of Clinical Placement

For In-Catchment and OOC placements, feedback is given to the Clinical Placement Site and the Clinical Instructor (CIs) via the Student Evaluation of Clinical Placement on HSPnet.

Students are expected to complete the Student Evaluation of the Clinical Placement (SECP) at the midterm and final points of each clinical placement.

The evaluation can be reviewed with the CI(s) and/or CCCE at midterm and final. However, to allow students an opportunity to provide open and honest feedback, the completed midterm SECP is only accessible to the student and is not released to the CI for review or viewing.

The final evaluation will be available to view by the Clinical Instructor(s) once it has been submitted by the student. Students will have up to 3 days after placement has ended to complete and submit the final SECP.

SECPs are reviewed by the DCE/delegate at both midterm and final time points. Students will be contacted if there are evaluations or comments that require follow up.

Students are encouraged to provide their CIs with feedback throughout the placement and to contact the DCE immediately with concerns about placements.

7.6 Placement Evaluation of Document Deadlines

For Clinical Practice Placements I-IV, evaluation documents, with the exception of the ACP 2.0 and Learning Contract, need to be submitted on Avenue to Learn within 3 days of the last day of placement. It is the student's responsibility to ensure all forms are complete and accurate within the 3-day deadline. Failure to submit documents on time may result in suspension of placement preferences for upcoming placements.

The Clinical Education Assistant will track document submissions on A2L. It is the student's responsibility to login to A2L and ensure all documents are received and complete, and to rectify any documents not received or incomplete. Students have one week following their submission deadline to rectify and resubmit incomplete documents.

A summary of all evaluation documents and the responsibilities for completion can be found on A2L.

7.7 Assessment Process

In Clinical Practice I-IV Courses, the CI will assess the student's performance on placement with the ACP 2.0. The CI(s) can make a recommendation for one of the following grades at midterm and at the final evaluation:

1. Credit;
2. Credit with Exceptional Performance;
3. Credit with Reservation; or
4. No Credit

However, it is the DCE, as Course Coordinator, who recommends a final grade (PASS/FAIL) for each student for each clinical placement for the PASC's consideration, and the PASC assigns the final grade for each student. Students must be successful (PASS) in each Clinical Practice course component to be awarded an overall PASS in the course.

A student will be presented to the PASC for a final grade assignment if:

- they have met one OR more of the criteria identified in [Section 7.2](#)
OR
- achieve less than 7/10 on their Learning Contract at the final evaluation because of lacking clinical skills or knowledge
OR
- as otherwise identified in the Program and Clinical Education handbook or Graduate Calendar (i.e. withdrawal of a placement)

1) *Suggested guidelines for recommendation for a Credit or Credit with Exceptional Performance:*

- By the end of the placement, the student demonstrates a level of competency in the skills acquired during the placement that is commensurate with the number of opportunities the student has had to practice and refine the skill;
- There is evidence that the student can modify their behaviour based on feedback and incorporates previous learning into new situations;
- There are no "significant concerns" regarding any of the applicable criteria in the ACP 2.0;
- The student successfully completed (2/2) on all of their learning objectives as outlined in the individual Learning Contract;
- The student has successfully achieved the benchmarks identified for the specific placement by the end of the placement period on each ACP 2.0 domain; and
- For Credit with exceptional performance, the student has met all the above criteria, and has demonstrated knowledge and skills above the expected level of a student in his or her current unit on a consistent basis.

2) *Suggested guidelines for recommendation for a Credit with Reservation:*

- By the end of placement, the student may have achieved minimum expectations in the majority of domains (see criteria in [Section 7.2](#)), however, there are still some domains where the student is unable to demonstrate minimum requirements;
- The student's performance has been inconsistent throughout the placement;
- The student has not had a major safety/professionalism concerns; however, the clinical instructor may not feel comfortable allowing the student to work independently for the majority of the time;
- The student has not responded to feedback provided over the placement in terms of meeting expectations for progression towards the expected benchmark; and

- If students do not meet all expectations as identified above, the CI will be directed to consider a final grade recommendation of **CREDIT with RESERVATION** unless safety/professionalism is a major concern in which case the CI should recommend a grade of **NO CREDIT**.

In the event a CI believes they will recommend a grade of credit with reservation at mid-term or final, the CI must contact the DCE as soon as possible. Students must contact the DCE as soon as possible they are informed of a grade of credit with reservation at mid-term or final evaluation to discuss the evaluation.

3) *Suggested guidelines for recommendation of No Credit:*

(Any one or more of these are sufficient to recommend a Fail. This list is not comprehensive):

- The CI determines the student's performance during the second half of the placement presents with "significant concerns" in one or more criteria on the ACP 2.0;
- Given the opportunity, the student is unable to demonstrate sufficient improvement after having received constructive feedback and several opportunities for practice;
- The student is not demonstrating a response to feedback related to performance of skills and/or knowledge and/or professional behaviour (**a judgement about this includes consideration of the student's academic level, the level and type of previous clinical placements and the learning opportunities provided during the current placement**);
- The student is below expectations on any domain due to concerns of safety;
- Students who achieve less than 7/10 on their Learning Contract at the final evaluation because of lacking clinical skills or knowledge;
- The observation of safety concerns e.g., unsafe application of modalities; improper guarding of a patient resulting in injury; repeated failure to apply brakes to gait aid or beds during transfers, etc.;
- Unprofessional behaviour (at any level of learning) – e.g., unreceptive to feedback from any member of clinical / placement team; inappropriate conduct with patients or other staff members; frequently late for clinical placement, etc.; and
- The student is absent from clinical placement without notice to the DCE and site.

Student Withdrawal from Placement

If a student requests to be withdrawn from a placement after the placement has begun, the circumstance for this request will direct the specific steps that will be taken. Grades may or may not be assigned for a placement depending on the length of time that has passed since the placement started (i.e. 1 day compared to 6.5 weeks of a 7 week placement)

a) Withdrawal due to medical reason(s)

If students are unable to continue with their clinical placements due to medical reasons, the student is required to inform the DCE (PT), Assistant Dean and Program Manager as soon as possible. Together, the options will be explored, which may include the student submitting a Petition for Special Consideration to the School of Graduate Studies.

b) Withdrawal due to performance concerns

If a student decides to withdraw from a clinical placement due to concerns about their own performance, or the focus of the clinical placement, the Program will consider the timing for the request for withdrawal, associated circumstances, if concerns have been raised by the CI, and the duration of the clinical placement that is remaining. In these circumstances it is typical that a grade of 'no credit' will be assigned.

In the event a CI recommends a grade of no credit/credit with reservation at mid-term or final, the CI and student must contact the DCE as soon as possible. See [Section 5.6](#) on 'Communication Processes and Clinical Placement Strategies'.

7.8 Clinical Practice Expectations

Over the course of the Program, students are expected to progress in the roles and responsibilities in which they partake during Clinical Practice courses.

ACP 2.0 Evaluation guidelines and resources detailing clinical expectations across the program will be provided to students and posted on A2L for students. These resources are shared and made readily available to CIs to use as a reference for evaluating student performance in clinical placements. A supplemental chart is also available for students who are completing a role emerging/research/administrative placement.

8.0 Policies and Procedures

**Please note that any guidelines specifically related to COVID- 19 will be communicated to students via A2L.*

8.1 Clinical Practice Attendance Policy

Students are required to attend each placement in its entirety – 100% attendance is expected of all students.

Reasons for an absence from placement should only be considered in exceptional circumstances **and** will require supporting documentation (see table 5.0).

Why must students attend each clinical education course in its entirety?

Reasons for this policy include, but are not limited to, the following:

- Successful completion of all clinical education courses is an academic requirement for graduation from the MSc (PT) program;
- Students in the MSc (PT) program assume responsibility for patient care during clinical placements;
- Absences disrupt patient care continuity and affect student learning;
- Absences may impact on the clinical instructor’s ability to adequately evaluate the student;
- Students are required to complete a minimum number of hours in clinical practice to meet MSc (PT) graduation requirements) (See [Section 4.1 on Clinical Practicum Requirements](#) and [Section 4.3 on Clinical Practicum Hours](#)); and
- Student PTs are expected to uphold exemplary standards of professional conduct. Attendance is a critical professional obligation.

To ensure the student is covered with liability insurance for the duration of the placement, the Clinical Education Team must be aware of all absences and changes in placement dates and times.

Absence days may be planned or unplanned and may be taken for various reasons, including but not limited to: illness, loss of a family member or friend, medical appointment, significant life event, etc. Students are allowed to take a maximum of 4 absence days total across ALL placements. If there are extenuating circumstances, the DCE and the Assistant Dean will work with students to identify next steps.

Students are encouraged to be thoughtful regarding the use of absence days, as there may be unforeseen circumstances on future clinical placements where absence days will be required. These unforeseen circumstances will be included in the total 4 permitted absence days.

The following criteria apply to absence days:

- A student cannot take >3 absence days per placement period.
- If a student requires an absence day due to illness, they must adhere to all documentation and clearance requirements as outlined in the Clinical Education Handbook.

**There may be extenuating circumstances (e.g., prolonged illness), whereby the clinical education team, student, and Clinical Instructor/Preceptor will need to manage absences that fall outside the outlined criteria.*

Should a student choose to take an absence day, the following process must be followed:

- Submit the absence form to the clinical education team for reference:
 - at minimum 2 weeks prior to the placement start date for Planned Absences
 - as soon as the absence date is known and/or within the day of absence for Unplanned Absences
- The student must also communicate the absence to the assigned Clinical Instructor prior to the start of the clinical placement day, copying the clinical education team.
- The student must arrange to make up the missed time with the Clinical Instructor to ensure they meet the minimum hours required for each clinical placement.

- Make-up days or hours must be outlined on the respective absence form. Any organized make-up days must be organized to align with the sessional dates of the respective clinical placement course. If a student is not able to meet the minimum required hours within the current placement period, they may be required to organize make-up time in a future placement. This organization will be supported by the clinical education team.
- The student must ensure, through discussion with their Clinical Instructor, that any missed time will not impact on their ability to meet placement expectations. The student will need to attest to having had this discussion via signature on the absence form.

Students are expected to follow the outlined process for both planned and unplanned absence days. Failure to adhere to the process may result in a student being presented to the Program Academic Study Committee for professionalism concerns.

Placement absences will be monitored and tracked for each student during each placement. The Clinical Education Team will update student’s absences on A2L. The student should bring any discrepancy to the attention of the Clinical Education Assistant.

‘Extra’ hours accumulated during each Clinical Placement typically cannot be carried forward to reduce the time required for subsequent placements.

Planned Unplanned absences cannot be used to end a placement early for the purposes of having placement evaluations completed earlier.

If an absence occurs during the last week of clinical placement:

1. Evaluation forms will not be processed by the Clinical Education Team until the last scheduled day of the clinical placement;
2. The student may be responsible for scheduling an evaluation review with the CI outside of the previously arranged placement dates (i.e. if the student is absent on the day the evaluation was planned for); and
3. The student is responsible for submitting all documentation to the Clinical Education Team as per the stated deadlines.

Table 5.0 – Required Absence Supporting Documentation

The following documents are examples of what may be required to support an absence from a clinical placement.

Medical Reasons – Pre-Scheduled appointment	Written verification of the appointment must be provided from the physician or medical office, as soon as possible after submitting the form.
Medical Reasons	A student will be required to submit a completed health certificate (Appendix 18) for any absences > 24 hours (i.e. 1 day) of placement due to medical reasons OR when the site requires a health certificate to clear a student to return to the clinical site (i.e. some occupational health and safety requirements may indicate that the student needs to have a medical note to return). At all times, the health and safety of everyone (i.e. the student, patients, public) needs to be the main priority, and if a student is unclear about the safety of returning to the clinical environment (i.e. concern related to lingering symptoms or resolution of risk) they must err on the side of caution and consult a physician to obtain the health certificate. When completion of the Student Health Certificate is mandated, the student must email an electronic copy of this certificate to ensure the student is safe to return to placement to the Clinical Education Team and Program Manager.

Citizenship Court	Submit the original official judicial notice and a photocopy. The photocopy will remain on file.
Death of a Family Member or Friend	Provide one of the following: <ul style="list-style-type: none"> • A letter from the funeral home confirming that you attended the funeral; • A death certificate; or • An obituary.
Jury Duty	Submit the original official judicial notice and a photocopy. The photocopy will remain on file.
Wedding	Absences for weddings will only be granted if one of the people getting married is part of your immediate family <i>or</i> you are in the wedding party. You must provide a copy of the wedding invitation and a letter from either spouse.
Other	The DCE may request additional supporting documentation if absences occur for reasons outside of those stated above.

8.1.1 Unplanned Absences

Unexpected illness, injury, or compassionate leave may be considered acceptable reasons for unplanned absence from clinical placement. If any of these events occur the student is expected to follow the steps outlined in [Section 8.1](#).

- If a student is unable to attend placement due to illness after 24 hours, the student must complete the required documentation (see Table 5.0) and may be required to complete the Return to Clinical Placement checklist from an attending physician to return to clinical placement. If required, the Return to Clinical Placement checklist is available through contact with the DCE and Program Manager.

If a student must leave the site early due to illness, injury, or for another emergency reason, the student is expected to follow these steps:

- 1) Inform the Clinical Education Team or the stated delegate via phone about the need to leave placement immediately (i.e. prior to leaving the clinical site);
- 2) Submit the unplanned absence form to the Clinical Education Team within 24 hours of the absence (form can be found on A2L). Supporting documentation should be submitted as soon as possible following the absence (see Table 5.0):
 - a. If a student is unable to attend placement due to illness after 24 hours, the student must complete the required documentation (see Table 5.0) and may be required to complete *Return to Clinical Placement Checklist* from an attending physician to return to clinical placement. The Return to Clinical Placement Checklist is available through contact with the DCE and Program Manager.
- 3) If the student leaves the clinical site early due to an incident, in addition to the steps outlined in [Section 8.1](#), the student must complete the McMaster Incident form and submit this form to the Clinical Education Team, as well as the Faculty of Health Sciences (FHS) Safety Office within 48 hours. The DCE (or delegate) should be informed immediately of any incidents where personal injury is sustained on clinical placement.

8.1.2 Planned Absences

To allow students, the *possibility* of a planned absence during a clinical placement, and to be fair and equitable to all students in the MSc (PT) Program, the process outlined in [Section 8.1](#) must be adhered to.

Other Important Notes about Planned Absences:

- A planned absence request does not automatically guarantee approval;
- If a student is absent from clinical placement without prior notice to the DCE and Clinical Instructor, it is considered unprofessional conduct and could result in referral for review by PASC.

8.1.3 Late to Placement

Prior to the start of each clinical placement, students are expected to discuss daily start times with the CCCE and/or the CI. If feasible for the site, students are expected to arrive 15 min before the negotiated start time to allow for set up and planning for the day ahead. Students must be prepared for each day of clinical placement (i.e. tool kit, chart reviews).

If a student is late to placement, it is the expectation that they contact the clinical site (via the CI or CCCE) regarding their expected arrival. If a student is late recurrently, a site may decide to terminate the placement in consultation with the DCE.

8.1.4 Storm Emergency Policy

Students should refer to McMaster's Storm Emergency Policy (see [Section 11.0](#) for link) when weather conditions are a concern.

Item number 4 - This policy does not apply to students attending a placement at a non-McMaster campus location. These students are asked to follow the direction of their placement supervisors or employers, unless directed otherwise by their education program.

Students will be asked to follow the direction of their placement supervisors during a storm (severe weather conditions) or during inclement weather. It will be at the discretion of the Clinical Instructor and /or the employment site to determine if it is safe for the student to remain at or travel to placement. Students should also consider their ability to safely travel to and from their clinical site.

If inclement weather prevents attendance on clinical placement, students are expected to follow these steps:

- 1) Contact the clinical facility (CI and/or CCCE) **before** the start of the clinical day so the student's caseload can be re-assigned;
- 2) Inform the Clinical Education Team or the stated delegate via email of the absence within the day; and
- 3) The Clinical Education Team will notify the student about whether there is a need for making up the missed time.

If the student is unable to attend placement due to inclement weather, this absence does not count as an absence from clinical placement. The Clinical Education Team may advise the student to make up time if it is deemed necessary to fulfill placement requirements or to complete a final evaluation.

8.2 Dress Code Policy

Students will be given the opportunity to increase their knowledge and experience by participating in the care of clients in various health care settings. Students are expected to demonstrate professionalism through appropriate attire and behaviour. Professional dress is expected by all students while on clinical placement. Although there is no uniform required by the program, students are obligated to observe the dress code of the physiotherapy departments and clinical facilities in which they are placed. In the event a facility does not have a dress code, students are expected to dress in a professional manner (i.e. dress pants and a long or short sleeved collared shirt).

Torn or ripped clothing, strapless or low-cut shirts or pants which expose bodily parts when performing clinical duties are not permitted.

Safety and health risks dictate against the wearing of open-toed shoes, clogs, sandals, flip flops, dangling jewellery, and large rings. In addition, hair must be fashioned in a manner that does not impede performance in clinical

placement or patient interactions. Many facilities have a 'no scent' policy in effect and are advised not to wear any cologne or perfume while attending their clinical placement. In some areas of service, lab coats may be required or worn to prevent spread of infection. Clinical sites may have additional requirements to satisfy their specific occupational health requirements (for example, some hospitals require running shoes without mesh), consequently, **students are required to clarify dress code expectations prior to starting placement.**

Students who do not comply with the above may be withdrawn from the clinical placement by the program or asked to leave by the facility.

When in doubt, students should clarify dress and behaviour codes with the centre coordinator of the facility or DCE.

For security reasons, the identification tag issued by the program must be worn at all times in all clinical facilities.

8.3 Conflict of Interest Policy

Students are not eligible to complete a clinical placement at a facility where they have previously completed a placement or had experience volunteering or working in a clinical context, and/or where they would be evaluated by a family member/mentor/friend. It is the student's responsibility to notify the DCE of any conflict of interest that occurs. Exceptional circumstances will be considered on a case-by-case basis and presented to PASC for discussion and decision.

All students must abide by the McMaster Faculty of Health Science conflict of interest policy and the Conflict Standard from the College of Physiotherapists of Ontario (see [Section 11.0](#) for links).

8.4 Confidentiality

The welfare of the client shall be the primary concern of the student. The student therefore will respect the confidentiality of all client information. When in doubt as to the amount of information that can be disclosed, consult the CI. Students need to be familiar with legislation related to Privacy of Personal Information and Electronic Documents Act (PIPEDA) and Personal Health Information Protection Act (PHIPA). Students must abide by each individual facility's confidentiality and/or privacy policies, which may include signing a site-specific confidentiality form.

8.5 Harassment and Discrimination

See the MSc (PT) Program Handbook for the McMaster Policy on Discrimination, Harassment & Sexual Harassment: Prevent & Response Policy. Please see [Appendix 15](#) for Consultation, Resolution and Reporting Options for Violations of the Discrimination and Harassment Policy.

The McMaster Sexual Violence Prevention and Response Office: <https://svpro.mcmaster.ca/> has several resources and options to connect that are available to MSc(PT) students.

Resources are posted on A2L as they relate to Recognizing and Responding to microaggressions for student to refer to and use as a resource while on clinical placement.

8.6 Student Accommodations for Clinical Placement

The process for obtaining accommodations may be lengthy, and students are strongly encouraged to start the process of registering for formal accommodations as soon as the need for accommodations is identified.

Refer to the MSc (PT) Program Handbook for additional information related to the accommodation process. Once accommodations are finalized:

- 1) The DCE in consultation with the Assistant Dean and Program Manager will work with the DCE to secure a clinical facility that is able to safely meet the required accommodations. The DCE may require disclosure of the accommodations in advance of finalizing the clinical placement to ensure the requirements can be met;
- 2) Unless otherwise specified in the accommodation contract, the student will inform the clinical site of the required accommodations in the introductory letter and again in person on the first day of placement. The DCE will follow up with sites to ensure that questions/concerns are addressed as related to the required accommodations; and
- 3) If the accommodation needs to change between placements, it is the student's responsibility to meet with SAS and the Program to articulate the change in needs.

8.7 CPR Certification Requirements

The Physiotherapy Program requires each student to complete CPR Level C or Basic Life Support as a part of their admission requirements. The completion of first aid training is not required. The CPR certification must remain valid for the duration of each individual's time in the Program. The Program will reference the expiry date indicated on the certification card. If no expiry date is specified (e.g., St. John Ambulance), the Program will consider the certification valid for two years from the date of issue.

Students may be required to renew their CPR certification prior to the official expiry date as part of some placement site requirements. Students must connect with the Clinical site once they have been matched to determine the CPR requirements of that site and whether a renewal is necessary.

8.8 Equity, Diversity and Inclusion

McMaster University is committed to the promotion of Equity, Diversity and Inclusion. Please use the following link to access the McMaster Equity and Inclusion Office and associated information: <https://equity.mcmaster.ca/>.

We expect our faculty, staff, students, and clinical partners to establish learning and working environments that are free from harassment and discrimination on any basis, including but not limited to race, religion, and gender. We expect our partners to foster a culture that respects the human rights, integrity, and dignity of all community members.

The MSc(PT) Program position statement on inclusive teaching can be found in every MSc(PT) Program academic unit handbook.

8.9 Guidelines for Social Media

The MSc(PT) Program is aware that students have a presence on a variety of social media platforms (i.e. Twitter, Instagram, Facebook etc.). To ensure that the privacy of clients, other health care providers, students, amongst others, are protected, the MSc(PT) Program has developed guidelines related to the use of social media for students to provide direction about the use of social media during academic and placement periods. At all times, students are expected to adhere to the Faculty of Health Sciences Professional Code of Conduct for Graduate Learners (<https://secretariat.mcmaster.ca/app/uploads/Professional-Behaviour-Code-for-Graduate-Learners-Health-Sciences-2014.pdf>) as well as McMaster University guidelines as they relate to interacting in online communities (<https://sscm.mcmaster.ca/the-code/the-code-virtual-communities/>). Students can also refer to the CPOs Social Media Principles for Physiotherapists (<https://www.collegept.org/registrants/standards-resources/social-media>).

Prior to sharing aspects of your clinical placement or academic experiences on personal social media accounts or any other public platforms you must:

Clinical Placement:

1. Ensure you are adhering to clinical site policies as many clinical sites prohibit the sharing of any and all placement related content and experiences through public/social platforms. Students are strongly encouraged to have written communication confirming that the social media post is approved by the clinical instructor and /or clinical site contact. IF approved - you must ensure you abiding by clinical site confidentiality policies at all times.
2. Ensure you maintain confidentiality of all parties at all times. Sharing **any** patient related information including pictures of your patients in any posted content is **prohibited**.
3. If your post will disclose any site-specific information (e.g. site name) you must have written consent from your Destination Contact/ Clinical Instructor to do so.
4. Consider that shared content is often permanent and not private, and therefore are accessible to other professionals and the persons you serve. This means you are to be thoughtful about the images and content you choose to share via social media.
5. Not post any information related to concerns related to a placement site or clinical instructor. Students must follow the established processes to provide the Program/site with feedback.

Academic Component:

1. Ensure your posts do not breach academic integrity responsibilities (i.e. exam content, course outlines).
2. To have explicit, written consent prior to positing pictures / images of peers, faculty or staff which indicates learners can share these images /photos on their personal social media accounts.
 - a. Students are encouraged to remember that even if a post is not linked back to the MSc(PT) Program directly, identifying yourself as a McMaster learner or wearing apparel that may link you to the MSc(PT) Program in the social media account means that you are held accountable to the Professional Code of Conduct and University Regulations for conduct of learners.
3. Submit any content that they wish to be considered for the MSc(PT) Program social media pages to the Year 1 and Year 2 Social Media Representatives who will vet this with the MSc(PT) Program.

8.10 General Safety Considerations

Student safety throughout the program, both in academics and on clinical placement, is a top priority. Please see below for links related to safety considerations provided by both McMaster Security and the Hamilton Police Department

McMaster University, Security Services: Personal Safety

<https://security.mcmaster.ca/personal-safety/>

Hamilton Police Service: Protecting Yourself and Your Property

<https://hamiltonpolice.on.ca/prevention/protecting-yourself-and-your-property>

9.0 General Information

9.1 What to Bring on Placement

It is the student's responsibility to bring the following documents on their first day of each placement:

- A. Health Screen Record;
- B. Mask Fit Testing Card (actual card, not the sticker on student's ID badge);
- C. Vulnerable Sector Check; and
- D. CPR certification card

Students are expected to bring all items as listed as part of the *McMaster Physiotherapy Program tool kit* to all clinical placements unless otherwise directed by their site or CI. The list of components includes:

- Bandage scissors
- Tape measure
- Hand sanitizer
- Cotton balls
- Alcohol wipes
- 12" goniometer
- 8" goniometer
- Reflex hammer
- Sphygmomanometer
- Boley gauge / Vernier caliper
- Zinc oxide athletic trainers tape
- Short stretch compression bandage
- Finger tensor bandage
- Pro wrap
- Tensor bandage
- Econo-San elastic bandage (3")
- Econo-San elastic (4")
- TheraBand
- Electrodes
- Monofilament (skin prick)

9.2 Workplace Safety and Insurance Board (WSIB)

When performing unpaid placement work, students may be provided with limited Workplace Safety and Insurance Board coverage or private insurance coverage for personal injuries. Claims requests and reports are coordinated by McMaster University, while claims adjudication is provided by either the Workplace Safety and Insurance Board or the insurance company contracted by the Ministry of Training, Colleges and Universities (MTSU). If an accident resulting in personal injury occurs during the placement, **immediately**:

1. Notify the Clinical Instructor;
2. Notify the Clinical Education Team (DCE, CEA or stated delegate); and
3. Complete an incident report and scan and email a copy of this to the Clinical Education Team.

The Clinical Education Team should be informed immediately of any incidents where personal injury is sustained by either a student or a client as a direct result of the student's involvement. Please see below for the injury claims procedures.

This coverage includes students who, as a part of their training, are placed in settings either within or outside of Hamilton, Ontario, Canada. This insurance policy does not provide any coverage to the Hospital/Agency or its

employees, but it does relieve the Hospital of any responsibility to provide coverage for McMaster students or faculty members involved in training at the Hospital/Agency.

It is the student's responsibility to make the Clinical Education Team aware of placement hours, weekend rotations and/or date changes, to ensure adequate insurance coverage is provided.

After the student has been assigned a placement, it is the student's responsibility to download and complete the WSIB Student Declaration of Understanding (on A2L) and submit to appropriate placement drop box on A2L. The form must be received no later than 2 weeks prior to the start of placement or keeping in line within any posted due dates for submission. A new form must be completed for each placement.

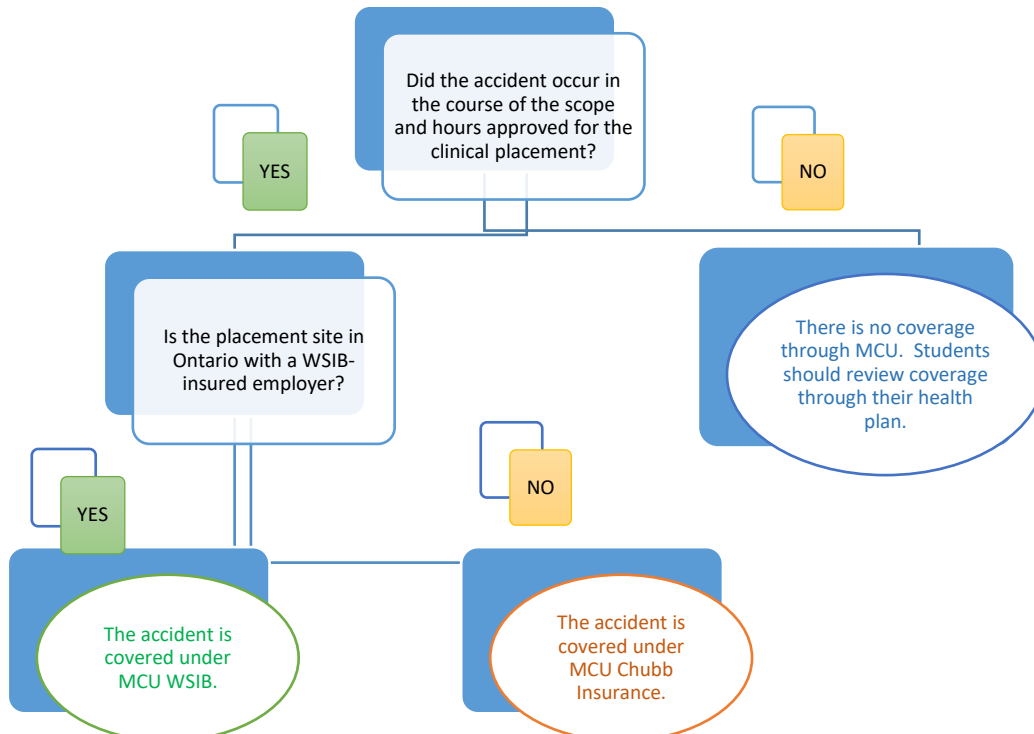
Students are provided a safety orientation checklist (available through A2L), which must be completed in collaboration with the CI. These must be submitted at the end of each clinical placement period along with other clinical placement documents.

Students who are using their own transportation to travel to, from and during clinical practice placements are responsible for ensuring they have appropriate motor vehicle insurance.

9.2.1 Injury Claims Procedures

The flowchart below applies to clinical placements that meet the following criteria:

- Student is not paid for the placement;
- The placement is authorized by the DCE;
- There is an evaluation component to the placement and the student receives academic credit for successful completion of the placement;
- Placement is in Canada;
- Placement is external to McMaster University*



** If the placement is occurring at McMaster University, and the other criteria are met, coverage is provided through McMaster University's Private Insurance Program.*

According to MCU-WSIB Guidelines and related correspondence, students who must travel between clinical sites (including client locations in the community) for the purposes of clinical placement, whether in their own vehicle or as a passenger in their clinical instructor's vehicle, are covered under MCU insurance (WSIB or private). In addition, McMaster's liability policy covers the student for third party claims arising from placement-related travel. There is no coverage for driving for non-placement activities (e.g., getting lunch, coffee, making any stops between appointments, elective field trips, etc.).

Incident/Injury Reporting for Students on Unpaid Placements (MCU/CHUBB WSIB Coverage)

The Ministry of Colleges and Universities (MCU) is Ontario's publicly funded Colleges and Universities (Training Agencies) for students participating in unpaid work placements. MCU manages students unpaid work placements in accordance with Workplace Safety and Insurance Board (WSIB) policy and procedures as well as with MCU guidelines.

CHUBB Insurance Company of Canada is also available for students on International (restrictions may apply and students may be required to purchase additional coverage for if completing an International placement) and other Canadian jurisdictions (outside of Ontario) unpaid placements. CHUBB is a private insurance company retained by the Government of Ontario.

Further information regarding unpaid student placement guidelines and FAQ's can be found on the [Unpaid Student Placements webpage](#).

To report an accident or illness that occurred during an unpaid placement, the following steps are required following appropriate emergency treatment/first aid:

Role of Student on Unpaid Placements

- Report the injury/illness to the Clinical Education Team, Program Manager, preceptor/clinical instructor (CI) and supervisor
- Complete the McMaster University [Injury/Incident Report](#)
- Submit the Injury/Incident Report to the FHS Safety Office (fhssso@mcmaster.ca), Clinical Education Team and Program Manager.

Role of FHS Safety Office, McMaster University

- Notify Employee Health Services (EHS)
- Receive Incident Reports - Review and forward to Environmental & Occupational Health Support Services (EOHSS) as appropriate

For Healthcare (HC) or Lost Time (LT) claims: (if the student seeks health care, loses time from work, and/or requires accommodation as a result of a workplace injury/illness) the FHS Safety Office will:

- Notify EHS consultant of any HC/LT claims
- Liaise with the Clinical Education Team, Program Manager, Placement Coordinators, Students and EHS consultants to obtain necessary information for MCU or CHUBB claims
- Facilitate completion of the ***Postsecondary Student unpaid work placement workplace Insurance claim form***
- Facilitate completion of *the Letter of Authorization to Represent the Placement Employer*
- Provide copies of completed forms to the appropriate EHS consultant.

Role of Placement Site

- Within 72 hours, complete the **Letter of Authorization to Represent Employer** (obtain from the Program Manager) and send it to the FHS Safety Office
- Work with McMaster University to accommodate the student's return to the placement as appropriate

Role of Employee Health Services

- Review information received from FHS Safety Office: *Injury / Incident Report form, the Post-secondary Student unpaid work placement workplace Insurance claim form and the Letter of Authorization to Represent the Placement Employer form*
- Complete the WSIB claim form (Form 7 etc.) and submit Form 7 and appropriate forms to MCU/CHUBB
- Copy of the forms goes to: Student, the MCU/CHUBB and FHS Safety Office
- Submit all requested information to the WSIB and MCU/CHUBB

Materials and Equipment Damage

There is no insurance coverage for materials and equipment used on placement. If the student damages any materials or equipment owned by the placement site or PT program, the student must inform the site and PT program immediately. The student is responsible for costs associated with fixing or replacing the damaged item(s).

9.3 Establishment of Placement Guidelines

It is understood that in providing a placement for student physiotherapists, the facility will retain overall responsibility for the best possible patient care, including treatment and safety of clients. To fulfil this responsibility, and also meet the learning needs of the student(s), the following points are understood:

- Student(s) placed in the facility is/are required to complete the Placement as a course requirement for graduation from the McMaster University MSc (PT) Program.
- The selection of the CI to supervise the student(s) will be made by the facility. Students shall not be used in lieu of professional staff but shall be under the supervision of a licensed physiotherapist.
- The selection of clients for the students' learning experiences will be the responsibility of the CI. Responsibility for client care will remain with the CI, even though care activities are assigned to students.
- Students shall be subject to the policies, procedures, guidelines and regulations of the facility and the PT Program, FHS and University. Discipline of student(s) wilfully violating rules and regulations of the facility or the Program, FHS, University will remain the responsibility of the PT Program; however, immediate action while the student(s) is/are in the facility will be the responsibility of the CI or director of PT facility. It is also the responsibility of the facility to report any problems encountered with the student(s) to the DCE of the McMaster MSc (PT) Program.
- The facility will be responsible for evaluating the student's performance according to standards and format provided by the PT Program. Feedback should be given directly to the student(s) by the CI. A report of the student's performance will be sent to the DCE, McMaster MSc (PT) Program.
- As per the Graduate Studies Calendar, unsatisfactory standing or serious deficits in matters pertaining to professional skills, which include but are not limited to patient safety, professionalism, ethical behavior and technical skills, as described in the Essential Competency Profile for Physiotherapists in Canada (www.physiotherapy.ca), may result in a decision to terminate the clinical placement or research project. In most situations termination of the clinical placement or research project constitutes a failure and will result in the student receiving a grade of F in the Clinical Education course ([link](#))
- McMaster University carries general liability insurance that covers and indemnifies all students, faculty members and employees of the University, while engaged in University authorized activities. Specifically, the policy includes "students of McMaster University Faculty of Health Sciences, with respect to all activities related to their professional training".

- McMaster University does not provide coverage for students who continue to engage with any clinical facility outside of the specific period outlined for placement. This includes students volunteering or employment by a facility, before or after the assigned placement dates, or outside of the times the student has been specified to be on placement during the placement period. The facility, supervisor(s) and student will be personally liable for all damages or expenses incurred outside of the designated placement dates and times.

9.4 Unplanned Interruptions of Placement

There may be situations that result in unplanned interruptions of the Clinical Placement schedule (e.g. labour disputes, COVID -19). If there is sufficient notice (e.g., possible strike action) alternative placements may be arranged as a proactive measure. If no warning is possible, arrangement for alternative placement/learning experiences will be made as circumstances merit/permit.

During the period of interruption, it is the student's responsibility to stay in close contact with the site CCCE, CI and the DCE.

10.0 Protocol for Completion of Final Placement When Not Returning to Academics

Typically, students will return to academics following their CP IV Placement. If there are circumstances where students will not return to academics following a placement, the process outlined below should be followed. Any changes to the process below will be communicated to students.

1. Ensure you retain a copy of all evaluation forms signed by you and your Clinical Instructor.
2. Upload a scanned copy of your placement documents to the Clinical Practice IV drop box on A2L, no later than one week after your placement has ended.
3. When the DCE is assured that you have completed the placement successfully, the Program Coordinator will be informed. Upon successful completion of the MSc (PT) Program, the Program Coordinator will send confirmation (via e-mail) to the College of Physiotherapists of Ontario, CPA, and the Alliance to inform them that you have successfully completed all requirements for the MSc (PT) degree. This will serve as your letter from the School for your supervised practice license. (Note: The student is required to send the appropriate agencies a copy of their degree and a transcript when these become available as required).
4. The College will then issue your provisional practice license (if you have done the appropriate paperwork) and you will then be able to start work.

(Note: If you need an official letter for other purposes, e.g. visa requirements, notify the Program Manager in advance.)

If you will be working in another province (e.g. B.C.) which also requires verification of your status, inform the PT Program Coordinator as they will also notify them you have completed all requirements of the MSc (PT) degree once confirmed by the Program Coordinator.

Every provincial / territorial College has deadlines for registration applications and the time needed to complete the process so please review the requirements of the territory / province in which you are planning to practice.

For more information (and forms) on Entry to Practice/Registration and Provisional Practice, visit the [College of Physiotherapists of Ontario website](#) under Information for Registrants.

Also check the [Canadian Physiotherapy Association website](#) for important information regarding malpractice insurance under Member Services.

11.0 Useful Website Links

As of June 2023, all the following website links are active. Throughout the year there may be cases where website links become inactive. The Clinical Education Team will do their best to update students via A2L with the most active website links.

Avenue to Learn

<http://avenue.mcmaster.ca/>

Canadian Alliance of Physiotherapy Regulators

www.alliancept.org

Canadian Physiotherapy Association

<http://physiotherapy.ca>

Clinical Education Partners (McMaster University)

<https://srs-pt.healthsci.mcmaster.ca/education/partners/>

Clinical Education Resources (McMaster University)

<https://srs-pt.healthsci.mcmaster.ca/education/partners/clinical-education-resources/>

College of Physiotherapists of Ontario

www.collegept.org

College of Physiotherapists of Ontario – Conflict of Interest Standard

<https://www.collegept.org/rules-and-resources/new-conflict-of-interest>

FHS Professional Behavior Code of Conduct for Graduate Learners

<https://secretariat.mcmaster.ca/app/uploads/Professional-Behaviour-Code-for-Graduate-Learners-Health-Sciences-2014.pdf>

FHS Conflict of Interest Policy

https://healthsci.mcmaster.ca/docs/librariesprovider85/policies-procedures/fhs_conflict_of_interest_guidelines.pdf?sfvrsn=eea57eb2_2

International SOS (information for McMaster students)

<https://www.internationalsos.com/>

McMaster MSc Physiotherapy Clinical Partners

<https://srs-pt.healthsci.mcmaster.ca/education/partners/general-information/>

McMaster Conflict of Interest Guidelines: Undergraduate and Graduate Studies

<https://secretariat.mcmaster.ca/app/uploads/Conflict-of-Interest-guidelines-Undergraduate-Studies-and-Graduate-Studies.pdf>

National Association for Clinical Education in Physiotherapy (NACEP)

https://www.physiotherapyeducation.ca/c_education.php

National Guidelines for Clinical Education in Physiotherapy

<https://peac-aepc.ca/pdfs/Resources/Competency%20Profiles/CCPUP%20Curriculum%20Guidelines%202019.pdf>

Northern Ontario School of Medicine

www.nosm.ca

Northern Studies Stream Facilities

<https://srs-pt.healthsci.mcmaster.ca/education/future-students/clinical-education/#tab-content-northern-studies-stream>

Northern Studies Stream Pre-Placement Application

<https://panda.nosm.ca/nosmapapplications>

Physiotherapy Competency Exam

<http://www.alliancept.org/taking-the-exam/>

Police Records Check Policy — Faculty of Health Sciences

<https://fhs.mcmaster.ca/pcbe/documents/FHSPoliceRecordCheckPolicyJune262019.pdf>

Professionalism in Clinically Based Education

<http://fhs.mcmaster.ca/pcbe/index.html>

Report an Incident of Injury

https://fhs.mcmaster.ca/safetyoffice/fhssso_incident_reporting.html

Responding to Disclosures of Sexual Violence

http://respondingtodisclosuresoncampus.com/course/story_html5.html

Sexual Violence Prevention and Response Office

<https://svpro.mcmaster.ca/>

<https://svpro.mcmaster.ca/app/uploads/2020/11/Gold-Folder.pdf>

Storm Emergency Policy & Procedures

<https://secretariat.mcmaster.ca/app/uploads/Storm-Emergency-Policy.pdf>

WSIB Insurance Program for Students Participating in Unpaid Work Placements

https://healthsci.mcmaster.ca/docs/librariesprovider123/pt-clinical-education/wsib-insurance-letter-to-placement-employers.pdf?sfvrsn=ab846994_2

All forms are subject to change. Updated forms will be posted on A2L for students as changes are made.

Appendix	Page
Appendix 1 – Ontario University Physiotherapy Catchment Map	62
Appendix 2 – Ontario University Physiotherapy Catchment Cities	63
Appendix 3 – Clinical Practice I-IV Placement Checklist	64
Appendix 4 – HSPnet Site-Selector (for In-Catchment placements)	66
Appendix 5 – Out of Catchment Request Form	67
Appendix 6 – Example of Completed Out-of-Catchment Request Form	68
Appendix 7 – NOSM Learner Letter of Interest	69
Appendix 8 – Sample Confirmation Letter	70
Appendix 9 – Sample Two Page CV	71
Appendix 10 – Student Placement Profile	73
Appendix 11 – Steps to Take for Resolution of Concern with Clinical Instructor	75
Appendix 12 – Steps to Take to Assist Student Having Difficulty in the Clinical Setting	76
Appendix 13 – Safety Orientation Checklist	77
Appendix 14 – Student Directed Document Requests	79
Appendix 15 – Consultation, Resolution and Reporting Options for Violations of the Discrimination and Harassment Policy	80
Appendix 16 – Conducting Research and Course Requirements in the Home/Community Environment: Guidelines for School of Rehabilitation Science Students	81
Appendix 17 – Field Trip Approval Form	84
Appendix 18 – Student Health Certificate	87
Appendix 19 – Clinical Instructor Checklist	88

Appendix 1 – Ontario University Physiotherapy Catchment Map



Appendix 2 – Ontario University Physiotherapy Catchment Cities

Western University	McMaster University	University of Toronto	Queen’s University	University of Ottawa
Cambridge	Brantford	Ajax-Pickering	Beaverton	Alexandria
Clinton	Burlington	Barrie	Belleville	Almonte
Chatham	Dunnville	Brampton	Bowmanville	Arnprior
Goderich	Fergus	Collingwood	Brockville	Bancroft
Hanover	Fort Erie	Markham-Stouffville	Campbellford	Barry’s Bay
Kitchener	Georgetown	Mississauga	Cobourg	Carlton Place
Leamington	Guelph	Newmarket	Cornwall	Deep River
London	Hagersville	Oakville (shared)	Kingston	Haliburton
Newbury	Hamilton	Richmond Hill	Lindsay	Hawkesbury
Owen Sound	Meaford		Midland	Kanata
Petrolia	Milton	Municipalities:	Napanee	Kemptville
St. Mary’s	Niagara Falls	Don Mills	Orillia	Minden
St. Thomas	Orangeville	Downsville	Oshawa	Nepean
Sarnia	Paris	Etobicoke	Penetanguishene	Ottawa
Stratford	Port Colbourne	Scarborough	Peterborough	Pembroke
Strathroy	St. Catharine’s	Weston	Picton	Perth
Tillsonburg	Shelbourne	Willowdale	Port Hope	Renfrew
Wallaceburg	Simcoe	North York	Port Perry	Smith Falls
Waterloo	Welland		Prescott	Winchester
Warton	Oakville (shared)		Trenton	
Windsor	Barrie (some sites; shared)		Uxbridge	Quebec:
Wingham			Whitby	Gatineau
Woodstock				



MSc Physiotherapy
Clinical Practice Checklist CP I – CP IV



The below checklist is relevant for all Clinical Placement Periods (CP I – CP IV)

Pre-Placement

- Submit completed **WSIB Form** (A2L > CP (I-IV) WSIB Form assignment folder)
 - Due date will be posted on A2L prior to each placement period
- Connect with site with all **Introduction Materials** (See Clinical Education Handbook for full list of introductory materials)
- Confirm that your VSC does not expire for the duration of placement
 - If your VSC will expire before or during placement, a new VSC must be secured and submitted to the Professionalism Office
- Submit any **Planned Absence** requests at least 2 weeks in advance of clinical placement start
 - Send completed forms and supporting documentation to ptclned@mcmaster.ca and dhirj@mcmaster.ca
AND
 - Upload completed documents to the CP (I-IV) Absence Forms folder on A2L
- Complete/organize any site orientation checklists and/or training
- Request a **Letter of Good Standing** from the program (if applicable)
 - Email request to ptclned@mcmaster.ca
- Request **Proof of Insurance** from the program (if applicable)
 - Email request to ptclned@mcmaster.ca
 - *Note: these requests have a lead time of several weeks*
- Ensure you are aware of site health and safety requirements and complete any required activities

During Placement

- Complete the **CP (I-IV) Survey** (A2L > Resources > Surveys) in your *first week* of placement
- Collaboratively create a **Learning Contract** with your Clinical Instructor (CI)
 - Learning Contracts should be approved in the beginning of your *second week* of placement
- Submit any **Field Trip Forms** for review and approval (if applicable)
 - Send completed document via email to ptclned@mcmaster.ca
- Ensure you are submitting any **Unplanned Absence Forms** and supporting documentation as directed in the Clinical Education Handbook (if applicable)
 - Send completed forms and supporting documentation to ptclned@mcmaster.ca and dhirj@mcmaster.ca
 - **AND**
 - Upload completed documents to the CP (I-IV) Absence Forms folder on A2L

Evaluations

Interim Evaluations

Due Dates:

- CP I – Day 24 of placement
- CP II & CP III – Day 28 of placement
- CP IV – Day 31 of placement

- Complete and submit **Interim Self Evaluation of ACP 2.0** on HSPnet
- CI to complete and submit **Interim ACP 2.0** on HSPnet
- Complete and submit the **Interim Student Evaluation of Clinical Placement (SECP)** on HSPnet
 - *Note: CIs will not have access to review this assessment*
- CI to conduct **Interim Learning Contract** evaluation

Final Evaluations

Due Dates:

- ACP 2.0s – Last day of placement
- SECP – 3 days post placement

- Complete and submit **Final Self Evaluation of ACP 2.0** on HSPnet
- CI to complete and submit **Final ACP 2.0** on HSPnet
- Complete and submit the **Final Student Evaluation of Clinical Placement (SECP)** on HSPnet
 - *Note: CIs will have access to view your SECP once the evaluation has been submitted*
- CI to conduct **Final Learning Contract** evaluation

Post-Placement

Submit the below documents as a package on A2L in the **CP (I-IV) Documents** assignment folder.

Note: wet or electronic signatures are required. Typed names are not accepted for documents that require a signature.

Due Date: all documents must be submitted no later than 1 week following clinical placement, except for the **Learning Contract**, which must be submitted within 24 hours of placement completion.

- Completed and signed **Safety Orientation Checklist**
- Completed and signed **Learning Contract**
- Completed and signed **Clinical Experience Summary Sheet**
- Completed **CVR and NR Tracking Excel Document**
- Placement Project due to Unplanned/Planned Absence** (only to be submitted if you worked on a placement project in during days absent from site)
 - If time accounted for > 35 hours, you must submit your work to the Clinical Education Team at ptclned@mcmaster.ca for filing in your placement record

Appendix 4 – HSPnet Site Selector

Messages | Current Placements | Placement History | **Site Selector**

Search Available Placements (use "%" to search all)

Total Placements Available: 6 New Placements Since Last Login: 0

Agency/Site name contains: % Destination Contains: **Search**

Service: Mental Health - community

Zone: North City name contains:

Placement Dates: ALL Added since:

Experience: ALL Ref#:

My Saved Choices [Show Classmate Statistics](#)

Rank	Placement Site	Address	Schedule	Experience	Ref#	Action
2	Agency: Vancouver Coastal Health Authority Site: Richmond Hospital Dest: ICU	Region:	Start: Jan 1/10 End: Apr 30/10	Sports Medicine	6635	Remove
1	Agency: Provincial Health Services Authority Site: BC's Children's Hospital Dest: Rehab	Region:	Start: Jan 1/10 End: Apr 30/10		6651	Remove

Save Changes

Please note: Review the Clinical Education Handbook for the complete In-Catchment Placement Process ([Section 5.1](#)).

Appendix 5 – Out of Catchment Request Form

Please be as specific as possible regarding the type and location of the placement you are requesting, as students are required to accept an OOC placement if it meets any of the criteria listed on this form.

Unit:

Date of Placements:

Student Name:

Student email address:

Province:

City/Geographical Area: Up to 3 requests in order of preference

- If Ontario:
- | | | |
|-------------|--------------------------|----|
| U of T | <input type="checkbox"/> | 1. |
| NOSM (East) | <input type="checkbox"/> | 2. |
| NOSM (West) | <input type="checkbox"/> | 3. |
| Queen's | <input type="checkbox"/> | |
| UWO | <input type="checkbox"/> | |
| U of O | <input type="checkbox"/> | |

Placement Setting:

Up to 3 requests in order of preference

- 1.
- 2.
- 3.

Previous Experience: (include setting and area of practice)

- 1.
- 2.
- 3.
- 4.
- 5.

Special considerations (i.e. Access to car, family, accommodation, etc.):

Note any potential conflicts that may arise with the specifics of this OOC placement request (i.e.: is there a site in this city/geographical area that you have previously worked at?):

I, _____ understand that if an Out of Catchment Coordinator offers me a placement in accordance with my requests stated above, I will have to accept the placement. I have read and comprehended the Out-of-Catchment guidelines listed on page 1 of this document. I will declare any conflicts of interest as soon as they are known.

Student Signature: _____

Date: _____

Appendix 6 – Example of Completed Out of Catchment Request Form

Please be as specific as possible regarding the type and location of the placement you are requesting, as students are required to accept an OOC placement if it meets any of the criteria listed on this form.

Unit: 4

Date of Placements: November 3 – December 12, 2014

Student Name: Jane Doe **Student email address:** jdoe@mcmaster.ca

Province: British Columbia

City/Geographical Area: Up to 3 requests in order of preference

If Ontario: U of T
 NOSM (East)
 NOSM (West)
 Queen’s
 UWO
 U of O

1. Vancouver

2. Kelowna

3. Victoria

Placement Setting:

Up to 3 requests in order of preference

Previous Experience: (include setting and area of practice)

1. Hospital

1. Hospital – ICU

2. Community

2. Community – Private Practice

3.

3. Rehab – In-patient Stroke

4. NA

5. NA

Special considerations (i.e. Access to car, family, accommodation, etc.):

I am originally from BC and have access to accommodation and a car while there.

Note any potential conflicts that may arise with the specifics of this OOC placement request (i.e.: is there a site in this city/geographical area that you have previously worked at?):

None.

I, Jane Doe, understand that if an Out of Catchment Coordinator offers me a placement in accordance with my requests stated above, I will have to accept the placement. I have read and comprehended the Out-of-Catchment guidelines listed on page 1 of this document. I will declare any conflicts of interest as soon as they are known.

Student Signature:

Date: September 3 2023



Northern Ontario
School of Medicine
École de médecine
du Nord de l'Ontario
ᑭᓄᓄᓄᓄᓄ ᑭᓄᓄᓄᓄᓄᓄ
L'ᓄᓄᓄᓄ ᑭᓄᓄᓄᓄᓄᓄ

Northern Ontario School of Medicine (NOSM) Placement Learner Letter of Interest

If you are interested in a placement in Northern Ontario through NOSM, please complete this form and return it to the person responsible for coordinating fieldwork placements in your program.

Your Name:	
Hometown:	

Current University:	
Current Program:	
Current Year of Study:	

Why are you interested in completing a placement in Northern Ontario? Please be detailed in your response but keep it to no more than 500 words.



CP I - IV Physiotherapy Placement Introduction Letter

Please use this template for your Introduction Placement Letter for each placement period. Please add information appropriately for your specific placement and experience. At minimum, ALL the information in this letter MUST be included in your introduction. You may add details as needed, but content from this email should NOT be removed.

Name
Address

Date

Attention: X
Your Community Resource Inc.
Anywhere, Canada L0R 1M1

Dear X,

I am writing this letter to confirm my X week clinical placement at your facility which begins on <insert start date> and ends on <insert end date>.

This will be my X <insert placement number> full clinical placement. My previous clinical placements have involved treating <insert general settings for other clinical placements>.

I understand that my placement at your facility will be in the <insert unit/ward>. I have covered <insert academic content> in the Physiotherapy curriculum and feel academically prepared for the placement. If you feel there are any specific texts or references which would be beneficial during the placement, I would be grateful if you could send me the references.

I would greatly appreciate if you could please confirm the time and location of our meeting on the first day. Additionally, could you describe your dress code, my hours of work, parking costs, and any other details I should be aware of prior to coming on the first day?

Prior to the start of placement I will review the standards related to Consent, Privacy and Code of Ethics on the College of Physiotherapists of Ontario website. In addition, I will have also completed and reviewed resources on infection prevention and control that have been outlined within a pre-placement checklist from the MSc(PT) program.

On my first day of placement I will provide you with proof of my immunization status, vulnerable sector screen, CPR and mask fit testing. Should you require this information sooner, I would be happy to provide this to you. My vulnerable sector screen was issued on <insert issue date>, and is considered valid by McMaster University for 1 year from the date of issue. My mask fit testing was completed on <insert completion date>. My CPR was completed on <insert completion date>. Should your facility require me to update any of these, please let me know and I can look into doing so.

If there are other details I need to know prior to arrival, please feel free to contact me at the information below.

I look forward to meeting on <insert first day of placement>.

Sincerely,

Name
Physiotherapy Class of XX
Telephone Contact
[McMaster email contact](#)

This is a SAMPLE ONLY. Please revise appropriately for your own needs.

John Smith, BA, PT Student
smithj@mcmaster.ca
3344 Winding Way Hamilton, ON N0G 1B5

Education

Master of Science (Physiotherapy) McMaster University	Present
Bachelor of Arts (Honours) McMaster University	Sept 2017 - May 2021

Clinical Placements

Private Physiotherapy, Guelph, Ontario	Jan 6 – February 14, 2022
--	---------------------------

- At this 6-week clinical placement I was responsible for assessing and treating clients with orthopaedic conditions under the supervision of my clinical instructor. I presented an in-service on the role of physiotherapy in the management of complex pain. I also administered the Patient Specific Functional Scale (PSFS), Timed Up and Go (TUG) and other outcome measures routinely.

Qualifications / Certifications

CPR Level C	Sept 2020
National Lifeguard Service (NLS)	June 2018

Publications

Smith, J., Brown, S., Web, C. (2018). Something about art. *Journal of Publications*. 13(1): 132-134

Poster Presentations

Smith, J., Brown, S., Web, C. (2019). The student volunteer. *Canadian Student Conference*. Halifax, NS. June 2013

Presentations

Brown, C., Green, V., Yellow, S., **Smith, J.** (2018). Engaging high school students in experiential learning. *New Conference*. Toronto, Ontario, 2014

Employment

Lifeguard David Braley Athletic and Recreation Centre McMaster University	Sept 2016 - Present
---	---------------------

Camp Counsellor Spring & Summer Camp Somewhere, Ontario	June – Aug 2013, 2014, 2015
---	-----------------------------

Volunteer Experiences

Student Walk Assistance Team (SWAT)
McMaster University

Sept 2018 – May 2020

Shinerama Coordinator
McMaster University

Sept – Dec 2018, 2019



Physiotherapy Student Placement Profile

STUDENT NAME:

STUDENT EMAIL:

PLACEMENT UNIT:

PLACEMENT DATES:

My previous clinical experiences include:

Type of Facility	Area of Clinical Practice/ Content Area	No. of Weeks
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Other experiences I have that may relate to this placement include:

My main goals for this clinical experience are:

I intend to achieve these goals by:

My clinical, interpersonal and professional strengths are:

The clinical and professional skills I would like to improve on during this placement are:

SUPERVISION AND LEARNING

I prefer meetings with my Clinical Instructor(s):

- 2-3x daily
- Once daily
- Weekly
- Scheduled as needed
- Impromptu

I prefer to receive feedback:

- Several times near the start and infrequently after that
- Fairly frequent until you have made substantial progress in mastery, then infrequently
- Frequently, even after you seem to have mastered the skill

I learn best:

- Reading
- Observing
- Discussion
- Hands on
- Other (please explain):

When learning something new, I prefer:

- To find the rationale for it first, understand the whole process and then start work on practical specifics
- To learn theory after you have gotten your 'feet wet' on specifics

For new tasks, I prefer to be supervised:

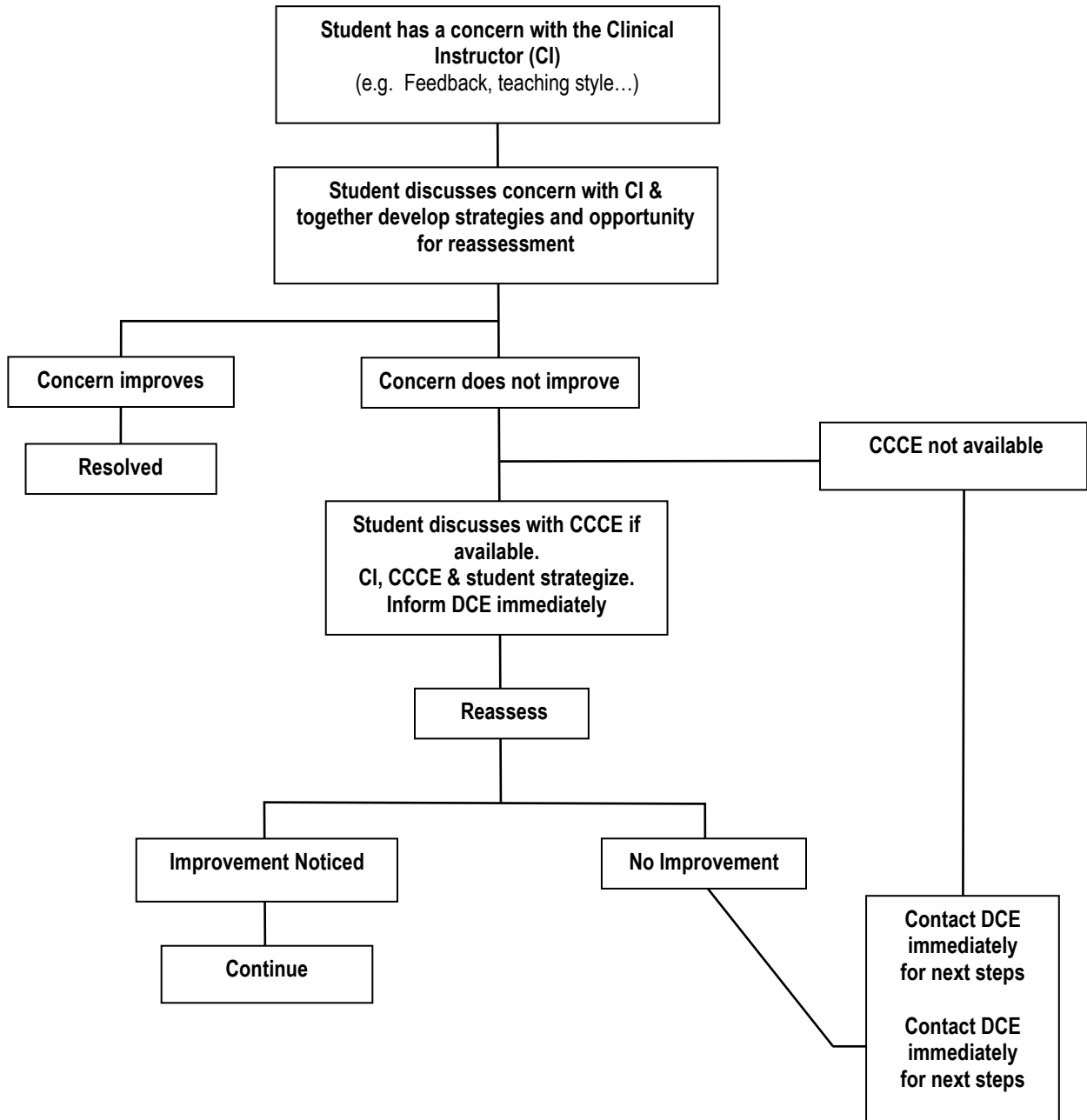
- Direct supervision and discussion during technique
- Direct supervision during technique with discussion before and/or after
- Distant supervision during technique with discussion before and/or after
- Discussion before and after with no direct supervision

I prefer:

- Immediate feedback
- Delayed feedback

****Note for Students and Clinical Instructors:** This form is intended for information sharing purposes only. It is not meant to be prescriptive, but a means to start discussion at the beginning of a placement for how supervision and feedback will take place over six weeks. Other factors that should also be part of the discussion are facility-specific considerations and Clinical Instructor preferences.

Appendix 11 – Steps to Take for Resolution of Concern with Clinical Instructor

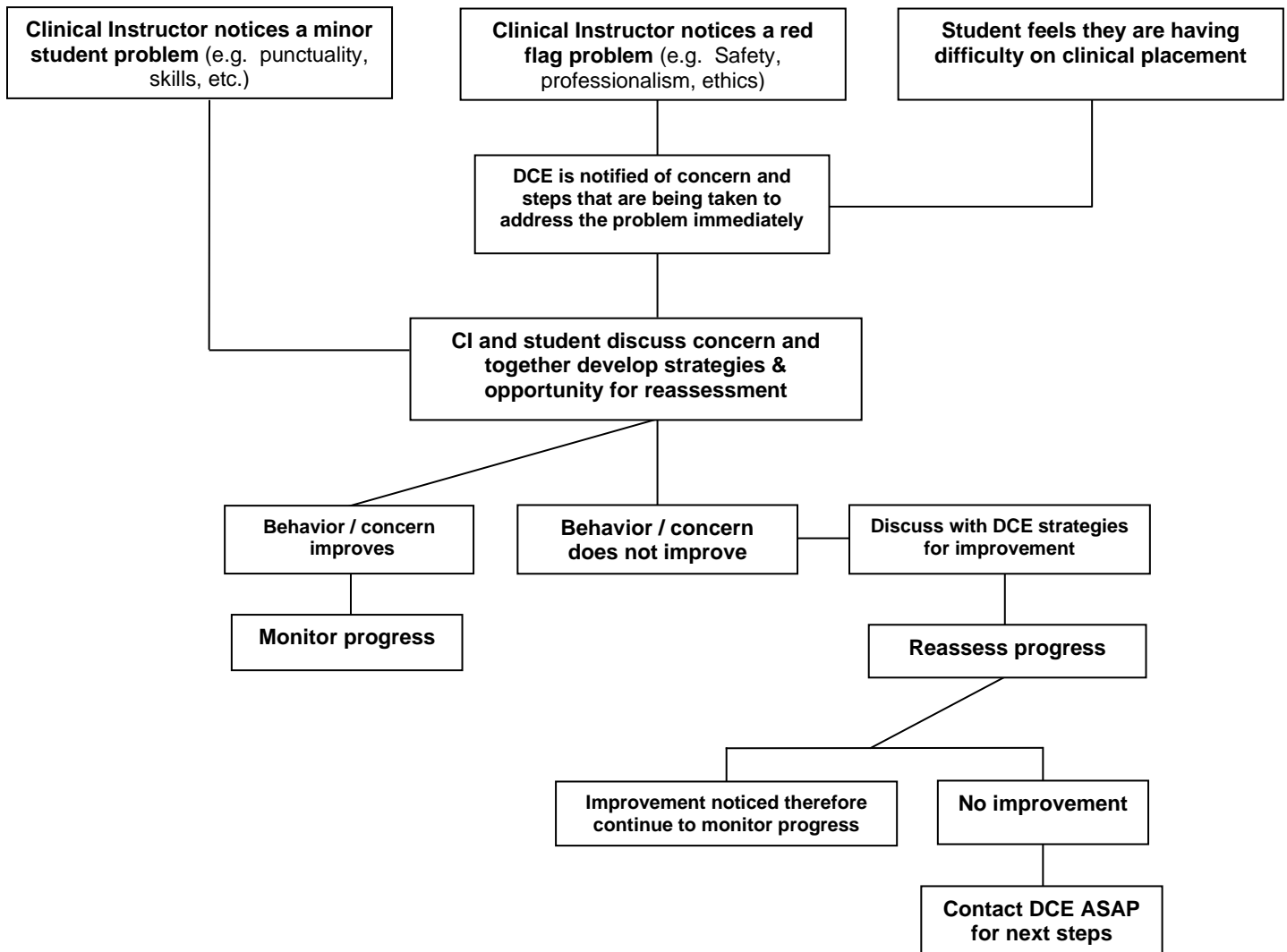


NOTE: If an instance arises where the student feels unable to remain at the clinical site due to a concern, the student must contact the DCE or designate prior to leaving.

Legend
 CI: Clinical Instructor
 CCCE: Centre Coordinator of Clinical Education
 DCE: Director of Clinical Education

Revised and reprinted with permission from Brenda Mori, Dept. of PT, Faculty of Medicine, U of T

Appendix 12 – Steps to Take to Assist Student Having Difficulty in the Clinical Setting



Legend

CI: Clinical Instructor
 CCCE: Centre Coordinator of Clinical Education
 DCE: Director of Clinical Education

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SAFETY ORIENTATION CHECKLIST

Placement Employer: This checklist may be used to document health and safety orientation provided to a student(s) prior to exposure to any hazards in your workplace. This checklist, or another format documenting orientation, must be returned to the McMaster University placement coordinator.

Student Name:	
Organization Name:	
COMPLETE DURING ORIENTATION	<input checked="" type="checkbox"/>
Name and contact information for immediate supervisor and Joint Health and Safety Committee representative (JHSC) or Safety Representative	<input type="checkbox"/>
Worker/supervisor rights and responsibilities	<input type="checkbox"/>
Safe work procedures and operation of equipment	<input type="checkbox"/>
Use of Personal Protective Equipment (PPE)	<input type="checkbox"/>
Identification of restricted or prohibited areas, tools, equipment and machinery	<input type="checkbox"/>
Hazards in the workplace that may affect the student, how they're controlled and how to deal with them	<input type="checkbox"/>
What to do and who to see if the student has a safety concern	<input type="checkbox"/>
What to do when there is a fire or other emergency (e.g. evacuation procedures)	<input type="checkbox"/>
Location of fire exits and fire extinguishers	<input type="checkbox"/>
Location of the first aid supplies, equipment, facilities: - Names of staff responsible for first aid - How to record first aid treatment	<input type="checkbox"/>
Procedures for reporting accidents and injuries	<input type="checkbox"/>
Workplace Hazardous Materials Information System (WHMIS)	<input type="checkbox"/>
Workplace policies and procedures on, but not limited to: - Workplace Harassment - Violence prevention - Working in isolation - Smoking/Drinking/Substance abuse	<input type="checkbox"/>
Location of other important information - Materials Safety Data Sheet (MSDS) - Joint Health & Safety Committee Minutes - Instructions for safe operation of each piece of equipment (if applicable) - Important telephone numbers - Health & safety bulletin board	<input type="checkbox"/>
Are you familiar with COVID-19 protocols at your placement employer site	<input type="checkbox"/>
- Other hazards covered during orientation should be documented and attached on an additional sheet - One Checklist may be used to document group student orientation sessions, however an additional sign-in sheet including student names and signatures must be attached to the Checklist.	<input type="checkbox"/>

Supervisor Name:	Date: Checkbox Certification Required: <input type="checkbox"/> By clicking this box, I certify that this represents my signature and my affirmation that I endorse this documentation.
Student Name:	Date: Checkbox Certification Required: <input type="checkbox"/> By clicking this box, I certify that this represents my signature and my affirmation that I endorse this documentation.



STUDENT DIRECTED DOCUMENT REQUESTS

While in the program, students may require supporting documentation (*i.e.*, personal use, clinical education courses, etc.). To assist students in identifying where each document can be located, the Program has provided students with the list below. The program recommends that students attend to these emails, as soon as possible, to prevent any delay.

Please refer to the **PT Program Requirements** document located on Avenue to Learn (A2L) for additional information about program requirements.

Supporting Documentation	Why you need it	How to Obtain
Letter of Good Standing (LOGS)	Confirmation of enrolment in program for student loans and/or clinical placement.	Students must contact the Clinical Education Assistant (ptclned@mcmaster.ca) to obtain this letter.
Certificate of Clinical Clearance (Health Screen)	Faculty of Health Science requirement. May be required to start clinical placement.	Students must contact the Clinical Education Assistant (ptclned@mcmaster.ca) to obtain this certificate.
Letter of Policy Check / VSC Verification	Faculty of Health Sciences requirement. May be required to start clinical placement, as well as Clinical Laboratories class.	Students must contact the FHS Professionalism Office (fhsprof@mcmaster.ca) to specifically request this document.
Mask Fit	May be required to start clinical placement.	Students have original Mask Fit card.
CPR Level 'C' or HCP certificate	May be required for clinical placement, as well as Clinical Laboratories class.	Students have original CPR certificate.
Health and Safety Requirements	Program requirement and may be required for clinical placement.	This is a self-generated document through Mosaic and/or Avenue to Learn. See <i>Confirmation of Health and Safety Training_How To Guide</i> posted on A2L.
TB Testing	Faculty of Health Science requirement. May be required for clinical placement.	https://fhs.mcmaster.ca/healthscreening/documents/Tuberculosis.pdf
Program Identification Badge	Required to be worn for Anatomy Lab, Clinical Laboratories class and clinical placement.	This ID card is provided to students when they enter the program. If lost or stolen, contact the Program Coordinator (ptprog@mcmaster.ca) to have it replaced. The cost for replacement is \$50.00.

Appendix 15 – Consultation, Resolution and Reporting Options for Violations of the Discrimination and Harassment Policy

Consultation, Resolution and Reporting Options for Violations of the Discrimination and Harassment Policy*

Version Date: Nov. 12, 2021

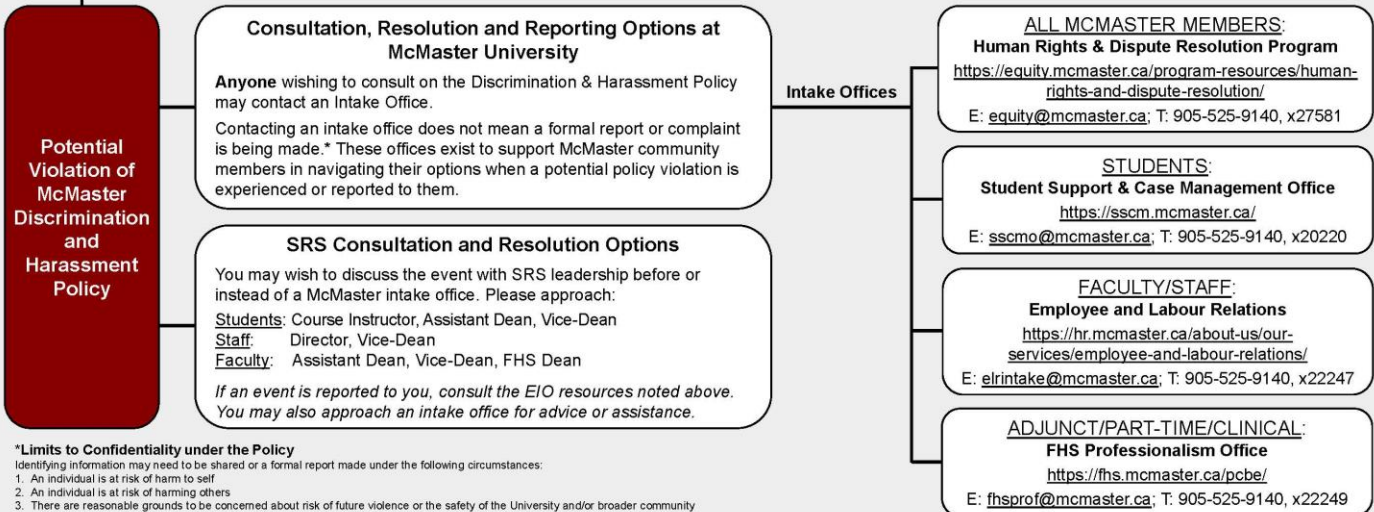
School of Rehabilitation Science, McMaster University *<https://secretariat.mcmaster.ca/app/uploads/Discrimination-and-Harassment-Policy.pdf>

All McMaster Community Members are responsible for contributing to an environment that is free of Discrimination and Harassment. This guide is intended to provide at-a-glance guidance on options available for consultation, reporting and resolution for McMaster members who experience a potential violation, or to whom a potential violation is reported.

McMaster's Equity and Inclusion Office (EIO) has created the following resources to inform you of your options. Please review:

BLUE FOLDER (Discrimination & Harassment Policy): <https://equity.mcmaster.ca/app/uploads/2021/03/Blue-Folder-McMasters-Discrimination-Harassment-Policy.pdf>

GOLD FOLDER: (Sexual Violence Prevention and Response Office (SVPRO)); <https://svpro.mcmaster.ca/app/uploads/2020/11/Gold-Folder.pdf>



***Limits to Confidentiality under the Policy**

Identifying information may need to be shared or a formal report made under the following circumstances:

1. An individual is at risk of harm to self
2. An individual is at risk of harming others
3. There are reasonable grounds to be concerned about risk of future violence or the safety of the University and/or broader community
4. Disclosure is required by law
5. To comply with the reporting requirements of regulatory bodies and/or professional licensing bodies.

CONDUCTING RESEARCH AND COURSE REQUIREMENTS IN THE HOME/COMMUNITY ENVIRONMENT: GUIDELINES FOR SCHOOL OF REHABILITATION SCIENCE STUDENTS

Approved Rehabilitation Science Curriculum Committee February 7, 2007

Revision July 22, 2011 (OT and PT Programs)

Glossary:

Community members - individuals or organizations within the community

Department - School of Rehabilitation Science (SRS)

McMaster University is committed to providing and maintaining healthy and safe conditions and practices for all graduate students. This is achieved by meeting or exceeding the standards to comply with the legislative requirements as contained in the Ontario Occupational Health and Safety Act. Students should familiarize themselves with the Ontario Occupational Health and Safety Act and Regulations, work in compliance with statutory requirements and prescribed safe work procedures, and report any unsafe work conditions to their supervisors.

Purpose

The purpose of this document is to provide guidelines to SRS graduate students to ensure their safety as far as reasonably possible with regards to risks associated when conducting research or completing course requirements in the home or community environment. In the vast majority of cases, these will be safe. These guidelines have been developed in order to help assure the safety of students.

Before the Visit:

- When scheduling your visit:
 - Remember that the individual may feel vulnerable inviting someone they don't know into their home
 - Some telephones have call display, which displays the caller's phone number to the person being telephoned. If not using a telephone within the SRS, use the "call blocking" on your telephone by dialing * 67 prior to dialing a telephone number. You should do this for every call you make from your personal telephone. There is no charge for using * 67.
 - Ask that pets be restrained or kept out of the room during the visit.
 - If being in an environment where someone is smoking is a concern, ask that they not smoke during the visit, or if you can conduct the visit at another location (if possible).
- The student should plan his or her route the location using main routes, avoiding isolated shortcuts. Students should obtain directions beforehand, and can confirm the directions with the community member/participant.
- **If you are conducting the visit alone**, you should provide the supervisor/designate with the list of people you intend to visit, including the following:
 - Name
 - Address
 - Telephone number of the person being visited

- Date and time of the visit, including anticipated time of completion
- If driving to the visit:
 - Ensure your vehicle is in good condition, check your tires on a regular basis and ensure that you have at least a half tank of gas.
 - Be aware of the daily weather and road conditions. If necessary, during poor conditions, appointments should be rescheduled for another time when conditions are more favorable.
 - Keep your personal belongings (e.g. your wallet) locked in the trunk of your car and try to take few personal items to the participant's home.
 - If you are lost, telephone the participant for directions and/or seek assistance.
- Dress conservatively and only bring necessary items to the visit. Religious symbols and jewelry should be worn discreetly. Wear a good pair of walking shoes or winter boots.
- Make sure that you have your cell phone in your pocket in case you need to use it in an emergency.

Upon arrival:

- Park your vehicle on the street, where it is easily accessible, and be attentive of your surroundings.
- If an animal is outside the home and you feel uncomfortable, call the person you are meeting and ask that the animal be restrained.
- Exercise caution in hallways, stairwells and elevators. If you are uncomfortable about any other passengers traveling the elevator wait for the next elevator. Stand near the control panel, and if you feel uncomfortable, push the button for the next floor or press the alarm.
- Be clear to explain the purpose of your visit, and obtain permissions from the person to enter their home.

During the Visit:

- Make a quick sweep with your eyes to assess for any obstacles and escape routes, in the event you have to leave in a hurry (e.g. a fire).
- Leave your shoes on during the visit. In winter, you may choose to bring a pair of indoor shoes.
- Let the client lead you into the house/apartment or through corridors/stairs.
- Think about where you choose to sit. For instance, sit where you have a good view of the surroundings and on a firm, accessible chair.
- If they ask you to do something that you are not comfortable with (e.g. transfer in/out of a wheelchair), politely say no. Please consider the physical safety of yourself and of them.

Reasons to leave the participant's home:

- If upon arrival, you feel unsafe and uncomfortable.
- If the participant is inappropriately dressed and upon your request refuses to dress appropriately.

- If the participant appears intoxicated or under the influence of drugs.
- If other individuals pose a threat.
- If the participant becomes aggressive, threatening or abusive, remain calm during the visit, be supportive and direct but do not ignore the individual.

Leave immediately always facing the participant. Drive away in your vehicle and inform your supervisor/course coordinator.

After the visit:

- Leave the vicinity, and choose another locale if you wish to discuss/review your assessment.
- Do not sit in your vehicle and go over the results of the assessment.
- **If you completed the visit by yourself**, call and /or email your friend/housemate upon completion of the home visit to notify him/her that you are safe. The particular plan for notification should be clearly agreed upon between you and your friend/housemate.

Students must read and adhere to the guidelines discussed above and must contact their supervisor/course coordinator if they encounter any difficulties during the home visit.

Field Trip/Student Placement/Research Activity Approval Form

Complete all information on this form and attach risk assessment for approval process

Name:
Department:
Submitted By:

Email address:
Dates of Trip:
Location of Activity:

Description of Activity: _____

Please select type of activity (*see definitions for clarity):

- Field Trip (follow the procedural guidelines as outlined in Section 6)
- Student Placement (follow the procedural guidelines as outlined in Section 6)
- Research Activity (follow the procedural guidelines as outlined in Section 6)

Risks: check as many as may apply *see definitions if needed

- Low Risk**
- Significant Risk**
- Extreme Risk**
- Travel Risk
- Health Insurance Risk
- Health Risk

Approval by Supervisor:

Name: _____ Signature: _____ Date: ___/___/___

Approved by Department Chair/Director:

Name: _____ Signature: _____ Date: ___/___/___

All fields with exception of EOHSS and Senior Management signatures must be completed before submitting

Approved by EOHSS:

Name: _____ Signature: _____ Date: ___/___/___

Approval of Senior Management:

Name: _____ Signature: _____ Date: ___/___/___

Field Trip Statement of Responsibilities Checklist

Name: _____

I have completed, signed, and attached with risk assessment, the **Participant Waiver Agreement** <http://www.mcmaster.ca/ols/>, as appropriate, and **Declaration of Health Status** forms.

I have reviewed the need for additional **Travel Insurance** to cover me for the entire duration of my Field Practicum while off-campus and have purchased such additional **Travel Insurance** if required. I confirm that the coverage provided is appropriate to my health, habits and lifestyle, including but not limited to pre-existing illnesses, substance use (alcohol, drugs, etc.), extreme sports, and repatriation (in case of death). *I understand that Travel Insurance is necessary as my Health Insurance Policy may not cover out-of-province OR out-of-country travel.*

I have reviewed the need for additional **Health Insurance**, and purchased if appropriate, to cover me for the entire duration of my travel while off-campus. I ensure you that coverage provided is appropriate to my health, habits and life style, including but not limited to pre-existing illnesses, substance use (alcohol, drugs, etc.), extreme sports.

I have purchased **Supplemental Health Insurance** in the case that my primary health insurance policy does not satisfy all requirements to provide coverage appropriate to my health, habits and life style, including but not limited to pre-existing illnesses, substance use (alcohol, drugs, etc.), and extreme sports.

I have researched, reviewed and comply with all the pertinent legislation and McMaster RMMs related to my activities. This includes any licenses, required training, registrations required for my work

I have researched and complied with the required vaccinations and immunizations required for the location as prescribed by my travel Physician

I have read and understand the information in *before you go...* posted at: <https://iss.mcmaster.ca/international-programs/about-going-abroad/before-you-go/living-abroad.html>

I hold a passport that will remain valid for at least **6 months** after my scheduled return to Canada.

I have completed, or am in the process of completing, a **Visa application** through my host country's consulate if stated as a requirement by my host country to study abroad. I understand the rights awarded to me through this Visa, such as the approved duration of stay and any permissions to obtain work.

(For Canadians only) I have registered with **Global Affairs Canada website** as a **Canadian traveling abroad** <http://travel.gc.ca/travelling/registration>.

I have a plan to follow in case of an emergency or health incident while travelling.

I am a Graduate Student and have completed the appropriate travel form for off campus activity and submitted to Graduate Studies.

I have submitted a copy of my itinerary to my Department

Please acknowledge you have reviewed the information in each of the check boxes by answering with a yes, no or not applicable beside each box.

Declaration of Health Status

I understand that participation in this field trip or elective may involve strenuous effort and or foreign travel. In either case, my health may be affected by activity levels to which I am not accustomed or by exposure to endemic disease in foreign locations. I accept personal responsibility for securing the advice of a health practitioner (preferably a family physician) prior to participating in this field trip and for obtaining the inoculations that are required by the country of destination or by Canadian authorities.

I recognize that some pre-existing medical conditions, while not a serious health threat when medical services are readily available, may be life threatening in remote locations. I take full personal responsibility for my known pre-existing medical conditions. For conditions that I choose to reveal, I will make personal arrangements with another field trip participant so that symptoms of distress can be recognized. For conditions that I choose not to reveal, I take full personal responsibility.

I have been made aware of the risks involved in this field trip or elective placement and have evaluated the need for a physical check-up and /or prophylactic measures.

I hereby declare that I am medically fit to engage in this field trip/elective.

Date of trip: ____/____/____ **Destination country(s):** _____

Trip Supervisor (name): _____

Name of Participant (please print): _____

Address: _____

Phone: (____) - _____

Signature: _____ **Witness:** _____

Date: ____/____/____



**McMaster University
STUDENT HEALTH CERTIFICATE**

STUDENT #: _____

I. TO BE COMPLETED BY STUDENT:

I, _____, hereby authorize this health practitioner to provide the following information to McMaster University relating to my petition for special consideration. I understand that the decision on my petition will be made by the Associate Dean's Office in my Faculty of registration.

STUDENT SIGNATURE DATE

II. TO BE COMPLETED BY HEALTH PRACTITIONER: (Please check applicable categories and indicate the applicable start and end dates)

<input checked="" type="checkbox"/>	Degree of Incapacitation	Start date	End date
<input type="checkbox"/>	Severe Completely incapacitated in relation to functioning at any academic level (e.g., completely restricted mobility, unable to attend any classes or write any tests/examinations)		
<input type="checkbox"/>	Serious Unable to fulfill academic obligations with significant impact on performance (e.g., unable to attend classes, unable to write a test/examination)		
<input type="checkbox"/>	Moderate Able to fulfill some academic obligations but performance will be considerably affected (e.g., able to attend some classes, unable to concentrate for long periods, assignments may be late, may perform poorly on tests/examinations)		
<input type="checkbox"/>	Slight Able to fulfill academic obligations, but performance will likely be sub-optimal (e.g., able to attend classes, able to read)		
<input type="checkbox"/>	Negligible Unlikely to have any significant effect on ability to fulfill academic obligations		
<input type="checkbox"/>	This is a chronic condition		
<input type="checkbox"/>	Patient has fully recovered from illness at this time		

III. HEALTH PRACTITIONER COMMENTS: (Please complete the following)

The degree of incapacitation is based on an examination performed on _____ (date).

Comments:

IV. VERIFICATION BY THE LICENSED/REGISTERED HEALTH PRACTITIONER:

NAME (Please print)	ADDRESS (stamp, business card or letterhead acceptable)
REGISTRATION NO.	TELEPHONE NUMBER
DATE	SIGNATURE

PLEASE RETAIN COPY FOR THE PATIENT'S CHART

NOTE: Any cost for completing this certificate must be paid by the patient

The student must submit the original Student Health Certificate to the Associate Dean's Office of the Faculty in which the student is registered, normally within five (5) business days of the missed work

The information gathered on this form is collected under the authority of *The McMaster University Act, 1976*. The information is used for the academic, administrative, and statistical purposes of the University including, but not limited to, maintaining records, academic counseling and the administration of examinations. Personal student information provided on this form will not be used for any unrelated purpose without the consent of the student. This information is protected and is being collected pursuant to section 39 (2) and section 42 of the *Freedom of Information and Protection of Privacy Act of Ontario (RSO 1990)*. Questions regarding the collection or use of this personal information should be directed to the Associate Dean's Office of the Faculty in which the student is registered.



MSc Physiotherapy
Clinical Practice Checklist CP I – CP IV



The below checklist is relevant for all Clinical Placement Periods (CP I – CP IV)

Pre-Placement

- Student(s) will send an introductory email with information about previous placement experience, student's learning style, and requests for pre-placement information
 - Confirm exact start and end dates of placement
- Inform student(s) of any health and safety requirements or required activities that must be complete prior to placement at your clinical site (if applicable)
- Inform student(s) of any resources / skills that should be reviewed prior to placement
- Review any resources related to practice hours tracking and evaluations. Modules and resources available on [Clinical Partners page](#) of McMaster Physiotherapy website
- Sign and return the WSIB Agreement and Affiliation Agreement *if requested by the [Clinical Education Assistant](#)*

During Placement

- Review components of **Safety Orientation Checklist** (to be provided by student) and sign form once complete
- Discuss a placement related project that will be completed while the student is on placement (i.e. educational in-service, development of educational materials, article review, etc.)
- Discuss a plan and timing for evaluations to take place. Request any changes to evaluation deadlines from the Clinical Education Assistant.
- Discuss a communication plan to provide and receive feedback
- Connect with the DCE/Clinical Education Team with concerns regarding student performance
- Collaboratively create a **Learning Contract** with student
 - Learning Contracts should be approved by CI in the beginning of *second week* of placement

Evaluations

Interim Evaluations

Due Dates:

- CP I: approx. **Day 24** of placement
 - CP II & CP III: approx. **Day 28** of placement
 - CP IV: approx. **Day 31** of placement
-
- Complete and submit **Interim ACP 2.0** on HSPnet
 - Conduct **Interim Learning Contract** evaluation
 - Connect with the DCE/Clinical Education Team with concerns regarding student performance

Final Evaluations

Due Dates:

- CP I - IV – Last day of placement

- Complete and submit **Final ACP 2.0** on HSPnet
- Conduct **Final Learning Contract** evaluation
- Review student tracking excel and sign **Clinical Experience Summary Sheet** (to be provided by student)
- Review **Final Student Evaluation of Clinical Placement (SECP)** on HSPnet
 - This will be available for 14 days after the student submits

Note: *Wet or electronic signatures are required. Typed names are not accepted for documents that require a signature.*