

**DUQUESNE UNIVERSITY
DEPARTMENT OF PHYSICAL THERAPY
PROFESSIONAL BEHAVIOR**

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SECTION 1: PROFESSIONAL BEHAVIOR EXPECTATIONS

The faculty of the Duquesne University Department of Physical Therapy expect students accepted into the professional phase of the program to behave in accordance with the standards of the profession. Using the American Physical Therapy Association documents *Core Values in Professionalism*¹, and the *Code of Ethics for the Physical Therapist*², the department has determined six *essential behaviors* required for successful completion of the Doctor of Physical Therapy degree. These behaviors are: integrity, respect, responsibility, competence, maturity, and communication.

American Physical Therapy Association, Board of Directors. *Professionalism in Physical Therapy: Core Values*, 2003.

² American Physical Therapy Association, Ethics and Judicial Committee: 1981, 2002, 2010.

Each student is expected to demonstrate appropriate professional behavior during all learning activities, including classroom, laboratory, experiential, group, community and clinical experiences. The following behaviors are expected in the academic setting:

- 1) Attend and participate in all scheduled learning activities at the scheduled times. Students who are unable to attend class due to personal illness or emergency are required to notify the course faculty prior to the scheduled class time. If personal illness repetitively interferes with attendance, the faculty may discuss the possibility of the student taking a medical leave of absence. Details related to a medical leave of absence are described in the Rangos School of Health Sciences (RSHS) Handbook.

Excused absences will be limited to three (3) days unless permission is received by the Department Chair. Please note the University recognizes bereavement for death to include people of your immediate family (defined as spouse, parents, son, daughter, brother, sister, mother-in-law, father-in-law, brother-in-law, sister-in-law, son-in-law, daughter-in-law, grandchild or grandparent).

- 2) Optimal use of time during learning experiences. Students are expected to complete readings and assignments according to assigned dates/times in order to be prepared for learning experiences. Active participation is expected and students are to engage in fair and collegial group activities. Classroom/laboratory participation cannot be achieved if students leave the room during learning activities. Therefore, students are only permitted to leave the room with the permission of the instructor or when the instructor 'breaks' the class.
- 3) Recognize learning problems and seek faculty guidance. Students are expected to recognize learning difficulties and ask the course faculty for guidance. Students should develop a plan of learning that may include additional learning strategies, tutorial assistance, and use of University and external resources.
- 4) Integrity. Academic dishonesty will not be tolerated in any form and under any circumstance. Issues of academic improprieties will be addressed according to the guidelines outlined in the RSHS Student Handbook.
- 5) Professional Attire. Students are expected to portray the appearance of a responsible health care professional. Classroom guidelines include that clothing must be worn that does not expose the abdomen, chest, or buttocks. Hats and clothing with unprofessional wording or pictures are prohibited.

In the laboratory portion of some courses, students will be required to wear clothing that permits the exposure of portions of the body as appropriate for the practice of clinical skills. Professional dress is required for activities that include guest speakers or patients and learning activities external to the University. Professional dress includes: (men) dress pants and shirt, dress shoes; (women) dress pants or skirts, tailored tops, dress shoes. Tattoos and body piercings must be concealed. Long hair must be tied back for learning experiences that involve patients. Duquesne University Student Physical Therapist name tags are required for all external learning experiences.

Our goal is to foster students' progress in their professional development as they enter and proceed through the professional phase of the curriculum and move on to clinical practice. We expect that all students will be successful in all parts of their education, including academic, behavioral, and clinical. Just as there are standards and protocols established for students who require remediation for academic issues, we have established a similar process for professional behavior. The following procedure outlines the identification of a professional behavior issue, a plan for remediation, and the process leading to further action.

SECTION 2: PROFESSIONAL BEHAVIOR POLICY

If an academic or clinical faculty member identifies and documents a problem with a student's professional behavior or inability to maintain a standard within the realm of acceptable professional behavior, the student will be placed on the Professional Behavior Policy (PBP). The PBP has three steps:

Step 1

The faculty member will meet with the student to identify the behavior and counsel the student to demonstrate behavior consistent with the professional standard.

Step 2

If the faculty determines the student has a recurrence of an unprofessional behavior prior to the completion of their professional program, both the student and faculty member will meet with the *Professional Behavior Committee* to determine a remediation plan and contract for the student.

The remediation plan and contract will include the following items:

- Description of the specific behaviors that the student is expected to demonstrate.
- Specific tasks that the student is expected to accomplish.
- Time frames related to accomplishing the tasks and behaviors.
- Repercussions for unsuccessful remediation or inability to meet the terms of the contract.
- Faculty responsible for monitoring the terms of the contract.
- Explanation of how the terms of the contract will be monitored.

Step 3

Should, while a student is on Step 2 of the PBP, s/he again exhibits unacceptable professional behavior or fails to maintain a standard within the realm of acceptable professional behavior, or demonstrates behavior that is considered reprehensible (even if a '1st offense'), one of the following repercussions will be instituted:

Immediate dismissal

Examples for this action include but are not limited to: felony conviction; pleading no contest for behaviors that would prohibit the granting of a physical therapy license; behaviors that jeopardize the welfare of the patients they will care for or other behaviors that are determined to be non-remediable.

Dismissal

Examples for this action include but are not limited to behaviors the committee has determined are remediable however the student has been unable or unwilling to remediate as defined in the remediation plan contract.

Probation

Examples for this action include but are not limited to behaviors that the committee has determined are remediable. The terms of the probation and remediation will be outlined in a subsequent contract.

Appeal Process

Should a student be dismissed from the Physical Therapy Program for a violation of the Professional Behavior Policy, s/he may appeal this decision to the Rangos School Professional Behavior Committee using the appeal form found in the RSHS Handbook.

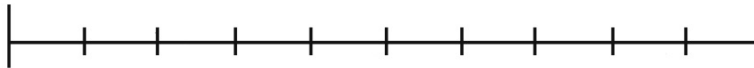
SECTION 3: PROFESSIONAL BEHAVIOR CONTINUUM

The *Professional Behavior Continuum* is a self-reflective tool for students to use to evaluate their professional behavior during their progression through the professional phase of the physical therapy program. Students are encouraged to meet with their advisors to review their progress and to seek guidance as needed.

1. Integrity:

Lacks honesty
Lacks personal responsibility
Lacks self-reflection

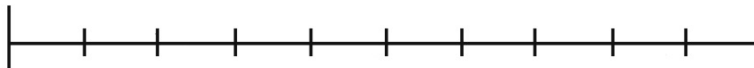
Always honest
Accepts responsibility for actions
Exceptional self-reflection



2. Respect:

Lacks respect for confidentiality/
professional boundaries
Does not resolve conflict in respectful/collegial way
Does not respect others' opinions/values
Does not respect diversity

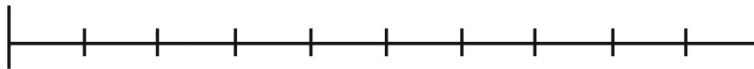
Respects confidentiality/
professional boundaries
Resolves conflict in respectful/collegial way
Respects others' opinions/values
Respects diversity



3. Responsibility

Is not present/punctual for learning experiences
Does not cope w/challenge/conflict/ uncertainty
Does not recognize limits/ seeks help
Does not recognize others' needs
Does not confront problematic behavior

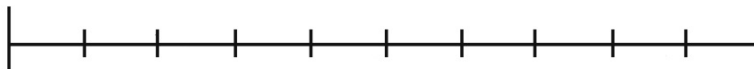
Present/punctual for learning experiences
Copes w/challenge/conflict/uncertainty
Recognizes limits and seeks help
Recognizes/responds to others' needs
Confronts problematic behavior



4. Competence

Does not take responsibility for learning
Lacks self-reflection
Unequal, non-collegial participation
Does not identify learning barriers
Does not manage learning difficulties

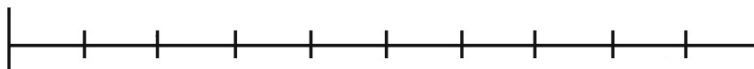
Takes responsibility for learning
Self-reflective
Equal, collegial participation
Identifies learning barriers
Manages learning difficulties



5. Maturity

Lacks emotional stability
Lacks confidence/humility
Lacks professional dress/language
Does not use constructive criticism
Inappropriate behavior (hostile, aggressive...)

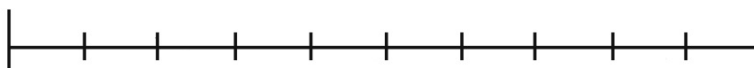
Demonstrates emotional stability
Confident and humble
Professional dress/language
Excellent use of constructive criticism
Appropriate behavior



6. Communication

Ineffective communication w/ others
Lacks respect/courteousness
Lacks empathy/compassion
Lacks active listening skills

Communicates effectively w/others
Respectful/ courteous communication
Communicates w/empathy/compassion
Uses active listening skills



SECTION 4: PROFESSIONAL BEHAVIOR COMMITTEE

The Professional Behavior Committee consists of the program director, two physical therapy faculty members, and one Rangos School of Health Science faculty member who does not teach in the physical therapy program.

Current Members:

Christopher R. Carcia, PhD, PT, SCS, OCS	Program Chair and PT Faculty Member
Leesa DiBartola, EdD, DPT, PT, MCHES	Assistant Program Chair and PT Faculty Member
Mary Marchetti, PT, PhD, GCS	PT Faculty Member
Keith Gorse, EdD, ATC	Athletic Training Faculty Member

SECTION 5: APTA SUPPORTING DOCUMENTATION

The American Physical Therapy Association (APTA) House of Delegates adopted *Vision 2020 and the Strategic Plan for Transitioning to a Doctoring Profession* (RC 37-01). The plan included the following six elements.

- Autonomous Practice
- Direct Access
- Doctor of Physical Therapy
- Evidence-Based Practice
- Practitioner of Choice
- Professionalism

The plan describes how these elements relate to and interface with the vision of a doctoring profession. To assist the transition to a doctoring profession, one of the initiatives was to define and describe the concept of professionalism by explicitly articulating what the graduate of a physical therapy program should demonstrate with respect to professionalism.

Professionalism in Physical Therapy: Core Values was adopted by the APTA Board of Directors as a core document on professionalism in physical therapy practice, education, and research. (V-10; 2003)

Seven core values were identified that further defined the critical elements that comprise professionalism. They are stated as follows.

- Accountability
- Altruism
- Compassion/Caring
- Excellence
- Integrity
- Professional Duty
- Social Responsibility

The APTA provides a working definition of each core value as follows.

<i>Core Value</i>	<i>Definition</i>
Accountability	Accountability is active acceptance of the responsibility for the diverse roles, obligations, and actions of the physical therapist including self-regulation and other behaviors that positively influence patient outcomes, the profession and the health needs of society.
Altruism	Altruism is the primary regard for or devotion to the interest of patients, thus assuming the fiduciary responsibility of placing the needs of the patient ahead of the physical therapist's self interest.
Compassion/Caring	Compassion is the desire to identify with or sense something of another's experience; a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.
Excellence	Excellence is physical therapy practice that consistently uses current knowledge and theory while understanding personal limits, integrates judgment and the patient perspective, embraces advancement, challenges mediocrity, and works toward development of new knowledge.
Integrity	Integrity is the possession of and steadfast adherence to high ethical principles of professional standards.
Professional Duty	Professional duty is the commitment to meeting one's obligations to provide effective physical therapy services to individual patients, to serve the profession, and to positively influence the health of society.
Social Responsibility	Social responsibility is the promotion of a mutual trust between the profession and the societal needs for health and wellness.

APTA CODE OF ETHICS

Code of Ethics for the Physical Therapist

HOD S06-09-07-12 [Amended HOD S06-00-12-23; HOD 06-91-05-05; HOD 06-87-11-17; HOD 06-81-06-18; HOD 06-78-06-08; HOD 06-78-06-07; HOD 06-77-18-30; HOD 06-77-17-27; Initial HOD 06-73-13-24] [Standard]

Preamble

The Code of Ethics for the Physical Therapist (Code of Ethics) delineates the ethical obligations of all physical therapists as determined by the House of Delegates of the American Physical Therapy Association (APTA). The purposes of this Code of Ethics are to:

1. Define the ethical principles that form the foundation of physical therapist practice in patient/client management, consultation, education, research, and administration.
2. Provide standards of behavior and performance that form the basis of professional accountability to the public.
3. Provide guidance for physical therapists facing ethical challenges, regardless of their professional roles and responsibilities.
4. Educate physical therapists, students, other health care professionals, regulators, and the public regarding the core values, ethical principles, and standards that guide the professional conduct of the physical therapist.
5. Establish the standards by which the American Physical Therapy Association can determine if a physical therapist has engaged in unethical conduct.

No code of ethics is exhaustive nor can it address every situation. Physical therapists are encouraged to seek additional advice or consultation in instances where the guidance of the Code of Ethics may not be definitive.

This Code of Ethics is built upon the five roles of the physical therapist (management of patients/clients, consultation, education, research, and administration), the core values of the profession, and the multiple realms of ethical action (individual, organizational, and societal). Physical therapist practice is guided by a set of seven core values: accountability, altruism, compassion/caring, excellence, integrity, professional duty, and social responsibility. Throughout the document the primary core values that support specific principles are indicated in parentheses. Unless a specific role is indicated in the principle, the duties and obligations being delineated pertain to the five roles of the physical therapist. Fundamental to the Code of Ethics is the special obligation of physical therapists to empower, educate, and enable those with impairments, activity limitations, participation restrictions, and disabilities to facilitate greater independence, health, wellness, and enhanced quality of life.

Principle 1 Physical therapists shall respect the inherent dignity and rights of all individuals.
(*Core Values: Compassion, Integrity*)

1A: Physical therapists shall act in a respectful manner toward each person regardless of age, gender, race, nationality, religion, ethnicity, social or economic status, sexual orientation, health condition, or disability.

1B: Physical therapists shall recognize their personal biases and shall not discriminate against others in physical therapist practice, consultation, education, research, and administration.

Principle 2 Physical therapists shall be trustworthy and compassionate in addressing the rights and needs of patients/clients.

(Core Values: Altruism, Compassion, Professional Duty)

2A: Physical therapists shall adhere to the core values of the profession and shall act in the best interest of patients/clients over the interests of the physical therapist.

2B: Physical therapists shall provide physical therapy services with compassionate and caring behaviors that incorporate the individual and cultural differences of patients/clients.

2C: Physical therapists shall provide the information necessary to allow patients or their surrogates to make informed decisions about physical therapy care or participation in clinical research.

2D: Physical therapists shall collaborate with patients/clients to empower them in decisions about their health care

2E: Physical therapists shall protect confidential patient/client information and may disclose confidential information to appropriate authorities only when allowed or as required by law.

Principle 3 Physical therapists shall be accountable for making sound professional judgments.

(Core Values: Excellence, Integrity)

3A: Physical therapists shall demonstrate independent and objective professional judgment in the patients/clients' best interest in all practice settings.

3B: Physical therapists shall demonstrate professional judgment informed by professional standards, evidence (including current literature and established best practice), practitioner experience, and patient/client values.

3C: Physical therapists shall make judgments within their scope of practice and level of expertise and shall communicate with, collaborate with, or refer to peers or other health care professionals when necessary.

3D: Physical therapists shall not engage in conflicts of interest that interfere with professional judgment.

3E: Physical therapist shall provide appropriate direction of and communication with physical therapist assistants and support personnel.

Principle 4 Physical therapists shall demonstrate integrity in their relationships with patients/clients, families, colleagues, students, research participants, other health care providers, employers, payers, and the public

(Core Value: Integrity)

4A: Physical therapists shall provide truthful, accurate, and relevant information and shall not make misleading representations.

4B: Physical Therapists shall not exploit persons over whom they have supervisory, evaluative or other authority (e.g., patients/clients, students, supervisees, research participants, or employees).

4C: Physical therapists shall discourage misconduct by health care professionals and report illegal or unethical acts to the relevant authority, when appropriate.

4D: Physical therapists shall report suspected cases of abuse involving children or vulnerable adults to the appropriate authority, subject to law.

Note – The text contained in the above document is an excerpt from the Department of Physical Therapy Program Manual (2016-17). Students are required to sign a form acknowledging they have received, read and will abide by the policies & procedures within the manual.

8/22/16