Clinical Education Special Interest Group Minutes

Combined Sections Meeting 2018

Friday 23, 2018

Introductions:

- Co-Chairs
 - Cindy Flom-Meland (DCE) and Jay Lamble (CCCE)
- Recording Secretary
 - Elsa Drevyn
- Membership Secretary
 - Tonya Apke
- Nominating Committee
 - Cindy Utley
 - Angel Holland

REPORTS

Gina Musolino, Education Section, President

- Thank you to the CE co-chairs for their ongoing work and for meeting with BOD.
 Cindy is the outgoing Academic co-chair.
- The Education section has over 3000 members and growing.
- It has started a partnership program for individuals affiliated with a program who
 are not PT or PTA. They can now join the education section as a partner. If you
 have someone in your faculty that is not a PT, they can join and can do
 everything except vote. They will have a slightly higher rate.
- Currently the education section has six special interest groups. Residency educators is the newest.
- The accomplishments of the Education Section include the clinical reasoning symposium, which was very well received. The Education Section will have another one probably in 2019.
- The Journal of Education has transitioned. It will have a successful Medline
 application for submissions and this will help us be a strong presence in the
 scholarly community. The December issue was free but we will go back to offer it
 for free to members only. The next one will be out in about two weeks. You will be
 able to access any archived journals.
- This afternoon we will have The Pauline Cerasoli Lecture
- This evening will be the Education Section reception and the business meeting to bring forward the name change to "Academy" that has gone through a rigorous process.
- Six of the sections are already academies. It is a bylaw amendment and we need two third votes.
- The ELP has representatives from the APTA, ACAPT and the Education Section and we are moving forward together.

- There will be a webinar April 18th, through the Learning Center, from 7-8:30 and we are going to continue to move forward with the research agenda.
- We are offering a course for grant writing this summer at MUSC.

Laurie Kontney, Education Section representative for ELP

- It was an agreement in 2016 between APTA and Education section to work together: 'Better Together'.
- It did not including PTA issues.
- PTA Issues recommendation from the EETF.
- Through the strategic planning process, the ELP has an opportunity to tease out component parts of the recommendations, realign sub groups and sub group work, identify priorities for each area, and create realistic short and long-term goals.
- ELP meets three times per year with phone conferences once per month.
- There is a link in the APTA for updates.
- Year in review will be available soon.
- It has been a pretty amazing opportunity.
- There was a Task force with many different stake holders for best practice in clinical education. It was presented at ELC.
- Educational research continues to be addressed.
- The webinar on April 18th, is about how we establish competencies for DPT students.
- MERC courses will continue to be offered.
- MERC courses have led to the creation of GAMER courses, which offers more mentors for those interested in research and how to obtain grants.

Anne Reicherter, Director Academic and Clinical Affairs, APTA,

- She deals with everything to do with PT and PTA education. She is presenting the slides for her boss.
- Email: <u>AnneReicherterAPTA.org</u>
- APTA has become aware that there were issues with costumer service for Liaison International.
- Currently the CPI courses in the learning center are very large and they often crash because it was done with different and older technology.
- They are currently working on those courses.
- They are looking at all of the documents related to the CPI and CSIF, under 'for educators' in the APTA website, and they are being organized.
- There is a formal clinical education technology group. They are working on initiatives. Mostly around CPI and CSIF but others as well.

Greg Awarski, Liaison International, CPI/CSIF update

- Greg apologized for delays and slow responses. He and Bryan had a well-oiled
 machine but Bryan has left. They are working on creating a team but it is a lot for
 them to learn and he asked for us to please give them some leeway. A lot has to
 do with experience and the team will learn but they are new and don't have the
 same level of knowledge yet.
- There are some voicemails that still go to Bryan but he is no longer around. If it is urgent, call.
- There is a training team at liaison that is helping build the help center. They have made some changes. It is not complete yet. If you notice errors, please let them know, it would be very helpful.
- They are moving away from live webinar and towards recorded webinars.
- Number of schools using CPI and CSIF:

224 PT CPI 187 PT CSIF Not renewing: 0

257 PTA CPI 178 PTA CSIF Not renewing: 0

48,525 sites in the system 33,055 unstarted, 68% 6,884 started, 14% 8,554 completed, 18%

Questions:

Do they have to change email when they go from being a student to being a CI? Yes, because of a recording reason. Most likely they will use a work email. Let them know that it is a former student and they won't have to do the training again.

Sandra Wise / Candy Bahner / Lisa Finnegan, CAPTE update

- CAPTE is made up of 31 Commission members, 23 of whom are licensed PTs or PTAs with academic and practitioner backgrounds. The remaining members include 3 public members and 5 higher education administrator members.
- CAPTE now accredits over 600 programs.
- From 2013 through 2017 CAPTE: granted candidacy to 47 programs, denied candidacy to 29 programs, granted initial accreditation to 87 programs and withheld accreditation from 12 programs.
- Additionally, CAPTE took action on 1157 accreditation reports and approved 63 substantive change requests.
- We would like to highlight the Commission's use of brightlines for student achievement. CAPTE has set an 85% benchmark for licensure pass rate, 90% employment rate as well as 60% PTA and 80% PT graduation rates. Based on

data collected from our program annual reports, the average program graduation rate for PTA programs is 85.4% and for PT programs is 95.5%.

Nancy Kirsch and Jeff Rosa, FSBPT update

- Nancy Kirsch, FSBPT president they have an exam fee delay that will come into effect this year. The new exam blue print went in effect this year. She encouraged us to have the students become familiar with that as they prepare to take the exam.
- They have a new initiative of health care regulators to look at regulatory research. They are also part of an international group
- There is good collaboration with APTA. The Licensure compact was a joint effort.
- There is a minimum data set to look at workforce. It is difficult because some PTs have dual licenses, full time vs part time jobs, etc.

Jeff Rosa-

- Licensure compact is an agreement between member states so that a PT can
 work on a different states without having to take the exam again. 15 states are
 part of the agreement and they are hoping that maybe up to 20 will be members
 by the end of the year.
- New rules under this process: At the end of the year the school has to validate that the student is on track to graduate before the student can register for the eligibility list.
- APTA is going to upload their cont ed information into their system. They have already updated the CSM sessions. If you have an aptitude account you can upload. If you are in a state that accepts aptitude it will make it easier to provide the information.

Kelly Hawthorne, CSM 2018 Program report

Kelly was not present. Record number of attendees at CSM.

Danielle Parker, ELC 2018 Preview

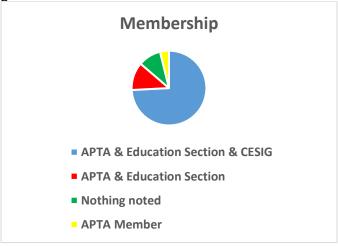
- Danielle parker is the new chair for ELC programing.
- ELC will take place October 12-14 in Jacksonville fl.
- Theme: Leadership landscape
- Abstract submission opens Monday Feb. 26. March 30 is deadline.

Tonya Apke

 Thank-you to all who attended ELC this year and completed the online survey to help us learn a little about who was at the CE SIG meeting. Here's a little about our attendees:

Title	# attendees
Administrator	3
CCCE	29
CI	9
DCE/ACCE	134
Undefined	7
TOTAL	182

- We had representatives from 37 states and the District of Columbia. The state with the highest representation was PA with 15 followed closely by NY and CA both at 14 each.
- Of the 43 CIs and CCCEs who responded, 35 affiliate with both PT and PTA programs while 8 affiliate with only PT programs.
- Of the 129 DCEs who answered the question, 117 are from PT Programs and 12 from PTA programs.



• If you are not a member of the CE SIG, but are a member of the Education Section, and you would like to join the CE SIG, feel free to email me and I will help you with that process. Apke.5@osu.edu. See you at CSM!

<u>Cindy Utley and Angel Holland</u> – from the CE SIG Nominating Committee, they had a great response.

Full slate.

CE SIG academic co-chair: 2 people Nominating secretary: 2 people Closes tonight and voting is April 1st.

Jay Lamble - Clinical Co-chair:

- Congratulated and thanked those who have served:
 - o Cindy Flom-Meland, Tonya Apke and Cindy Utley will step down.
- Thank you for your service!

Marcia Smith, PT-PAC

- If anyone wants to give money to PAC, it has to be in the form of a donation according to federal law, cannot come out of membership.
- PAC Supports members of congress and legislations
- We have eliminated the hard cap but other issues have emerges such as: 'pay for' 'how are you going to pay for this'.
- They have decreased the reimbursement for PTA and COTAs, this goes into effect 2022.
- We are celebrating 45 years of PAC, you can celebrate by donating \$1 per year.
- They take installments as well.

Joe Palmer from the University of Colorado:

- Their consortium consist of 8 states for a total of 17 programs.
- They wrote a position paper regarding growing concern regarding students going to interview during their terminal experiences.
- The CE SIG endorsed the position paper.
- They met with the Residency SIG and had a good discussion.
- What came out of that meeting is that they are going to form an ad hoc committee to meet and see if they can come up with basic guidelines.
- If there is interest, reach out to him. E.g. a uniform request time off form idea.
- Question from the audience: Has there been discussion regarding Saturday interviews? That has been a suggestion. They also discussed the possibility of using technology more.

Reference Manual for Site Coordinators of Clinical Education

 It was previously known as "Reference Manual for Center Coordinators of Clinical Education"

CE manual was started by Scott Euype. He solicited feedback a few years ago to review it. They have now reviewed it and it is done. Janette Scardillo led the review process and was assisted by Laura Sage, Krissy Grubler, Cindy Utley, Jay Lamble, and Cindy Flom-Meland.

Manual highlights:

- Condensed wording
- Hyperlinks located throughout
- Letter/Checklist for SCCE when appointed
- Topics include:
 - Glossary of Terms

- Administrative Duties
- Communications as a SCCE
- Mentorship/Staff Development
- Conflict Management
- Objective Writing
- Additional Sections include:
 - Additional Resources
 - APTA Core Documents
 - Appendices
- Copyright Information:
 - Can be disseminated to member and non-members as a whole document only
 - APTA documents not allowed to be used separately (eg...Critical Incident, CPI Anchor Definitions)
- Links to core documents.
- Appendices include forms, position statements, etc.
- Will be in CE sig website. Individual pages/forms cannot be separated
- · Linked on the CESIG website
- Will be located in the APTA Catalog of documents
- Education Section website
- As soon as CSM is over
- Asks that we as DCEs distribute it as soon as possible.

New Business / Discussion Topics

<u>Donna Applebaum</u> – <u>Chair of the NCCE</u>

• There are questions regarding dissemination of approved new "common terminology". It was assumed that after ACAPT voted and accepted the common terminology, it could be disseminated. This was a learning process. They have learned that all three of the manuscripts (position statements) were submitted for publications and there are rules about this. This information cannot be disseminated until after it is published. They are housed in the ACAPT website but it cannot reproduced or sent out. It can be linked and an individual can look at it. This is only an interim plan. They will figure it out moving forward.

 Question; will the link work even if you are not an ACAPT member. Donna thinks that it revolves around being an APTA member not ACAPT.

Kathleen Manella: payment for clinical experiences

- Kathleen: ACCE at St. Augustine and member of the task force the NCCE.
- The NCCE created a task force to investigate "Payment for Clinical Experiences"
- They had about 30 people interested in participate.
- They are looking for a private practice member to serve in task force.
- They wanted an even distribution of members in the task force with diverse geographic setting and diverse practice setting.
- Those not selected were asked to serve in an expert panel and 15 people agreed to do that.
- They then established a framework for meetings.
- The task force was first asked to answer the question as to: whether "the current model for CE is sustainable."
- The task force was then asked to review the literature across the professions
- The second meeting addressed the question: "what are the know factors related to payment and non-payment for CE in health professions."
- There is not a lot of information in the literature related to PT.
- They found that many of the professions are looking at this.
- The members were asked if they had any internal data regarding productivity, etc.
 - Questions from the audience:
- Are they going to send surveys to the PTA programs?
 - Because the task force is a component of ACAPT, they are now only looking at PT programs but this has been discussed.
- Cindy Flom-Meland suggested that they work with PTA SIG to address this
 question.

Medicaid requirements and students (are they to be the same at Med Part B) discussion

- This was a requested topic for discussion through the HUB.
- Members in the audience stated that Medicaid doesn't have any requirements for students

Kelly Prescher brought up the discussion of standardized setting for CE:

- She was looking at comparing the programs in her consortium and asking what settings they were placing their students during their first or terminal experiences.
- She wants to know if the group wants to standardize the CE settings.
- We are also using three different assessment tools and they have different language. Should we be using the same terminology? Yes was the answer from the audience. How do we go about that? A lot of programs are using the CPI, should we start there?
 - Cindy suggested to start a work group. She will bring it to Greg and start that conversation.

March 1st mailing date discussion-

- Cindy explained that this conversation dates back to the 1990s. There have been three surveys done and the last one only a few years back. The majority work best with this date. There is not a perfect date. Placements are hard. She is not sure what can be done differently.
- The audience: the problem is not the date is the programs that don't follow it.
- A member of the audience said that she talked to a large provider who told her that he is booked for 2019.
- Another member, is in the NCCE board. She feels that the clinical partners should also adhere to it. She also feels that the programs should have a response date as to when they tell the clinical partners if they are going to use the slot or not.
- Some want to respect the process but maybe we can have a task force to analyze the process, e.g. when to let go of unused sites
- Some consortiums share unused sites
- How can we share the information? Can the CE SIG help with this?
- Turnover of site coordinators is a problem as well. NY consortium educates the SCCE as to the process.
- Can we partner with the International Liaison? They have all of the SCCEs contact information.
- The education piece is only one piece. The system is broken. The NCCE board has been talking about all of these issues. e.g. capacity with more programs or unused capacity. Donna suggested a placement summit. Could we use some regional consortium network to identify the issues and figure out strategies for the placement process? They will have some data collection prior to ELC.
- Cindy Flom-Meland mentioned to that the CE SIG needs to partner with the NCCE on that because we can't leave the PTA programs out.

Next Meeting - ELC October 12-14, 2018 in Jacksonville, FL

Thank you!