

APTA Education Section
Clinical Education Special Interest Group
Business Meeting - Combined Sections Meeting
February 2, 2006
San Diego, CA

I. CALL TO ORDER Peggy Gleeson called the meeting to order at 6:30 PM

II. INTRODUCTIONS

- A. Peggy Gleeson, Academic Co-Chair
- B. Heidi Dunfee, Clinical Co-Chair
- C. Lynn English, Recording Secretary
- D. Marianne Janssen, Membership Committee
- E. Lynn Frank, Nominating Committee, Chair
- F. Kelly Sass, Nominating Committee, Member
- G. Alecia Theile, Programming Chair

The attendance records were signed by 76 persons and by count 98 were present.

III. REPORTS

A. EDUCATION SECTION BOARD OF DIRECTORS Heidi Dunfee

1. ***Rewrite of the Clinical Education SIG bylaws planned.*** This will allow for revision and creation of rules of order. Janice Ford is cleaning up the Education web site and preparing for the revision. This will include information about previous officers and descriptions of positions for which people will run. Part of the rules will include purposes and objectives of the Clinical Education SIG. The SIG newsletter will soon contain these revisions. Members are asked to provide feedback to the committee about proposed rules.
2. ***Education Section Awards*** have not been used recently. The section is encouraging nominations for
 - a. Education Leadership Award
 - b. Distinguished Educator in PT AwardJody Cormack will post descriptions and a simple template for nomination on the Education Section web site (See policies and Procedures, section 5). The deadline is November 1, with the award given at Combined Sections Meeting.

3. ***Transforming Clinical Education*** is a course being offered on Saturday, two 3-hour sessions with two distinct topics. Triads including PT Program Directors, ACCEs, and clinical managers will work together to solve problems and seek creative solutions to obstacles.
4. ***New CAPTE Evaluative Criteria: Evidence for Clinical Education*** will be presented Friday, 8-11 AM Marriott Torrey 1 and 2 (2-3-06).
5. ***Planning for the 2nd Educational Leadership Conference (Joint Program for the AASIG and Clin Ed SIG)*** is ongoing for October 6-8 2006. Location is tentatively in Baltimore. A handout from focus groups conducted at the First Educational Leadership Conference held in Fall 2005 in Pasadena, CA was provided for review.

B. MEMBERSHIP COMMITTEE

Marianne Janssen reported 98 people here tonight. She asked for ideas for boosting membership and welcomed any input.

C. NOMINATING COMMITTEE

Lynn Frank and Kelly Sass presented a full slate of nominees for offices:

ACCE Co- Chair Alecia Theile
 Linda Eargle
 Jenny Rodriguez

Membership Secretary Laurie Guzman
 Marianne Janssen
 Ellen Lowe

Nominating Committee Corrie Odom
 Carolyn Shearer

Peggy Gleeson encouraged members to become active!
Peggy Gleeson is running for VP of Ed Section. Members are encouraged to support her.

D. PROGRAM COMMITTEE

Alecia Theile recognized the work of Laurie Kontney, Education Section Program Chair and all who worked hard to prepare for great programming at CSM '06.

Members will now be able to submit programming ideas online for future conferences. The Education Section will send a call for proposals for Programming. Course description and objectives should accompany proposals. The deadline is May 15. The planning committee consists of a PTA, an Academic Administrator and academic faculty. All review the proposals and rank them. Every SIG is considered as programming is chosen.

Members are encouraged to submit ideas.

Education Section Program Chair Laurie Kontney is grateful for all who supported her in program planning.

Alecia introduced Alice Salzman, ACCE of Northwestern University in Chicago as a new member of the Education Section Program Committee, representing the Clinical Education SIG.

Alecia also solicited volunteers for the Clin Ed SIG Program Committee and recognized current members.

E. APTA DEPARTMENT OF EDUCATION

Jody Gandy presented the following:

1. ***The 2006 Clinical Site Information Form (CSIF)*** is ready. Email was sent to inform ACCEs/DCEs. Members are encouraged to ask all clinical sites to complete the form electronically if at all possible. APTA would like an electronic copy. The student site evaluation form was developed prior to CAPTE's development of the 2006 Evaluative Criteria for PT Education Programs. Tracking information on this form along with the CSIF will assist PT programs in collecting some of the necessary information needed to address criteria associated with clinical education.
2. ***Saturday program- Transforming Clinical Education.*** The development of this program was derived from conversations with ACCEs, CCCEs and others and barriers to making changes in clinical education. A "disconnect" has been identified between academic and clinical education. This program is designed to facilitate the process of changing clinical education using a systematic approach to the transformation customized to the negotiated academic/clinical partnership. Those with a minimum of the triad of a program director, ACCE/DCE and clinical manager may participate.. The first three hours of the program will address strengthening partnerships; the second three hours is devoted to enhancing clinical mentoring. PT 2006 in Orlando will offer one three hour slot. Participant triads may choose to work on one of the two topics for the

three hours. Jody indicated that triads will be followed periodically to assess progress and identify additional resource needs in order to facilitate continued progress. Stronger partnerships and enhanced clinical mentoring are necessary for the transformation. For Annual Conference, it was suggested that information be published for those who would like to attend to possibly draw more people in.

3. ***CPI revision:*** Thank you to all of academic programs and clinical sites that have been involved in the field study to date (66 US, 4 Canada). 76 clinical facilities involved. Approximately 250 students have completed this phase. In the study, online training with 100% competency is required to use the CPI online. The third phase of the study is the completion of an electronic user satisfaction survey.. A portion of the development and testing of the PT CPI article has been drafted by the Ad Hoc PT CPI Revision group with the remainder to be written after the completion of the study in the end of April. Development of the Internet-based system for the online training and the electronic version of the PT CPI will need to be redesigned based on what was learned from the field testing. APTA will need to create a new platform to be able to provide the training and testing house on the PT CPI. As the system is redesigned, it will allow for a paper version to be printed for those facilities that are unable to access the Internet. We hope to build the system by the end of the year.
4. ***Minimal required skills for entry level practice*** were developed through a consensus-based process beginning with a small group and expanding to a larger audience of physical therapist academic programs, clinical sites, component leaders, and Board of Directors. The US Department of Education has posed questions of accrediting agencies (including CAPTE) for professions regarding a set of established standard skills that all programs require of graduates. Thus, this document provides a mechanism to define, at a minimum, required skills that all physical therapist graduates would demonstrate upon entering practice. In turn, this would mean that any employer hiring a new graduate physical therapist could perform these skills.
5. ***PTA Normative Model*** comments on the first draft are being reviewed with opportunities to comment on a second draft sometime in March. The final document will need to be reviewed by APTA's Board of Directors prior to publishing the 2006 version of the PTA Model in hard copy and CD-ROM. Publication of this model will likely be in the fall.
6. ***CI Education and Credentialing*** Programs: Slightly more than 15,000 clinical educators have been credentialed. There are currently 120 active trainers with 31 additional persons invited to complete the Train-the-Trainer Course in April 2006. An advanced clinical instructor credentialing course is in the very early phases of development and will

address advanced teaching concepts associated with practice-based issues associated with clinical teaching (eg, patient/client management model, evidenced-based practice, documentation) Credentialed clinical instructors who have completed the first course will be eligible for the advanced clinical instructor credentialing program The curriculum will be case based and consisted of 4-6 modules. It will be a two-day course comprised of three components: Pre-course phase completing readings, information form, and a sample case-based situation; two-day onsite case-based program with an assessment component; post-course phase that requires application and integration of concepts learned to a student, colleague, or peer. Once the person has successfully completed all three components of the program he/she will earn Advanced CI Credentialing. CEUs will be awarded for the completion of the two-day course. Oversight of the Advanced CI Credentialing Program will be incorporated into the responsibilities of the Clinical Instructor Education Board (CIEB).

7. ***In the budget for 2006:*** Create an ACCE performance assessment with opportunities to consider a multiperson assessment.
8. ***Online professionalism instructional module*** is in development and the refinement stages to be made available to physical therapists and physical therapist assistants..

IV. NEW BUSINESS

A. ***Annual Conference***, Orlando, FL June 22-25, 2006

Gina Musolino reported that there is good educational programming 2007 Annual Conference will be in Denver.

2nd Educational Leadership Conference

Oct. 6-8, 2006, Tentative site Baltimore, MD
Co- supporter of diversity dinner

Changes: Joint program- longer and meatier
Course content for new ACCE, new CI
Full day of topics including legal issues, motivating clinicians

Programming: Friday, Saturday and Sun. morning
Sunday: Clinical research issues possibly with platforms, not posters.
Round tables may be offered by topic.

How to advertise this conference: Paper brochures will be prepared to attempt to reach clinicians. These will be sent to consortia so that all may

do as they wish to reach their own constituents; disseminate via paper, fax or email.

The idea of continuing this process of Transforming Clinical Education working in triads developing clinical education plans would be well placed at this conference. Email Peggy Gleeson or Heidi Dunfee if you think this would be advisable for this conference.

C. ***Clin Ed SIG: Do we need a research committee?*** The question is floated to the members. This may help advance clinical education research.

D. ***An idea to stimulate PT involvement in government affairs*** -Debbie Ingram described a two hour meeting sponsored by UT Chattanooga- an issues forum - this year the most pressing topic dealt with federal and state issues that affect practice and patients. An APTA government affairs representative, Tennessee President of TPTA, TN congressman, state legislator, and 300 PT, PTAs attended, 11-1 PM.

E. ***Manipulation Course announced***, April 2006

Missy Wolff-Burke from Shenandoah University announced this course.

They would like to have academic faculty attend this course as well as clinical faculty. Brochures provided, web site has more information.

F. ***Clin Ed SIG web site***- What would be helpful to include?

All forms

Credentialing course information

Research projects??

Looking for posters or projects having been completed, abstracts...

Past minutes from SIG meetings

Calendar of events specific to Clin Ed

Consortium Activities? Who updates? Links to consortia web site of consortia?

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G. *There is a potential proposal coming from the Reference Committee* to the APTA House of Delegates concerning avoiding education in “referral for profit” clinics. Suzie Cornbleet from Washington University asked for input from this group. Various opinions were expressed. Some programs have few sites, some have many. Some PT owned practices have initiated student programs as a result of programs refusing to send students to “referral for profit clinics”.

Members should write to component/ section delegates with comments. Some asked if this might compromise our membership. Corporate structures complicate this

Jody Gandy suggested that advancing this issue could be a collaborative effort with the Private Practice Section.

Peggy Gleeson adjourned the meeting at 8:10 PM