MINUTES
Residency/Fellowship Education Special Interest Group (RFE SIG)

All Membership Meeting at CSM
Thursday, February 22, 2018, 8:00 - 10:00 AM
New Orleans Ernest N. Morial Convention Center, Room # 224

Lisa Black (Chair) called the meeting to order at 8:01 am CST.

- Introductions
  - Lisa introduced all of the Board Members and those leading special initiatives.
- Recognition of outgoing officers – Carol Jo
  - Becky Olson-Kellogg – Outgoing Secretary / Treasurer
  - Jason Zafereo – Started as Chair of Nominating Committee the first year, then rotated into member role on Nominating Committee, & now will move back into the role of Chair of the Nominating Committee (due to the nature of short / staggered terms at the beginning of the SIG)
  - Lisa Black – Outgoing Chair
  - Elizabeth Lane – Outgoing Nominating Committee Chair

The Year in Review:

- PT Hub established with options for discussion and posting of current research publications and posters on residency and fellowship education
- Outstanding quarterly newsletter
- Webinar on Mentoring
- Think Tank project in progress to identify exceptional models of training in mentoring and curriculum for evidence-based practice, ethics, professionalism
- Involvement of Dana in program committee for CSM
- Meeting at ELC ➔ build partnerships between residency/fellowship and other academic/clinical educators

Officer reports:

- Chair – Lisa Black
  - Announced Mentor of the Year Award – will receive a plaque & stipend (amount TBD)
  - Residency/fellowship mentors can receive a 20% discount on registration to attend ELC (to match discount offered to CI’s)
- Vice Chair – Carol Jo Tichenor
  - Will present later with specific projects
- Membership Secretary – Anne O’Donnell
  - We currently have 184 members
- Treasurer/Secretary – Becky Olson-Kellogg
  - Nothing to report

Committee Reports:

- Nominating Committee – Elizabeth Lane
  - 3 open positions: Chair (1 nominee), Secretary/Treasurer (2 nominees), Nominating Committee (2 nominees)
  - Voting will take place within 6 weeks of CSM, & new terms will begin May 15.
- Program Committee – Dana Tew
  - Several new SIGs which provides more opportunities for presenting at CSM
  - Proposals are due in March for Educational Sessions at CSM in January 2019
- Scholarly/Research – Yvonne Body
  - Continuing to receive abstracts/research that has been completed re: residency/fellowship education
- Communication – Christina Gomez
  - 3 newsletters have been published thus far
  - Newsletters will be quarterly
If you have not received it, please let her know.
Will include an area in the newsletter for cross communication with other residency/fellowship SIGs from other Sections/Academies. Improving this collaboration is a main goal of our SIG.

Initiatives:
- **Hub – Christina and Yvonne**
  - You can access the HUB via the APTA home page ➔ Click on “Communities” & then set up a profile & you can select how often you get notices of postings.
  - Email Christina Gomez (cgomezPT@gmail.com) or Lisa Black (lisablack@creighton.edu) if you are having difficulty accessing the Hub.
- **Think Tank – Jason**
  - Will be addressed later.
- **Mentoring Webex and Successful Mentorship Q and A – Carol Jo**
  - Successful Mentorship online course was developed in 2015, but now needs to be redone due to new platform. Please provide input for the new mentoring course at caroljot@gmail.com.
  - Please complete survey for upcoming webinar topics for 2018. Also indicate if you would like to present an hour long webinar on mentoring.
- **Development of Common Communication Platform (Carol Jo and Christina)**
  - This is a big initiative to develop a common communication platform for all residency/fellowship SIGs across all Sections/Academies.
  - Another survey will be sent out in a few weeks to explore most effective communication platforms. Please complete so we know which communication platforms to focus on.

**Education Section Update – Gina Musolino:**
- She congratulated the SIG Board for the tremendous efforts made in developing this SIG over the past few years.
- There are 6 SIGs now in the Education Section.
- We can invite other non-PT “Partners” to join the SIG to bring supplemental expertise. They can be members with all rights except they cannot vote or hold office.
- She highlighted the success of the Clinical Reasoning Symposium this past summer 2017. The Symposium will occur again in 2019.
- The Education Section is offering several opportunities to expand educational research.
- New research mentor program will be beginning.
- JOPTE journal now online. If you aren’t able to access it online, contact Julia Rice, Executive Director of the Education Section.
- Education Section Business Meeting will be held Friday night. Board of Directors is bringing forth a proposal to change the Section to an Academy.

**ABPTRFE Update – Stephanie McNally for Kendra Harrington:**
1. **Current Program Statistics**
   a. 244 accredited residencies; 51 accredited fellowships (296 total programs)
      i. This represents a 11% increase from 2016
      ii. There has been a 91% increase in accredited programs within last 5 years (2012-2017)
   b. Applications (111 currently active applications total)
      i. 56 initial accreditation applications (undergoing candidacy review or already granted candidacy)
      ii. 28 recognized developing
      iii. 28 reaccreditation
2. **RF-PTCAS:**
   b. The 2017-2018 cycle opened on October 1, 2017. Currently there is an 85% program participation rate.
   c. **ABPTRFE Aggregate Program and Applicant Data Annual Reports:**
      i. 2016 report delayed in publication (anticipate March 2018 publication)
ii. 2017 report will be published in early summer following data migration with program annual reports filed January 31 and analysis of data.

d. APTA has hired Ryan Bannister as the Director of Centralized Application Services (CAS) and Student Recruitment. Ryan has assumed administration of RF-PTCAS.

3. Residency Competency Instrument Evaluation Validation Study
   a. Following IRB approval in February 2017, APTA’s contracted statistician, Masa Teramoto from the University of Utah, initiated the validation study.
   
b. To date:
      i. 225 programs eligible to participate
      ii. 164 programs participating. This represents a 73% participation rate.
   
c. Masa is statistically satisfied with current recruitment/participation, therefore no additional program recruitment will occur.
   
d. Planned data collection through August 31, 2018.
   
e. Current Study Numbers (as of 2/12/2018):
      i. 900 individuals have agreed to participate in the study.
      ii. 478 total evaluation data points:
         1. 270 from mentors
         2. 208 from residents (self-evaluation)
   
f. APTA staff will continue to send reminders to participants about completing consent link, mentor/resident demographic information, and reminders to mentors/residents when next evaluation period is approaching.

4. Accreditation Management System
   a. Based on audit findings and recommendations from the ABPTRFE external consultant during ABPTRFE’s audit, APTA approved the creation of an AMS as a means to address program and ABPTRFE concerns related to the onerous process that existed for submitting and reviewing required documentation for residency/fellowship accreditation.
   
b. The system also is intended to address increased staff administrative burden due to continued growth of residency and fellowship programs.
   
c. The AMS provides a web-based platform for programs to submit required documentation, and a streamlined/consistent manner to conduct documentation review and onsite visit reports.
   
d. In addition, the system creates a new dynamic Online Program Directory page that is responsive to public needs.
   
e. APTA contracted with Armature Solutions in August 2017.
   
f. In that same month, APTA created a database specialist position for residency/fellowship accreditation to administer, manage, and provide program, board, and staff support.
      i. APTA hired Clarence Lyles as the residency/fellowship database specialist.
   
g. The system launched in February 2018.
   
h. Clarence will be providing a demonstration of the system on Friday, February 23 at 7:00am in Convention Center Room 214.
   
i. APTA staff has begun loading program profile information into the system. Completion of this is anticipated on March 15. At that time, the online program directories on the ABPTRFE will switch to pulling its data from Armature and incorporate all of the upgrades and expansive search filters requested by the public.
   
j. Beginning in 2018, accreditation and annual fee payments will occur through PayPal integrated within the AMS.

5. Update on Work of Consultant
   a. Presentation has been created and is ready to be published to ABPTRFE website reviewing entire external consultant process to date (awaiting the Web Services staff to get it onto the website).
      i. On February 16, ABPTRFE consultant Susan Chiaramonte (key-ara-mont-ee) hosted an open forum at the American Physical Therapy Association’s Combined Sections Meeting.
      ii. A 6-week call-for-comment period followed, seeking stakeholder feedback.
      iii. In weekly updates during that time, Chiaramonte summarized the comments, offered clarifications, and identified areas for further review.
iv. She then collated and analyzed all feedback and recommended revisions to the quality standards, and presented those materials to ABPTRFE on May 21 and 22.
v. Over the course of this 2-day meeting, ABPTRFE deliberated and further refined the quality standards.
vi. Chiaramonte then finalized the quality standards by incorporating changes approved by ABPTRFE based on stakeholder feedback.
vii. She presented the final quality standards for clinical residency and fellowship programs to ABPTRFE on June 21. On that date the Board unanimously adopted both documents.
viii. The effective date of the new clinical quality standards is January 1, 2018.
ix. Programs that currently are accredited, or that apply for accreditation on or before December 31 of this year, have until January 1, 2019 to comply with the quality standards.
x. In December 2017, ABPTRFE adopted the Quality Standards for Non-Clinical Physical Therapist Residency and Fellowship Programs. These quality standards go into effect on January 1, 2019.

b. Additional work in progress (all will be published to ABPTRFE website and announced upon completion):
   i. Grading rubric for clinical program self-evaluation report
   ii. Policies and Procedures
   iii. Glossary of Terms
   iv. Non-Clinical Self-Evaluation Report and grading rubric
   v. Compliance Report
   vi. Substantive Change Form

6. New Resources Available on ABPTRFE Website
   a. Crosswalk document comparing the former clinical program evaluative criteria to the new quality standards. This document is intended for programs in their transition and compliance with the new standards.
   b. Frequent Asked Questions document that address recent questions related to the new clinical quality standards.
   c. Guidance Documents to provide program examples of how to complete exhibits for self-evaluation report.
   d. Description of Residency Practice (DRP) documents that provide the curriculum outline for residency programs.
   e. APTA cross-departmental presentation on the establishment of Primary Health Conditions used within the DRPs.

7. 2018 Work Plan
   a. Complete overhaul of ABPTRFE website.
   b. Creation of new Program Development Workshop through APTA Learning Center.
   c. Creation of crosswalk document for the Non-Clinical Quality Standards.
   d. Conduct practice analyses for validation and revalidation of currently recognized areas of practice that were never conducted, or over 10 years since last analysis. Following these studies:
      i. Creation of DRP for Acute Care and Wound Management.
      ii. Creation of DFP for all fellowship areas of practice.
   e. APTA staff to initiate work on the creation of Specialty-Specific Skill Assessments in collaboration with residency programs and APTA Sections/Academies.
   f. ABPTRFE continues to await a draft of the OMPT Description of Fellowship Practice (DFP) from AAOMPT following AAOMPT’s revalidation of its practice. Upon receipt, ABPTRFE will review and ensure document contains all required items, will seek clarification from AAOMPT as needed. Upon ABPTRFE finalization and adoption of OMPT DFP, APTA staff will update the application for accreditation and reaccreditation to include the new primary health condition form template.

Specialty residency/fellowship leaders updates:
• Mary Mildonis – Chair, Geriatric RF SIG
  o Not present
• Matt Haberl – Chair, Ortho RF SIG
  o Business Mtg tomorrow morning
  o Had first elections last fall
  o Will be focusing on strategic planning as a new SIG
  o Focusing on communication platforms & participating in Think Tank
  o Have resources for new & developing programs (grant for new programs, & basic curriculum for new
    residencies to implement)
  o Looking at new accreditation standards & how to implement
• Dave Olson – Co-Chairs, Peds RF SIG
  o They now have a uniform announcement date for acceptance into all Peds residency programs. 14
    programs are now participating.
  o Working on how to share curriculum
  o Have a virtual journal club for all Peds residents
  o Looking at developing a clinical skills checklist to go along with competencies
  o Business Meeting tomorrow
• Cameron MacDonald – AAOMPT Directors SIG
  o Not present
• Airelle Hunter-Giordano – Sports RF SIG
  o Business Meeting today
  o March 1 is uniform date for matching applicants in Sports residency programs
  o Grant available for developing residencies – underutilized
  o Reimbursement also available for emergency responder course via application

Clinical Education Faculty Concerns with Residency Interviews:
• Lisa Black received a document from the Clinical Education SIG (CESIG) that is a position statement from the
  Northwest Intermountain Consortium (NIC) regarding the conflict of residency interviews occurring during
  students’ full-time clinical experiences. (See appended document – also posted on the Hub)
  o Joe Palmer (DCE University of Colorado) & Tiffany Enache (DCE at University of New Mexico)
    summarized the position statement & fielded questions
  ▪ Due to an increasing number of clinical residencies, more students are asking for time off from
    their terminal clinical experiences to do residency interviews.
  ▪ Want to form a task force to find mutually acceptable solutions for all stakeholders.
  ▪ Highlights of concerns from position paper
    • Accountability
    • Under appreciation of student Clinical Instructor (CI) relationship
    • Some CI’s can’t give students time off or make up the time due to their schedule
    • CI apprehension about granting time off after the fact
    • Disruption of clinical internship experience
    • Risk of student offending clinical site if pursuing another field of specialty
    • Students potentially at risk of not being successful in internship, yet taking time off for
      interviews
  ▪ Recommendations from position paper
    • Use technology for remote interviews especially for early interviews
    • Only bring a few final applicants on site
    • Schedule interviews on weekends or on Mondays or Fridays to minimize travel time,
      especially since travel is more challenging for students in more remote areas.
    • Schedule multiple days for interviews vs. just one
    • These are just ideas from the consortium; but they really want is to discuss together &
      collaborate.
    ▪ Also recognize the value of applicants seeing the site where they may be spending their next year.
    ▪ The purpose now is to include the residency voice in this discussion.
Will discuss tomorrow in Clinical Ed SIG meeting.

Women’s Health residency program does a practical exam during their interview where they assess the applicants’ interpersonal skills. They tell their applicants that they have to check with their DCE first, before asking their CI for time off. They also tell applicants that they are expected to make the time up that they miss for the interview.

Neuro residency at Kaiser: have a pre-screening program to narrow down the applicant pool for the actual interviews. They offer day & evening interview times to help accommodate schedules & different time zones, & offer virtual interviews.

Could potentially do regional interviews on Fridays/Mondays to allow students to do more than one interview on the same trip.

Several schools offer students 2-3 professional days for job interviews, which also includes residency interviews.

It may be helpful to have a more consistent process for requesting time off from DCE/CI so it is more familiar to clinics.

It is important to teach students about professionalism & what is realistic for the number of residency interviews that they pursue.

Could DCEs help students identify what residency specialty area they really want so they only interview for one specialty area (e.g. sports vs. ortho vs. both)?

Encourage DCEs to work with residencies on flexibility for interview times.

Kaiser Ortho Manual Fellowship: Switched 10 years ago to doing only WebEx interviews, as it was getting too expensive for candidates to come out to California. Even local applicants have to do WebEx interviews. After the WebEx interview, the faculty switches to a different conference call line to talk confidentially about candidates.

A task force will be formed to address this issue. Contact Lisa Black or Joe Palmer if you would like to participate.

Think Tank Movement – Jason and Carol Jo:

- See attached Think Tank PowerPoint from Jason.
- Goal is not to make all programs the same but to identify & offer unique, innovative, & exceptional practices in both curriculum and mentoring.
- Participants shared their experience of utilizing resources within their academic institution to develop mentors through the institution’s Centers for Teaching & Learning (or similar title), and also through the Medical School.
- Participant recommended the free Coursera course (www.coursera.org) from University of Michigan “Instructional Methods in Health Professions Education”
  - [https://www.coursera.org/learn/instructional-methods-education](https://www.coursera.org/learn/instructional-methods-education)
- Another area to explore is how residencies are successful & fiscally responsible.
  - Hospital-based residency: Challenge is pulling mentors out of the clinic for training which increases their non-productive time. Labor laws in California also prevent therapists from being able to meet over lunch for mentoring meetings, etc.
  - Implementing successful resources from other programs can help save time/money on program director’s effort.
  - The mentoring component is what makes the residency successful, so efforts in this area are a good investment of time.

RFE SIG Purpose:

The Residency/Fellowship Education Special Interest Group of the Education Section, APTA will provide a forum where residency/fellowship faculty including program directors, coordinators and mentors will promote excellence in residency education by providing collaborative opportunities for educational research, exploring opportunities for curricular development, enhancing resident clinical reasoning skills and discussing resources available for assessment in residency education.
RFE SIG Objectives:

To provide a vehicle for enhancing communication among those invested in residency/fellowship education. To promote cooperative efforts among residency/fellowship programs in advancing and improving curriculum. To serve as a resource for collaboration in research for the advancement of resident/fellowship education. To assist in the advancement of skilled clinical mentorship for all resident/fellowship faculty.