When the RFESIG came together at CSM, none of us had any idea of how much our world would change in just a few weeks. The residency and fellowship environment that we are accustomed to is also bound to change. The uncertainty that we are facing may seem overwhelming. The RFESIG Committee is firm in our commitment to bring you the resources that you, your faculty and your program need to persist during this precarious time. Please reach out to rfeducationsig@gmail.com and let us know ways we can best assist.

We invite you to read Pam Levangie’s (President, Academy of Physical Therapy Education) statement here for additional resources available to members of the APTE. Click here to read ABPTRFE’s statement on the changes they are making to assist R/F programs.

Please take care,

*Sara Virella Kraft, Chair*
RFESIG Leadership

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**Nominating Committee**
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**Communications Committee**
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**Vote now!**

The election for APTE and RFESIG leadership positions has now begun. Click [here](#) to fill out your ballot.

Voting is open until **April 23rd**.

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**RFESIG Think Tank**

**Changes Are Coming!**

You asked. We listened.

The RFESIG Think Tank will be undergoing changes to make it easier for you and your faculty to find the resources you need for your R/F program.

Please stay tuned.

A glimpse at what’s to come:

- **Upcoming Course**— Philip Malloy, PT, PhD
  Dr. Malloy has developed an online course to teach clinicians how to review disseminated research findings to then decide if the clinician should incorporate the findings into their own clinical practice. This course was designed as a didactic teaching tool for residents and fellows to meet the required learning dimensions for critical inquiry principles and methods for accredited residency and fellowship programs within the APTA.

- **New podcast**— Listen in as R/F Faculty discuss how they use the Think Tanks resources in their program.

To access the mentoring and curriculum resources in the RFESIG Think Tank, click [here](#).
**Featured R/F Research**

**Implementation of a hospital-based orthopaedic physical therapy program: A case report describing clinical outcomes, productivity, and perceived benefits.**

John Winslow, PT, DPT, OCS, MTC, ATC
& Michael Costello, PT, DSc, OCS, MTC


**Background and Purpose:** Currently, there are 264 credentialed physical therapy residencies across the United States. Most residency programs take a limited number of residents per year, thus the opportunity for the projected 10,721 physical therapy students graduating in 2019 was relatively small. One of the challenges to developing a new physical therapy residency is convincing the host institution that it will be beneficial in the long-term. The purpose of this case report was to describe the effect of implementing a hospital-based orthopaedic physical therapy residency program on clinical outcomes, productivity, and the perceived benefits of the residency program by staff physical therapists and hospital administrators.

**Case Description:** The Patient-Specific Functional Scale (PSFS) was used to assess treatment outcomes for 2 years before the start of the residency program (2007-2008) and for each of the 4 years after the inauguration of the first resident (2009-2012). A total of 3,717 patient outcome scores were used in the analysis. Productivity, measured in “patient visits” and zip code data, representing the service area, was also collected. In addition, staff physical therapists and administrators completed a survey to determine their perceived benefits of the residency program.

**Outcomes:** There was a steady improvement in clinical outcomes from 2007 to 2012. In 2007, the average change in the PSFS was 3.81 and in 2012, 4 years after the start of the residency program, the average change in PSFS increased 37% to 5.21. The number of patient visits increased to 60,983 (+17,071), and patients were traveling from outside the service area (41 additional zip codes) to receive treatment at the hospital from staff physical therapists with specialized training. Survey results indicate that both staff physical therapists and hospital administrators had a very positive view of the impact of the residency program on job satisfaction, professional development, staff retention, and success of the department.

**Discussion and Conclusion:** The results of this study suggest that hospital-based orthopaedic physical therapy residency programs have the potential to improve clinical outcomes, increase productivity, and create a “culture of excellence.” It provides some justification for hospitals and other physical therapy facilities to invest in residency training.

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**Have you or a colleague published a study or presented a poster related to residency or fellowship education?**

Email an abstract to
Raine Osborne
rfeducationsig@gmail.com

*Submissions are accepted on an ongoing basis*
The recent paper by Winslow and Costello, *Implementation of a hospital-based orthopaedic physical therapy residency program: A case report describing clinical outcomes, productivity, and perceived benefit*, provides a thoughtful example of program evaluation for organizations considering implementation of a physical therapy residency program.

A major strength of this paper is the collection of baseline data prior to the start of the residency program and reporting of data for up to 6 years post-implementation. An additional strength of this paper is the authors’ choice to address outcomes at the level of the learners, the patients, and the organization. While no standardized outcomes currently exist for physical therapy residency education, the measures selected by these authors can be easily replicated by other programs.

The generalizability of the findings from this study is limited by the single-program, single-specialty design and low number of residents. Also, the influence of external factors within the organization and the community on the observed outcomes is unknown. Despite these limitations, this paper makes an important contribution to the residency and fellowship education literature by drawing attention to the important issue of demonstrating the value of residency education for both the residents and the sponsoring organization. Further research is needed to identify standardized outcome measures that can be used across programs and specialty areas in order to better demonstrate this value to a variety of stakeholders.
Updates from CSM

Here are some highlights from the RFESIG business meeting at CSM.

If you are interested in reading the full CSM Meeting Minutes, they are located on our SIG page. Click here to download them.

- **Congratulations!** The Residency Research Collaborative group has been awarded an APTE Education Research Grant with their project “Defining Excellence in Residency Education: The Next Step in Demonstrating Value.” If you are interested in learning more, email RF.Research@aptaeducation.org.

- The RFESIG’s Director/Coordinator Mentoring Program is expanding mentoring options to one-on-one mentoring, in addition to biannual in-person Q&A sessions at ELC and CSM. Email Chrysta Lloyd at chryssy19@gmail.com if you are interested in joining.

- The Resident Core Competencies evaluation form has been validated and is being edited for publication. Kendra Harrington reports that the document should be housed on the APTA website soon.

- ABPTRFE will be seeking public comment on the Substantive Change policy 13.4.2 soon. Keep your eye out for more information.

- Pam Levangie, President of the Academy of Physical Therapy Education (APTE), reports that the APTE has implemented new strategic initiatives focusing on the cohesiveness of educational programming at ELC and CSM, adding GAMER/MERC to pre-conference sessions, and developing the Journal of Physical Therapy Education.
R/F SIG Corner

Exciting R/F SIG Changes

The RFESIG would like to welcome several new R/F SIGs. Two new additions to our R/F family include the Neurologic Residency & Fellowship SIG (Academy of Neurologic Physical Therapy) and the Oncologic Residency SIG (Academy of Oncologic Physical Therapy). In addition, the former Sports Residency & Fellowship SIG has changed its name and is now known as the Specialization SIG. We are excited to work closely with each SIG.

JOSPT Cases

JOSPT Cases, a quarterly peer-reviewed journal is now taking submissions! Guidelines for authors and more details are available HERE. This online-only journal offers free submissions and will initially be open access. A key goal of JOSPT Cases is to bring evidence to life through a focus on publishing topics with unique educational value while leveraging multi-media. Those involved in residency/fellowship education deeply understand the value of patient case analysis, notably through mentoring, as a core mechanism for translating knowledge to practice. Therefore, residency/fellowship leaders should consider JOSPT Cases as a tool to meet their program’s educational hour requirements, through review of cases and/or through case submissions by residents/fellows-in-training and/or faculty. By submitting a case, authors will receive feedback from expert reviewers driven to maintain scientific rigor. Furthermore, JOSPT Cases seeks to create a low barrier to entry for developing clinician scholars to participate in the scientific process without any publishing experience required. Don’t hesitate to email Kris Porter (an RFESIG member), and one of the associate editors, at kporter@thejacksonclinics.com if you have any questions. When considering that the RFESIG includes various specialists outside of sports and orthopedics, Kris is also happy to help you navigate if your topic is an appropriate fit for submission.

As the RFESIG continues to collaborate with all R/F SIGs to advance residency and fellowship education, we encourage our members to learn about other R/F teams.

- Geriatric Residency and Fellowship SIG // Academy of Geriatric Physical Therapy
- Neurologic Residency & Fellowship SIG // Academy of Neurologic Physical Therapy
- Oncologic Residency SIG // Academy of Oncologic Physical Therapy
- Orthopaedic Residency and Fellowship SIG (ORF-SIG) // Academy of Orthopaedic Physical Therapy
- Specialization SIG // American Academy of Sports Physical Therapy
- Task Force on Residencies and Fellowships // Academy of Acute Care Physical Therapy
- Pediatric Residency & Fellowship Information // Academy of Pediatric Physical Therapy
- EMG/NCV Residency Information // American Academy of Clinical Electrodiagnosis
Member Resources

- **RFESIG website** - Learn more about our SIG [here](#).
- **Our Hub Community** - Join us [here](#).
- **Think Tank Compendium** - Click [here](#) to access resources to enhance your residency or fellowship program. All APTA members have access to the Think Tank.
  
  **Please note:** The RFESIG Think Tank is an ongoing effort and will continue to review resources for inclusion in the Compendium. If you would like to share a resource with the Think Tank, please click [here](#).
  
  *We kindly ask that you cite the originating program for each resource that you incorporate into your R/F program.*

- **R/F Director & Coordinator Mentorship Program** - Click [here](#) to join the RFESIG’s mentorship program geared toward leaders of R/F programs.

Thank you to our members!
The RFESIG continues to grow and now has 278 members.

**Everyone is welcome!**
Invite residency and fellowship graduates, faculty, and program directors across all specialty areas to join our SIG.

Questions? Comments?

Contact us at
[rfeducationsig@gmail.com](mailto:rfeducationsig@gmail.com)

“When I was a young boy and I would see scary things in the news, my mother would say to me, 'Look for the helpers. You will always find people who are helping.'”

- Fred Rogers