WELCOME!
NCCE BUSINESS MEETING

> 2020 Virtual Education Leadership Conference
> Sunday 10/18/2020
AGENDA

- Year-in-review
- Announcements
- Placement Process Task Force Recommendations
- Pre-Admission Observation Hours Task Force Report
- Regional Networking Session Report
- ELP Strategy Meetings Update
- ACAPT Centennial Scholar – NCCE capstone project
- Farewell to outgoing Board members
- Installation of new officers
THE YEAR-IN-REVIEW

> Not that we want to re-live 2020...... but we did accomplish quite a bit!!

> We hope you enjoy this little video
THE YEAR-IN-REVIEW

> Not that we want to re-live 2020...... but we did accomplish quite a bit!!

> We hope you enjoy this little video

> Questions/comments
ANNOUNCEMENTS

Liaison CPI Advisory Group – 8 members

- Reps from CE SIG, PTAE SIG, NCCE, APTA technology work group, student assembly
- First meeting in Sept
- Working on mission statement
- Be a voice for stakeholders to optimize utilization
- Terms to be determined (1-2 years)

Chrissy Ropp, PT, DPT
Clinical Rep

Robin Galley, PT, DPT
Academic Rep
ANNOUNCEMENTS

> ACAPT DEI Consortium’s clinical education listening session
  *DCEs, SCCEs, and CI Reflections on the Black DPT Student Clinical Education Experience*
  Thurs Oct 29, 2020; 7:00-8:30pm EST
  Registration/login information forthcoming

> ELC/Webinar Planning committee’s upcoming webinar
  Thurs Nov 12, 2020; 7:00pm EST
  Registration/login information forthcoming
ANNOUNCEMENTS

> ACAPT motions – results related to clinical education

- AC-3-20 Opposition to direct monetary payment for clinical education experiences – PASSED
- AC-4-20 Promotion of non-monetary benefits for clinical education experiences – PASSED
- AC-8-20 Adopt updated common terminology in physical therapy education referred back to ACAPT Board of Directors
- AC-9-20 Amend Bylaws of ACAPT to grant membership to developing programs - DEFEATED
ANNOUNCEMENTS

Clinical education strategies for navigating COVID pandemic
- “Trickle down” effect
- Backlog of clinical experiences
- Limited capacity at clinic sites

> CESIG meeting request for discussion
> Recommend using ACAPT NCCE open forum discussion board
ANNOUNCEMENTS

- ACAPT NCCE clinical education open forum
  - Open access
  - Must register first to use
REGISTERING FOR OPEN FORUM

- Resources
- Clinical education
- Follow the link to registration
PLACEMENT PROCESS TASK FORCE
JOINT EFFORT: NCCE AND CE SIG

> Co-chairs: Christine McCallum (NCCE); Cindy Flom-Meland (CE SIG)
> Clinical educators: Terri Reed, Brittani Cookinham, Kristel Maes, Brett Windsor
> Academic clinical educators: Lori Nolan Gusman, Kelly Prescher, Janette Scardillo, Aaron Rindflesch
> PTA representatives: Christie Cohoon, Emily Reynolds
2. Adopt an annual clinical education placement timeline that guides initial placement requests, offer confirmations, notices of unused offers and secondary placement requests.

3. Provide professional training and development for Directors of Clinical Education and Site Coordinators of Clinical Education, especially for those new to these positions.

6. Recognize that only representatives employed by the academic program’s clinical education team are permitted to request clinical placement for physical therapist and physical therapist assistant students.
PLACEMENT PROCESS TF RECOMMENDATIONS
NCCE LEAD

> 4. Leverage relationships between/among clinical and academic programs as well as regional and/or national structures to improve communications, coordination and access to quality clinical education

> 8. Explore how a standardized model for terminal clinical education experiences may impact the placement process.

> 9. Investigate the use of a common technological platform to manage data related to clinical education experience placements.
1. Adopt a common definition of the term “placement process” which is then added to the profession’s Common Terminology Glossary.

5. Allocate appropriate resources to employ a team approach to administer the clinical education program led by the Director of Clinical Education and Site Coordinator of Clinical Education.

7. Expand clinical education research to include the topics of capacity, curricular models (i.e. timing, sequencing, and length), variety of requirements, and administrative issues such as workload.
PLACEMENT PROCESS TF RECOMMENDATIONS
MEMBERSHIP POLL

> Rank recommendations by level of priority
  ▪ Recommendations #4, #8 and #9 (NCCE lead)
  ▪ Recommendations #1, #5, and #7 (joint efforts)
  ▪ Recommendations #1, #4, #5, #7, #8, and #9

> Comments/questions in chat and use open forum on website
Please rank from highest priority to lowest:

#4: Leverage relationships between/among clinical and academic programs as well as regional and/or national structures to improve communications, coordination and access to quality clinical education.

#8: Explore how a standardized model for terminal clinical education experiences may impact the placement process.

#9: Investigate the use of a common technological platform to manage data related to clinical education experience placements.
Please rank from highest priority to lowest:

#1: Adopt a common definition of the term “placement process” which is then added to the profession’s Common Terminology Glossary.

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PRE-ADMISSION OBSERVATION HOURS

PRELIMINARY RESULTS
ELC OCTOBER 2020
TASK FORCE MEMBERS (STATE)

- Peggy Gleeson, DCE, PT, PhD (chair), TX
- Jamie Bayliss, DCE, PT, DHSc, OH
- Lara Canham, PT, DPT, OCS, CO
- Yvonne Colgrove, DCE, PT, PhD, KS
- Jamie Greco, DCE, PT, DPT, EdD, NY/NC
- Ha Hoang, DCE, PT, PhD, LA
- Hiroshi Kiyota, PT, DPT, OCS, NY
- Mira Mariano, PT, PhD, OCS, VA
- Gavin McBride, SPT, OR
- Casey McCarthy, SPT, PA
- Colette Pientok, PT, DPT, OCS, TX
- Judi Schack-Dugre, DCE, PT, DPT, MBA, EdD, FL
- Laura Stephens, PT, DPT, NCS, WV
- Molly Watkins, PT, DPT, NCS, MN
- Emma Wheeler, DCE, PT, DPT, MS, VA
ADVISORY PANEL AND SUPPORT GROUP

Advisory Panel

• Robin Galley, DCE, PT, DPT, OCS, CLWT, FL
• Jane Eason, PT, PhD, LA
• Jamie Kuettel, PT, DPT, NCS, GCS, AZ

Support Group

• Janice Howman, DCE, PT, DPT, MEd, NCCE Chair, OH
• Donna Applebaum, DCE, PT, DPT, MS, Past NCCE Chair, MA
• Sandy Brooks, Executive Director
PURPOSE OF THE TASK FORCE

• Explore current practices and perceptions of the use of pre-admission observation/volunteer hours and make recommendations to ACAPT membership
OBJECTIVES

• Review literature within and outside of PT about pre-admission exposure requirements
• Obtain data regarding current practices of education programs
• Solicit perspectives from academic programs, clinical sites, and students
• Analyze data
• Propose alternative strategies
• Develop recommendations for future practices
PROCESS AND TIMELINE

- December, 2019: Solicited participants and Finalized Task Force
- January, 2020: Began conference calls and planning sessions
- February-April, 2020: Conducted literature review and Developed survey
- April-June, 2020: Distributed surveys to 4 stakeholder groups
- June-August, 2020: Analyzed results and Developed recommendations
- August-October, 2020: Prepared final report and Preparing manuscript
- October, 2020: Will submit report to NCCE ➔ ACAPT
RESEARCH QUESTION

What is the value of the pre-admission observation hour requirement for DPT Programs and what is the impact of this requirement on all stakeholders?
<table>
<thead>
<tr>
<th></th>
<th>PT = 240 PROGRAMS ON PTCAS; 205 LISTED OBS HRS (85.5%)</th>
<th>PTA = 345 WEBSITES REVIEWED; 284 LISTED OBS HRS (82.3%)</th>
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<tbody>
<tr>
<td>Greater than 200</td>
<td>1</td>
<td>Greater than 60</td>
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<td>101-200</td>
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<td>20-50</td>
<td>106</td>
<td>20-29</td>
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<td>Less than 20</td>
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<td>4-9</td>
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4 STAKEHOLDER GROUPS

• Directors of Clinical Education of DPT Programs
• Admissions Committee Members of DPT Programs
• Clinicians (including CIs, SCCEs, other clinicians, managers)
• DPT Students (all levels as of May 2020 including those who graduated in May and June)
DISTRIBUTION METHOD

- All Sections/Academies/Chapters in APTA
- 6 states that provided an email list of their licensees at no cost (Arkansas, Florida, Ohio, Rhode Island, West Virginia and Wyoming)
- DCEs were sent an email, were asked to complete the DCE survey themselves, then send to their students, to their clinical site lists and to their Admissions Committee members
- Student Assembly
- Liaison (CPI Web)
- Snowball sampling
## Survey Respondents

(Number of Questions Per Survey)

<table>
<thead>
<tr>
<th>Group</th>
<th>Number</th>
<th>Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCEs</td>
<td>150</td>
<td>13</td>
</tr>
<tr>
<td>Admissions Committee Members</td>
<td>165</td>
<td>44</td>
</tr>
<tr>
<td>Clinicians</td>
<td>2,976</td>
<td>46</td>
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<tr>
<td>Students</td>
<td>1,222</td>
<td>37</td>
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<tr>
<td><strong>Total</strong></td>
<td>4,513</td>
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PERCEIVED PURPOSES OF OBSERVATION HOURS
BY STAKEHOLDER GROUP

DCEs:
1) to familiarize students with the depth and breadth of settings and patient populations within PT practice
2) to guide applicants in their pursuit of a career in the PT profession

Admissions Committee Members:
1) to assist applicants in making an informed decision regarding the pursuit of a PT career
2) to show applicant has met this criterion and should advance to the rest of the admissions process

Clinicians:
1) to obtain a thorough understanding and appreciation of the depth and breadth of settings, patient populations, tasks, obligations and responsibilities of the PT
2) to assess whether the profession is an appropriate fit for them, given the time and financial resources required
PERCEIVED PURPOSE OF OBSERVATION HOURS BY STAKEHOLDER GROUP

**Students:**

1) To provide an increased awareness and understanding of the career/profession of PT

2) To help to solidify PT as the desired career choice

3) To learn about the variety in physical therapy treatments, settings, and patients; this provides examples and exposure that is of benefit during PT school

4) To increase/improve the competitiveness of their application
NEXT STEPS

• Submit report to **NCCE Board ➔ ACAPT Board**, to include…
  • Full data analyses (quantitative and qualitative)
  • Alternative strategies suggested by the 4 stakeholder groups, to meet the perceived purposes
  • Recommendations for future practice
  • Recommendations for future research in this area
2020 REGIONAL NETWORKING SESSION
EXPLORING DEVELOPMENT OF A CLIN ED RESOURCE HUB

> Pre-session survey (N = 341; 230 clinicians – 111 academicians)
> Thurs October 15, 2020
> Approximately 85 participants
> Representatives from 21 of our 23 regions/consortia
WHY A CLIN ED RESOURCE HUB?

> Variety of resources available
  - Regional consortia webpages
  - APTA component websites
  - From individual programs/clinic sites

> STG: add to ACAPT’s clin ed resources

> LTGs:
  - Searchable database for PT education
  - Part of one-stop shop (ELP strategic planning)

<table>
<thead>
<tr>
<th>Impairment</th>
<th>Possible cause/dx</th>
<th>Typical Presentation</th>
<th>Pt’s Symptoms/Signs/Observations</th>
<th>Probability of Dx</th>
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Now provide a list of interventions to address the probable cause/dx related to the following, include clinical reasoning:

Regression

Current Pt Abilities

Progression

Other resources:

- Sharing ideas for development of a clinical education communication network (2019 Powerpoint)
- Effectiveness of local, regional, and national clinical education communications (2019 Powerpoint)
- Effectiveness of local, regional, and national clinical education communications (2019 report)
- Perspectives about validation and capacity (2017 Powerpoint)
- Structures, processes, and outcomes of regional seminars (2019 report)
2020 REGIONAL NETWORKING SESSION
SHARED SAMPLE RESOURCES

> Carolina Consortium
  ▪ CI/Facility of Year Award

> Florida Consortium
  ▪ PT/PTA CI Outstanding CI Award

> IACCC (S. CA)
  ▪ Collaborative Placement Scheduling

> New England Consortium
  ▪ Student Anxiety Presentation
  ▪ Student Data Form

> LIVE EVERY DAY PT
  ▪ ACL Virtual Reciprocity Ring

> NY/NJ Consortium
  ▪ How-To Guide for CI

> Northern Plains Consortium
  ▪ Collaborative Care Model

> Ohio-Kentucky Consortium
  ▪ Website development

> Texas Consortium
  ▪ CI Training
A wide variety of resources were piloted

Mix of clinical & academic resources

Categorization & vetting process was facilitated

- **Who** will benefit the most from this resource?
- **What** is the purpose of this resource?
- **What** are keywords to describe this resource?
- **How** would we determine if the resource met its purpose?
- **How** would you categorize this resource?
We want your help!

> Share ideas for making submission process user-friendly

> What resources are out there that we’re already using?

Call to Action!
ELP STRATEGY MEETINGS UPDATE

> Donna Applebaum
The partnership is intended to be a group with a more global perspective than that of any one organization.

The voting members of the partnership should commit to pursuing the interests of the whole profession.

The partnership shall strive to bring together all relevant stakeholders having an interest in promoting excellence in physical therapist education. The [Partners] will solicit input and feedback from the organizations represented on the [ELP] as well as other stakeholders.
The Partnership Today
https://www.apta.org/for-educators/education-leadership-partnership

Community Partners: APTA Acute Care / Private Practice Section
APTA Health Systems Council / PTA Education / Veterans Administration
Consideration of Clinical Education

- Academic-Clinical Partnerships
- Education Research Strategy
- Outcomes
- Essential Resources
Plan Development Timeline

- January 2017: Education Research Strategy Meeting
- October 2018: Clinical Education Strategy Meeting
- April 2019: Outcomes Strategy Meeting
- Sept 2019: Essential Resources Strategy Meeting
- March 2020: Academic-Clinical Partnerships Strategy Meeting
- July 2020: Closing/Culminating Strategy Process
- Feb 2021:
Next Steps:

• October-November: Consulting firm McKinley Advisors work with ELP to synthesize and prioritize strategy meeting outcomes

• November-December: Profession-wide feedback process (look for electronic survey)

• January-February: refine strategic framework

• March: report to be submitted to APTA Board of Directors
NCCE Capstone Project

- Review current benefits and challenges with existing clinical education data management systems
- Engage local, regional, and national clinical education stakeholders to assess needs and interest
- Consider feasibility and design concepts for the creation of a centralized database that could connect and support academic-clinical partnerships on a broader level
- Identify technology needs for developing a centralized clinical education database

Erin Green, PT, DPT, FAAOMPT, OCS
ACAPT CENTENNIAL SCHOLAR DISCUSSION

> Raise hand and we will bring you up in the queue

> Do you have any ideas, references, contacts and/or resources that you would recommend to Erin as she works through her investigation this coming year?
THANK YOU!!

OUTGOING BOARD MEMBERS
NOMINATING COMMITTEE

Marcia Himes, PT, DPT, DHSc
Chair, 2019 - 2020
Member, 2017 - 2019
ACADEMIC DIRECTORS-AT-LARGE

Susan Tomlinson, PT, DPT 2018 - 2020

Nancy Mulligan, PT, DPT 2018 - 2020
CLINICAL DIRECTORS-AT-LARGE

Chrissy Ropp, PT, DPT, GCS, CEEAA 2016 - 2020

Kara Lardinois, PT, DPT, C/NDT 2016 - 2020
INSTALLATION OF OFFICERS
SECOND TERM

> Tawna Wilkinson, PT, DPT, PhD – Vice Chair
> Jamie Bayliss, PT, MPT, DHSc – Secretary
> Matt Calendrillo, PT, DPT, BOCOP – Clinical Director-at-Large
> Janette Scardillo, PT, DPT – Nominating Committee Chair
INSTALLATION OF NEW OFFICERS ACADEMIC DIRECTORS-AT-LARGE

Lisa Black, PT, DPT
Creighton University

Chris Cesario, PT, DPT, MBA
Northeastern University
INSTALLATION OF NEW OFFICERS CLINICAL DIRECTORS-AT-LARGE

Colette Pientok, PT, DPT, OCS
Memorial Hermann’s Sports Medicine and Rehab

Tabitha Bonney Rozeboom, PT
Sharp Healthcare
INSTALLATION OF NEW OFFICERS NOMINATING COMMITTEE

Jamie Dehan, PT, DPT, MS, PhD
University of St. Mary
Thank you! National Consortium of Clinical Educators (NCCE) contact info:

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- www.linkedin.com/company/acapt