



ACAPT
NATIONAL CONSORTIUM OF
CLINICAL EDUCATORS (NCCE)

STRIVING FOR EXCELLENCE



WELCOME!

> CSM 2021 NCCE Open forum

TODAY'S PLAN

- > Brief Review of NCCE Task Force Work
- > Discussion of Next Steps with Placement Process Task Force Recommendations
- > Collecting Feedback!

NCCE BOARD MEMBERS



NCCE TASK FORCE WORK: REVIEW

- > Payment for Clinical Experience Task Force
 - Work completed
 - Motions presented and passed at ELC 2020
- > Observation Hours Task Force
 - Work completed
- > Placement Process Task Force*
 - Work completed

PAYMENT FOR CLINICAL EXPERIENCE

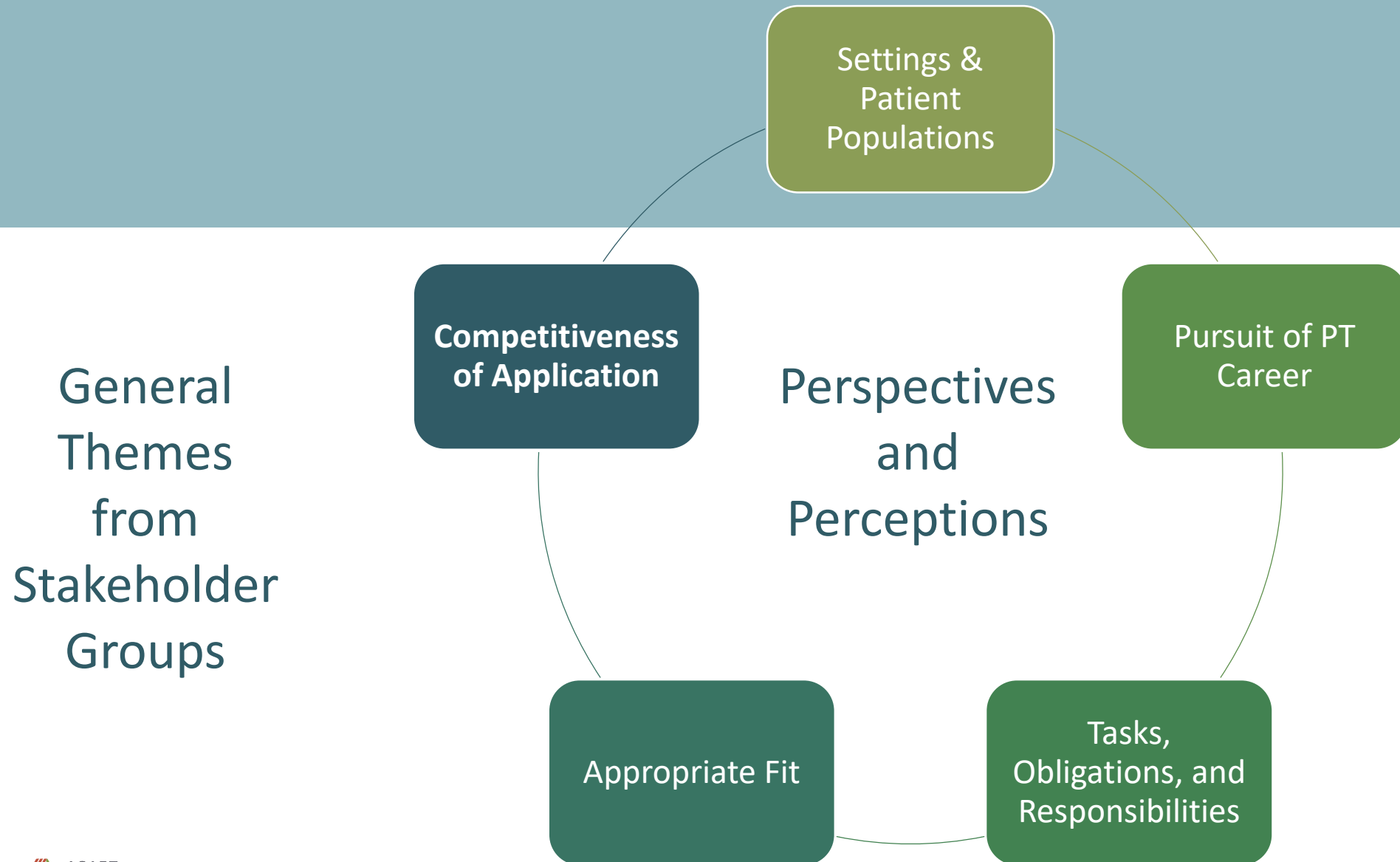
- > Position opposing payment for clinical education experiences
- > Promotion of non-monetary benefits for clinical education experiences
 - Further investigation needed

OBSERVATION HOURS

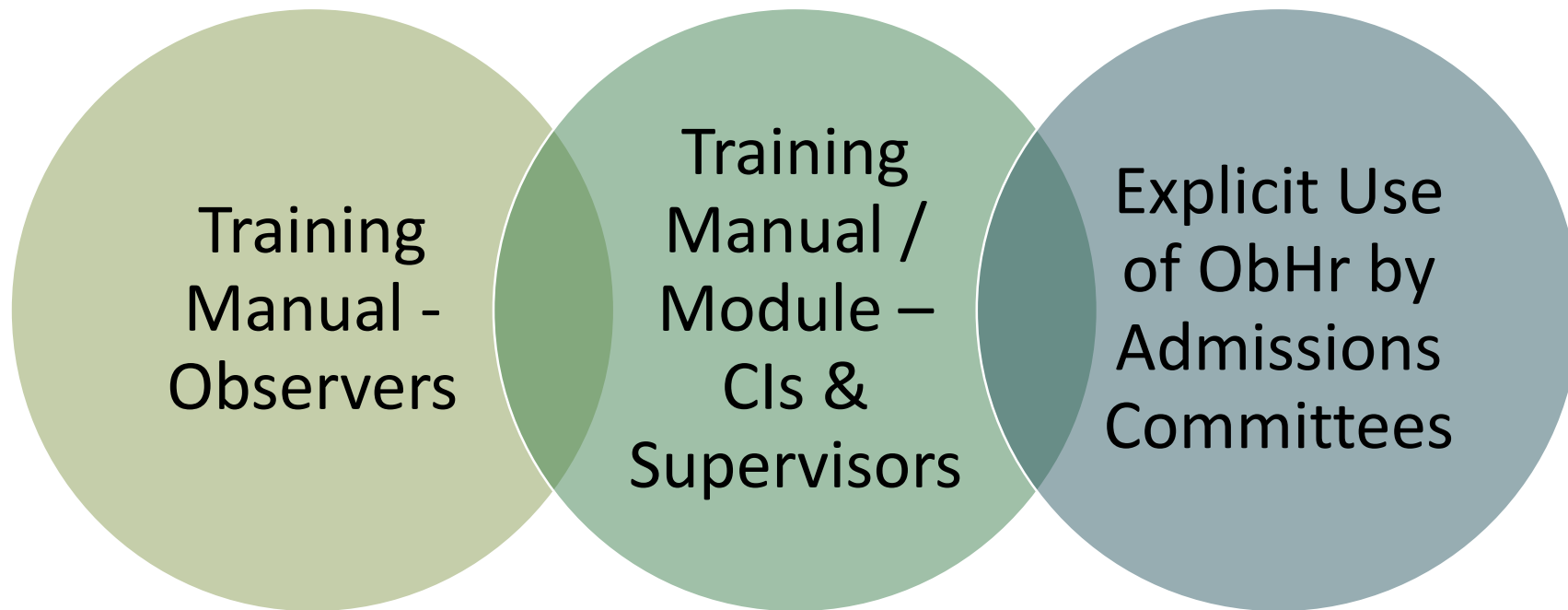
> Purpose

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

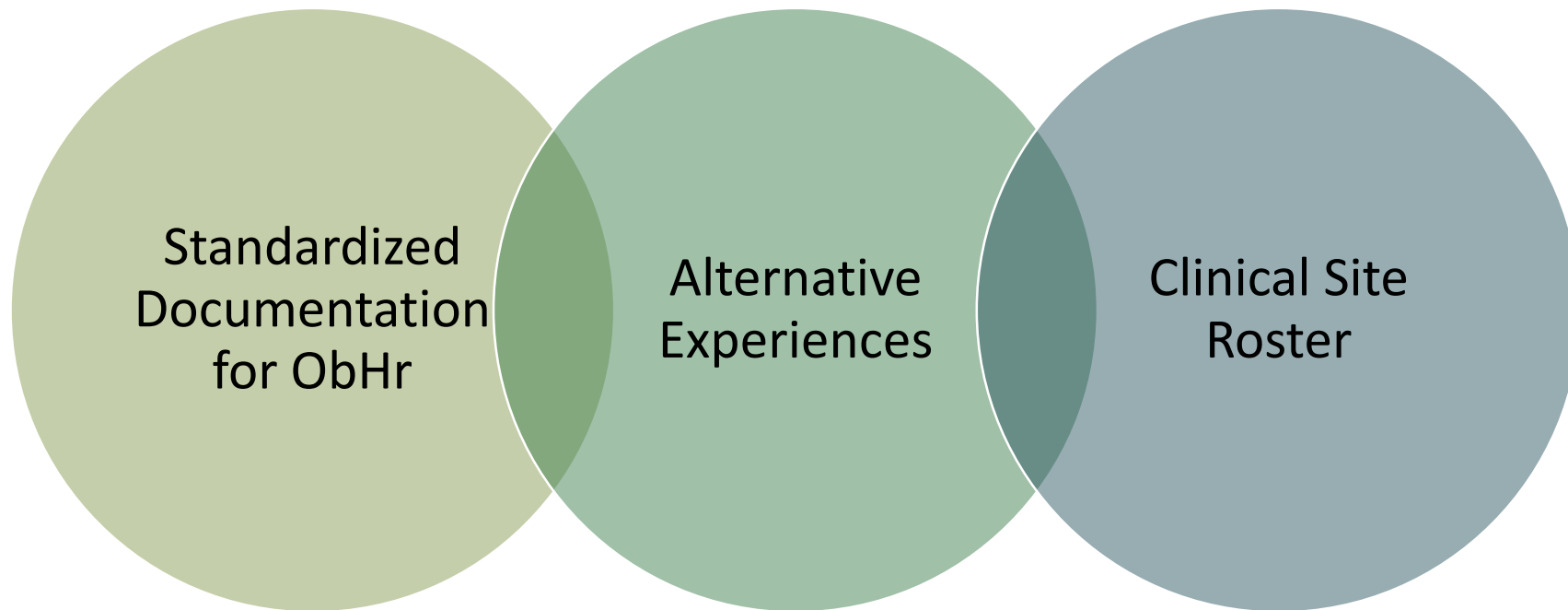
OBSERVATION HOURS



OBSERVATION HOURS - RECOMMENDATIONS



OBSERVATION HOURS - RECOMMENDATIONS



PLACEMENT PROCESS

> Purpose

- The purpose of the Task Force on the *Clinical Education Placement Process* was to explore the issue of the placement process for full-time clinical education experiences and formulate recommendations for the NCCE (ACAPT) and the CE SIG (APTE) consideration.

PLACEMENT PROCESS

TF RECOMMENDATIONS CE SIG LEAD

- > 2. **Adopt** annual clinical education placement **TIMELINE**
- > 3. **Provide** professional training and development for **DCE/SCCE**
- > 6. **Recognize** employees of academic program's clinical education team **REQUEST** clinical experiences

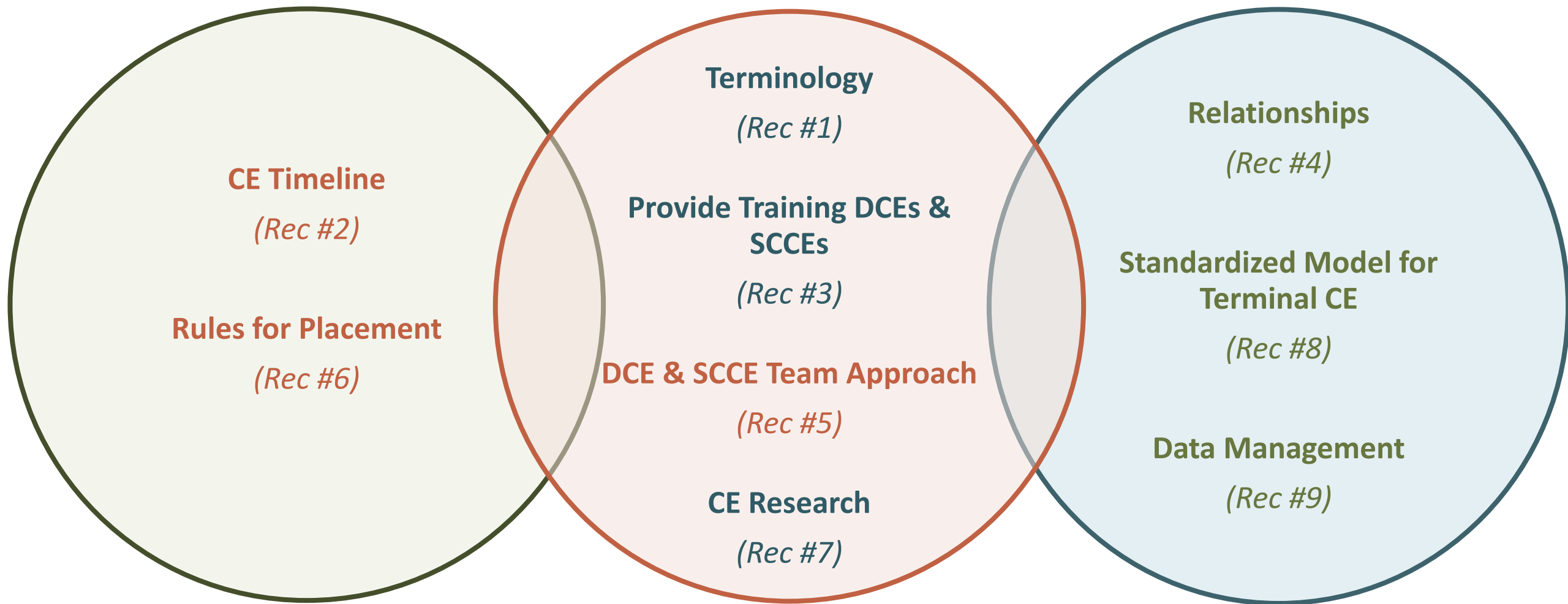
PLACEMENT PROCESS

TF RECOMMENDATIONS NCCE LEAD

- > 4. Leverage **relationships** between/among clinical and academic programs as well as regional and/or national structures
- > 8. **Explore** standardized model for terminal clinical education experiences and impact on PLACEMENT process
- > 9. **Investigate** a common technological platform to manage DATA

PLACEMENT PROCESS TF RECOMMENDATIONS CO-LEAD

- > 1. **Adopt** a common definition of the term “**placement process**”
- > 5. **Allocate** appropriate resources to employ a **team approach**
- > 7. **Expand** clinical education **RESEARCH**



Enhance Current
Placement Process

Placement Process Support

Investigate
Alternative Models

DISCUSSION AND FEEDBACK

- > What we know
- > Opinion polls
- > Breakout discussions



CURRENT PROCESS – WHAT WE KNOW

ADVANTAGES

- > **Individual** level process
 - Builds strong academic-clinical partnerships
- > Voluntary uniform mailing date
 - Attempts to provide equal opportunity
- > Well-established, familiar
 - Sites/programs have established policies and procedures
 - It has worked for 20+ years!

CHALLENGES

- > **Individual** level process
 - Shared clinic sites, overlap
- > Voluntary uniform mailing date
 - Not enforceable
- > Slots requested without information about need
 - Unused slots, FCFS offers,
 - Capacity concerns (settings, level)
 - Even after March mailing, programs call to solicit needed placements

CURRENT PLACEMENT PROCESS OPINION POLL

MINIMUM EXPECTATIONS

- > Is our current model working effectively for:
 - Students?
 - Clinical Site?
 - Academic Programs?

BEST PRACTICES/EXCELLENCE

- > Does our current model yield the best possible fit for:
 - Students' learning?
 - Clinical Sites' needs?
 - Academic Programs' requirements?

- > Is our current model working efficiently?

IS IT TIME TO INVESTIGATE ALTERNATIVES?

WHAT WE KNOW

FACILITATORS

- > Partnerships/relationships
 - Local A-C partnerships well-established
 - Many regional consortia well-established; collaboration emerging across regions
 - National organizations collaborating
- > Data management
 - Technology platforms available
- > Other health professions use alternative models
 - Body of evidence to learn from
- > Capacity issues
 - Have we reached the “tipping point”?

CHALLENGES

- > Leverage broader relationships
 - Competition still exists
- > Data management
 - Variability in vendors, purposes, functionality (data fields/terminology, queries, reporting, etc.)
 - Nowhere to get “big” data
- > CE curricula vary
 - Program uniqueness/identity
 - Variation appeals to different learners
- > Capacity issues
 - Limited data, research, uncertain if capacity issues are “real”

INVESTIGATING ALTERNATIVES

OPINION POLL

- > Is the perceived capacity issue coming from a shortage in supply (not enough slots offered) or more of a “distribution” issue (inefficiencies in process)?
- > Is the perceived capacity issue significant enough to warrant investigation of alternative placement models?
- > Do you think alternative placements models exist that could improve efficiency of the placement process?
- > Do you think use of a different placement process would solve capacity issues?

INVESTIGATING ALTERNATIVES

BREAKOUT SESSION #1

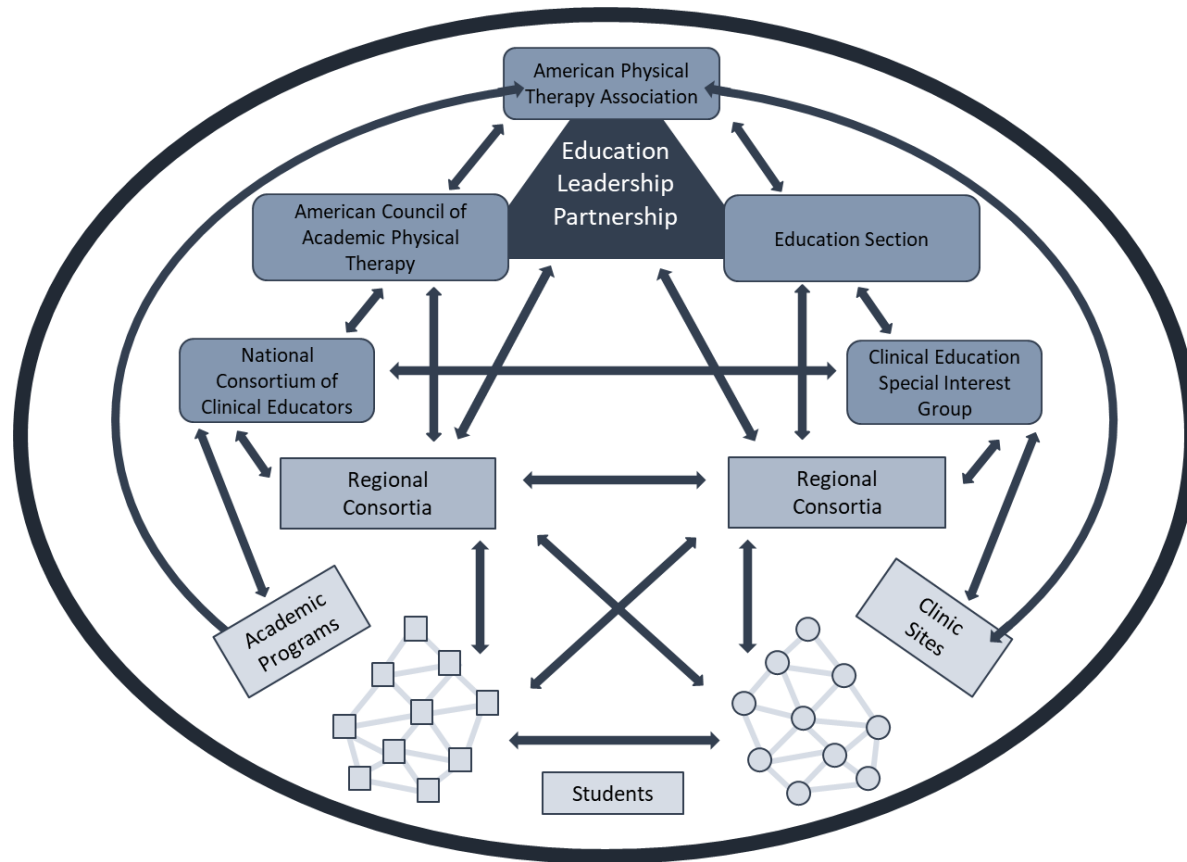
- > Perceived capacity issues
 - Academicians – Does March mailing process provide needed capacity for all of your placement needs (ICE, early experiences, terminal experiences, inpt settings, specialty settings, etc.)?
 - Clinicians – Are you getting requests for more placements than you can provide during March mailing process? Through solicitation after March mailing?
- > If you have experienced capacity issues....
 - Academicians – What have you done to meet your placement needs?
 - Clinicians – What have you done to handle increasing requests for placements?
- > How do you think alternative placement models could help us improve efficiency and/or capacity?

WELCOME BACK



WELCOME BACK!

OPINION POLL (LEVERAGING RELATIONSHIPS)



> The best framework for our profession's placement process is a network infrastructure built at which of the following levels:

- The local level
- The regional level
- The national level

Adapted from: Perspective in physical therapy education: creating a communication network to connect clinical education stakeholders

<https://journals.library.columbia.edu/index.php/jcept/article/view/1962>

OPINION POLL (STANDARDIZING TERMINAL CEE)

- > Is standardization of clinical education curriculum required for consideration of alternative placement processes?
 - Yes
 - No

- > Should investigation of alternative models focus only on terminal placements?
 - Yes
 - No

INFO GATHERING (DATA MANAGEMENT)

ACADEMICIANS

- > What platform do you PRIMARILY use to manage your placements:
 - Acadaware
 - Clinic Site Information Form (CSIF)
 - EXXAT
 - PT Education Manager
 - E*Value
 - Typhon
 - Homegrown database (e.g. Access)
 - Excel spreadsheets
 - Multiple
 - Other

CLINICIANS

- > What platform do you PRIMARILY use to manage your placements:
 - Acadaware
 - Clinic Site Information Form (CSIF)
 - EXXAT
 - PT Education Manager
 - E*Value
 - Typhon
 - Homegrown database (ie: Access)
 - Excel spreadsheets
 - Multiple
 - Other

INVESTIGATING ALTERNATIVES

BREAKOUT SESSION #2

- > Leverage relationships (recommendation #4)
 - Why should a CE network be built at the local/regional/national level?
 - How do we build upon our current academic-clinical partnerships? Our regional consortium structure? Our national collaborations?
- > Standardized terminal experiences (recommendation #8)
 - What clinical education experiences should alternative placement models be investigated for (ICE, early, intermediate, terminal, all experiences)?
- > Data management (recommendation #9)
 - Is a common technology platform needed/feasible for data management?

PLACEMENT PROCESS SUPPORT OPINION POLL

> Which area of support is most needed to successfully administer a clinical education placement process:

- Common terminology
- Training and development
- Employing a team approach
- Having sound clinical education research base

> Which area of support would you prioritize for enhancements:

- Common terminology
- Training and development
- Employing a team approach
- Having sound clinical education research base

FINAL OPINION POLL: CONSIDERING ALL THREE AREAS...

- > In moving recommendations forward, which area would you prioritize first:
 - Enhancing current placement process
 - Investigating alternative processes
 - Developing resources/support for placement process

- > Which area would be your lowest priority:
 - Enhancing current placement process
 - Investigating alternative processes
 - Developing resources/support for placement process

THANK YOU FOR PARTICIPATING

- > Continue discussion on ACAPT's clinical education open forum
- <https://americancouncilofacademiciansphysicaltherapy.wildapricot.org/Open-Forum-on-Clinical-Education/>



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HAPPY CENTENNIAL APTA!!

ONE MORE WEEK OF CSM.... NEXT WEEK'S ACAPT EVENTS

- > ACAPT Roundtable Meeting
 - Wed 2/24/2021 from 5-7pm EST
 - <https://acapt.org/events/event-details/2021/02/24/acapt-events/roundtable-liaison-meeting-at-csm>

- > PT Education Research Networking Event
 - Fri 2/26/2021 from 1-2pm EST
 - <https://acapt.org/events/event-details/2021/02/26/acapt-events/pt-education-research-networking-event-at-csm>



Thank you! National Consortium of Clinical Educators (NCCE) contact info:

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