

ACAPT Board Meeting

June 12, 12:00PM-6:00PM (eastern), Convention Center Room 205

Minutes

1. Call to order meeting of the ACAPT Board of Directors.

Present:

Terry Nordstrom, PT, EdD	President
Barbara Sanders, PT, PhD	Vice President
Barbara A. Tschoepe, PT, PhD	Secretary
Nancy B. Reese, PT, PhD, MHSA	Treasurer
Stephanie Piper Kelly, PT, PhD	Director
Kathryn Zalewski, PT, PhD, MPA	Director
Zoher Kapasi, PT, PhD, MBA	Director
Michael Sheldon, PT, PhD	Director
Lisa McLaughlin	APTA Staff
Shawne Soper, PT	APTA Board of Directors

Absent:

Rick Segal, PT, PhD FAPTA	Director
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Meeting guests throughout day:

Venita Lovelace-Chandler	University of Texas HSC
Mark Lane	FSBPT
Carol Liken	UT Health Science Center and ACAPT nominating committee
Jody Frost	APTA
Libby Ross	APTA
Ray Patterson	retired
Mary Jane Harris	CAPTE
Kendra Harrington	APTA
Greg Hartley	Chair ABPTRFE
Corrie Odom	CESIG Past Co-chair
Tammy Burlis	ABPTRFE
Kaitlyn Bianco	Student Assembly Board of Directors
Nancy Kirsch	FSBPT VP

2. APPROVED: May 6 meeting minutes. (Terry) ATTACHMENT 1

3. Updates

- 2014 HOD. (Barb S)
 - RC 12-14 Promoting Excellence in PT Professional Education adopted on consent with minor edits
 - RC 13-14 Best Practice for Physical Therapist Clinical Education adopted
 - RC 14-14 Adopt: Definition of an Underrepresented Minority in Physical Therapy Education adopted

- RC 18-14, Adopt: Endorsement of Interprofessional Education Collaborative Core Competencies adopted
- RC 21-14 Efforts to Curb Fraud and Abuse. APTA is planning to develop academic resources; Janet Bezner requested ACAPT support in efforts for the academic programs
Action: Janet to find out timeline and if/how we can serve as content experts for the effort
- Admissions traffic rule TF. (Mike) ATTACHMENT 2
Action: Terry is expecting a report from Libby at ELC on consequences of the standardized pre-requisites approved at past annual meeting.
Action: Lisa to check on timeline needed to bring motions forward to ELC, notify Board members so all reports/requests meet this deadline
- Financial Report. (Nancy) ATTACHMENT 3
Action: Need 2015 budget requests to Nancy by mid July 2014
Action: Plan to begin to develop investment policies/priorities with finance committee, with expectations to complete by end of calendar year of 2014, Nancy currently securing guidelines from other groups
Action: Nancy to design a budget request form for the Board members to use for future requests with assigned responsibilities.
- Observation Hours TF. (Kathy) ATTACHMENT 4
 - This task force continues to look for direction from the ACAPT Board
 - Currently, survey data shows a lot of diversity in use of observation hrs, there is no strong evidence of the value of observation hrs either in data or in literature. As a result, the task force doesn't have a recommendation particularly related to outcomes, but rather sees trends that illustrate some support for assistance with student career selection
 - How to best serve our members at this time on observation hrs? Board requests the following from the task force:
Action: Share what we know/don't know and encourage members to critically evaluate if/how to use observation hours within respective program in a report format that can be posted for members and may be highlighted at ELC 2014. The Board hopes a TF report may illustrate further study is needed, and educators would feel encouraged to explore these scholarship questions to better identify best practices for observation hours (which at this point we haven't identified). Included in the report might be:
 - Encourage the need for additional information on best practices of observations
 - What members report of their use/guidelines without bias to value at this point as members might want to know what others are currently doing
 - Encourage additional research on if/how observation hours are used for admission decisions
 - Encourage additional research on comparison data, those that use observation vs. those that do not and relate to student outcomes
- CE Summit. (Stephanie) ATTACHMENT 5
 - APPROVED (8-0): Motion to fund 5 additional stakeholders (\$4400.00) to attend the Summit.
 - **Action:** To maximize participation, the Board asked Stephanie and team to explore options for live stream.
- IPEC
 - ACAPT is now listed as a sponsoring organization on IPEC website as well as APTA
- Benchmark Task Force – Barb T report
 - **Action:** Request of all Board members, If your institution is not on the beta test 2 list, please consider participating in this phase of the project. Let Barb T know if willing to participate

- GRJ forum
 - Plans are in coming along nicely, expecting tribute to GRJ, keynote and ignite speakers in 8-10 session with café style discussion from 10:30-12 pm. For this first year, expecting a \$10,000.00 donation to cover costs of the forum.

4. Discussion

- ELC Update and ideas for Oxford Debate topics. (Kathy)
 - **Action:** Request board to think about/bring forward options to Kathy ASAP
- ACAPT endorsement of pain management competencies. (Terry) ATTACHMENT 6
 - APPROVED (8-0): Motion to endorse pain management competencies.
- Communications WG:
 - Board workgroup (Barb T, Zoher, Rick and Stephanie) met to explore options for developing guidelines for overall communication strategies amongst ACAPT and to our various stakeholders, reviewed guidelines from like organizations.
 - Group agreed to take on task of another Board workgroup charged to develop policy/procedures on ACAPT endorsements either by external stakeholders or members.
 - **Action:** Board suggests a liberal policy of use of ACAPT logo to help with promoting identity of organization, similar to APTA. Bring policy drafts on logo and endorsements back to Board by September 2014.
 - **Action:** Group to design communication strategy that will guide policy and practices that facilitate timely communication and collaboration with multiple stakeholders.
- Role of ACAPT FAL. (Mike) ATTACHMENT 8
 - Mike reviewed outcomes of his participation in 2014 APTA FAL as ACAPT liaison.
 - As a Board, we need to continue to define the role of liaisons to our various stakeholder groups.
- Response to CAPTE criteria revision. (Terry and Barb T)
 - ACAPT Board requested extension to CAPTE call for comments on V2 of CRG until July 15th so that we have time to gather and prepare thoughtful comments to CAPTE, this was supported by MaryJane present at this meeting.
 - **Action:** Board workgroup to meet while at this conference to prepare draft comments to V2, share proposed comments with members for input via website, finalize ACAPT comments and encourage individual members to include comments in their individual submissions as well.
 - **Action:** MaryJane to notify ACAPT members of extension and we will also include in upcoming BOTW.
- APTA Board WG on Movement System. (Sharon Dunn)
 - APTA Board expects to use the movement system as a foundation of the physical therapist identity in vision and strategic initiatives
 - Sharon shared PowerPoint of definition, principles/foundations of the use of movement system from her workgroup and requested Board input/feedback on definition of the Movement System.
 - **Action:** APTA workgroup is looking for input individually and collectively between mid-July/August to December, Lisa will include information on how to offer input via an upcoming BOTW
 - **Action:** Board to discuss at a later time if/how ACAPT would like to give collective feedback as this has educational consequences.
- Task force exploring Humanities Journal created by ACAPT. (Zoher) ATTACHMENT 9
 - DEFEATED (8-0): Motion to support the creation of an open access, peer reviewed Journal: the *Journal of Rehabilitation Humanities*. The recommendation requires the philosophical support

of ACAPT for this new venture and a financial commitment during the trial period of two years September 2014-August 2016 of \$15,000.

SS: The Board thanks the task force for its work, was impressed with the quality and comprehensiveness of the task force report, agrees with the need to expand options to share best practices in PT education and encourages development of avenues to support publication in the humanities. It was felt that other avenues to explore expanded opportunities for inclusion of such content have not yet been fully explored, and that committing expenses to possibly expand such journal publication frequency might meet the goal of this group while being in the best interest of more members within our organization.

4. Strategic Planning with Janet Bezner, APTA staff

- **Action:** Board workgroup will work with Janet to wordsmith and develop a draft document for Board to consider by our August 2014 meeting with the goal to share new strategic plan at ELC 2014 Business meeting.

ACAPT Board Meeting

Minutes for May 6, 2014, 2:00-4:00PM (eastern)

1. Call to order. (Terry) First organizational meeting of the ACAPT Board of Directors.

Present:

Terry Nordstrom, PT, EdD	President
Barbara Sanders, PT, PhD	Vice President
Barbara A. Tschoepe, PT, DPT, PhD	Secretary
Nancy B. Reese, PT, PhD, MHSA	Treasurer
James R. Carey, PT, PhD	Director
Susan S. Deusinger PT, PhD, FAPTA	Director
Stephanie Piper Kelly, PT, PhD	Director
Rick Segal, PT, PhD FAPTA	Director
Zoher Kapasi, PT, PhD, MBA	Director-elect
Michael Sheldon, PT, PhD	Director-elect
Lisa McLaughlin	APTA Staff
Shawne Soper, PT	APTA Board of Directors

Arrived late:

Kathryn Zalewski, PT, PhD, MPA	Director
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2. APPROVED: ACAPT bylaws as set forth in ATTACHMENT 1 were adopted.

SS: The incorporator filed the corporation's articles of incorporation with the Virginia Corporation Commission, and the Commission issued a certificate of incorporation dated 04/10/2014. Under Va. Code 13.1-820, when the certificate became effective, on 04/10/2014, the corporation's existence began. Under Va. Code 13.1-823 the board of directors of a corporation shall adopt initial bylaws for the corporation. Therefore, it is appropriate to adopt the bylaws as set forth in ATTACHMENT 1.

3. APPROVED: March 20 meeting minutes. (Terry) ATTACHMENT 2

4. Discussion:

- a. 2014 HOD Packet 1 - motions related to ACAPT. (Terry) [2014 HOD Packet 1](#)
 1. RC 13-14: Best Practice for Physical Therapist Clinical Education
Action: Barb S to work with Stephanie on writing a piece for Delegate community page on this RC that clarifies consultant role of ACAPT in upcoming house, historical of ACAPT, who we are, what are we hoping to accomplish at the upcoming CE Summit and its intended outcome. Offer to provide additional information on the consequence of this motion to PT education etc. Include

ATTACHMENT 1

information about that we are collaborating with APTA, Education Section, etc. to be accomplished in next few weeks.

2. RC 14-14 Adopt: Definition of an Underrepresented Minority in Physical Therapy Education

Action: Close to what ACAPT adopted. Board requested minor edits that this be focused on education vs. the profession in general. This supports that ACAPT is focused on being the voice of education and APTA the voice of the profession. Barb S to share information on dual responsibility of both groups in this motion since education is the pipeline to the profession.

3. RC 18-14 Adopt: Endorsement of Interprofessional Education Collaborative Core Competencies

Action: Barb S to post a message that ACAPT has endorsed these already and we will expect our members to incorporate these in our curriculum

b. Oxford Debate at ELC – topic ideas. (Kathy)

Action: hold for future meeting

c. Endorsing pain management competencies. (Terry) –

Action: Terry to write the blast of the week to go out to members to review and give input in next week so that we can consider how to move forward as a Board (endorse or not) at NEXT Board meeting. <http://www.acapt.org/index.php/pdf>

d. Liaison outreach – how's it going? (Terry)

A work in process with all Board members and we have recruited one new member as a result of this outreach thus far. Other comments from members were positive on the outreach.

Action: Continue efforts as appropriate and share outcomes.

5. Task Force appointment of ACAPT members (1 board liaison and 3-4 at large members of our choosing) to work with an Education Section member on developing an education research agenda that builds on the past work of the Education Section's effort.

Action: Terry will confer with Peggy Gleeson.

Action: Lisa will do a call to our members and will select from the group of interested members at NEXT Board meeting.

Action: All Board members to think of options, encourage them to volunteer and/or forward names to Lisa for Board consideration

Action: Terry to reach out to Bill B. regarding editing qualifications of Foundation SRC members, and potentials to work together with our potential donor to accept \$\$ on behalf of the GR Johnson Forum for Innovation.

Action: Board members will reach out to potential Foundation SRC applicants to submit applications for upcoming May call for new members, with the intention of bringing education researchers to the table.

6. Updates.

a. Observation Hours TF. (Kathy) – No report

b. Journal Feasibility TF. (Zoher) ATTACHMENT 3

1. TF Recommendation: new journal with editorial board as current task force members using Emery Mellan Foundation grant monies for the start-up. Requesting an open access on-line journal that will cost ACAPT about \$7,000-9,000 per year to sustain.

ATTACHMENT 1

- Action:** Board to review proposal and be prepared to vote at June Board meeting.
- Action:** Zoher to check with the Foundation to determine if this decision can wait until mid-June and/or need an electronic vote prior to this day. Much depends on if grant request can be turned around within a short timeframe (August 2014 deadline).
- c. ACAPT Board Communications WG. (Barb T)
Identified 4 markets for communication outreach/policies– internal institutional members, APTA members, external like member organizations, external community-general public
Action: Request for time on Board agenda in June – to gather input from Board members on their opinion of who can/should have the authority/approval to use the ACAPT Logo, once feedback gathered, WG will write policy, Lisa to get this topic on the June agenda.
Action: The endorsement workgroup will join the Board Communication group per Terry's request.
Action: Workgroup to develop a Broad Communication Strategy for ACAPT that defines strategies and action priorities after upcoming Board SP meeting and report back to board on this proposal by July 2014.
- d. Benchmarks for Excellence Task Force. (Barb T)
- e. Admissions TF. (Mike) ATTACHMENT 4
Action: Mike will work with the task force to move report due date forward to July so that if Board wants to take action on recommendations and/or move to ELC membership meeting that this is accomplished in timeline as designated by bylaws for annual meeting.
Action: Board members will not represent our respective members and instead be observers, clarifiers.
- f. Federal Advocacy Forum. (Mike) ATTACHMENT 5
Action: Board to continue dialogue on clarifying liaison roles with respective groups, seeking group input as well as what we as Board envision should be our role, to be discussed at later date (no timeline defined).
- g. CE Summit. (Stephanie) ATTACHMENT 6
Action: Stephanie to work with Lisa on expanding communication outreach for webinar participation and stakeholder invites to those outside the education community via options such as: PT news, APTA twitter etc.
Action: Board to represent ACAPT and not personal institutions as consultants, observers, clarifiers, etc., at the CE summit, to confirm our commitment to the process and seek insight on dialogue of summit and how summit outcomes will impact future ACAPT priorities and decisions. Board expenses for participation are included in Summit budget.
- h. CAPTE update. (Rick)
Action: Barb T – to follow up with Scott/MaryJane for planning on how ACAPT can solicit member feedback and submit an ACAPT collective response to this version.
- i. Diversity Task Force. (Zoher)
Action: Rick to share NPR reference with Zoher on legal interpretations of diversity recruitment.

Upcoming meetings:

June 12, 12:00 pm – 6:00 pm ET, ACAPT Board of Directors Meeting, Charlotte, NC

[APTA Unit –Education; Program 62 – Academic Services; Staff – L Ross; 05/20/2014; Staff Report]

**American Council of Academic Physical Therapy (ACAPT)
ADMISSIONS TASK FORCE
Meeting Minutes – May 20, 2014**

MEETING: The ACAPT Admissions Task Force met via web conference on Tuesday, May 20, 2014 at 11:00 am ET.

SUMMARY OF MEETING: The purpose of the meeting was to discuss the broad traffic rule areas for other associations and consider what rules might apply to physical therapist education programs.

INTRODUCTION OF NEW MEMBER: Dr David Lehman, chair of the task force, introduced and welcomed Mr. Tyler Tracy as the new student representative on the ACAPT Admissions Task Force. Mr. Tracy recently completed the admissions process and will begin his first year at Texas State University's physical therapist education program at the end of May.

UPDATE ON SURVEY: The ACAPT Admissions Task Force survey was released to the program directors of all PT education programs on May 12. A related announcement was posted on the PTCAS listserve on May 19. Faculty or staff who oversee the PT admissions process may be asked to respond on behalf of the program. Both PTCAS and non-PTCAS programs were encouraged to respond. Survey responses are due on June 2.

ADMISSIONS TRAFFIC RULES DISCUSSION: Pairs of task force members were assigned to broad traffic rule areas. Each pair reviewed the traffic rules for other associations and provided related recommendations for the rest of the task force to consider. The task force will reference the related traffic rules for other associations in its final report it to the ACAPT Board of Directors.

(1) Admission Decisions and File Considerations (Dillon, Wheeler)

A. Timeline for when offers are made

Programs should be allowed to make offers of admission at any time. Due to different class start dates, it was decided it would not be feasible to set a single deposit deadline for all PT education programs. Instead, any deposit deadline dates should be staggered for summer, fall, and spring start dates. The task force recommended programs not require a deposit no earlier than the following dates:

- December 1 for a summer start date
- March 1 for a fall start date
- June 1 for a spring start date

The intent of the proposed rule is to not require accepted applicants to pay a deposit until a common date passes. The task force will revisit the proposed deposit dates after survey results are available in June.

B. Timeline for when applicants must respond to offers

The task force considered a traffic rule that would require programs that were at least 3 months from the start of classes to give applicants at least 2 weeks to accept an offer of admission and pay a deposit. Programs that were less than 3 months from the start of classes could select a shorter window of time for deposits. The group considered whether 2 weeks was too stringent and whether applicants should have more time to respond to an offer of acceptance. If the rule granted more time, then programs would be able to set shorter response times later in the cycle. The proposed rule has potential enforcement implications. Ross will provide a summary of the number of programs that operate on a rolling admissions basis in PTCAS. Recommendations 1A and 1B are intended to benefit applicants more than programs.

C. Minimum requirements for file to be considered

No traffic rule was recommended. The decision was deemed to be program driven. Staff indicated at least one association specifies that programs must adhere to local admissions requirements, but does not list the specific requirements. The task force expressed concern that any related rule about minimum review requirements would create opposition among ACAPT member institutions to other proposed rules.

D. Minimum requirements for an applicant to be invited to interview

No traffic rule was recommended as item is program driven.

(2) Deposits (Nuciforo, Wheeler)

E. Common deposit date for all or by program start date

Common deposit deadlines were addressed in section 1A.

F. Refund policy – Non-refundable

Other associations are evenly divided on whether deposits should be refundable or non-refundable. Medicine allows deposits to be refundable until May 15 and veterinary medicine until April 15. The task force expressed concerns about refundable deposits and limiting the acceptance of deposits by a certain date. It recommended all deposits be non-refundable. Other associations require that non-refundable deposits be applied to the tuition as a specific traffic rule. A related rule for PT education programs may do the same. The maximum deposit amounts allowed in other traffic rules ranged from \$100 (medicine) to \$1000 (podiatric medicine). Ross will provide a summary of deposit amounts for programs in PTCAS. The task force will later discuss whether to propose a maximum deposit amount after reviewing the data. The university administration may not allow programs to require a deposit or may limit the deposit amount a program can charge. Programs may also require a two stage deposit process with the second and larger one required closer to the start of classes. Accepted applicants may still choose to

forfeit deposits if the tuition rate at competing program is lower overall. None of the other associations' traffic rules address the issue of multiple deposit dates or deadlines.

- G. Policy on offering or rescinding incentives to applicants, such as financial aid packages
Other associations have related policies about rescinding incentives to applicants who hold multiple acceptances for an extended period of time. Only the proposed pharmacy rules would allow for enticements to be withdrawn. The task force did not recommend any policy on the revocation of incentives.

(3) Wait Lists (Lehman, Nuciforo)

- H. Require accepted applicants required to withdraw from waitlists at competing programs
Other association traffic rules allow applicants to stay on waitlists regardless of whether they have received an offer of acceptance from another program or paid multiple deposits. Medicine allows applicants to hold multiple offers until April 30, including waitlist positions.
- I. Notifying or selecting applicants on waitlists
The task force did not recommend any rules related to notifying or selecting applicants for waitlists.
- J. Disclosing waitlist rank order to applicants
No associations currently require programs to disclose waitlist rank order to applicants. Ross will verify. Programs may choose not to reveal the waitlist rank order because it is fluid and there may be instances where someone is high on the waitlist in terms of metrics, but is not offered a position due to concerns about the individual in a particular area. Programs may be in constant contact with waitlist applicants to verify they are still interested. The task force expressed concern about giving too much information to the applicant when they don't understand the admissions process or review criteria. If misunderstood, the waitlist rank order could become a liability. Instead, programs may want to offer more ambiguous descriptions to applicants, such as, "You are near the top of the waitlist" or "Your chances for admission are high (not high) based on previous years." The task force advised that each program decide whether to reveal waitlist rank order to applicants based on local policies.

(4) Matriculation (Barnhart, Lehman)

- K. Establish new matriculation code in PTCAS
The task force was concerned that programs might not report a matriculation code to PTCAS, if created. The group decided there was an incentive for programs to enter matriculation code so may protect their new entering classes. The task force discussed whether programs should enter the matriculation code at the time of orientation or the start of classes, and decided the first day of class was preferable due to different schedules for orientation sessions.

L. Recommend PTCAS share the identify of program for matriculated code only

The task force did not address this issue during the meeting.

M. Program will not accept an applicant who matriculated into a competing program

Allopathic and osteopathic medicine do not allow schools to accept applicants who have in enrolled in competing schools. Optometry requires applicants to notify the other schools that they've been accepted and enrolled elsewhere. The task force discussed that student reporting of acceptances may not be accurate or timely. WebAdMIT facilitates the ability of programs in PTCAS to report matriculation codes and is likely to be more reliable.

The group may want to recommend the creation of a new applicant responsibility in PTCAS indicating applicants are responsible notifying programs of their enrollment decisions in a timely manner.

A matriculation policy may not be applicable to non-PTCAS program because they will not have access to the shared matriculation reports in WebAdMIT, once available. The group discussed that the matriculation report could be considered a benefit of PTCAS participation. Staff indicated it may not be operationally feasible to collect or report matriculation decision codes for non-PTCAS programs.

N. Policy that program will verify matriculation code before rescinding offer for applicant

Task force did not address this issue during the call.

B. **Enforcement** (Barnhart, Dillon)

O. Traffic rules are voluntary or enforced

Admission traffic rules are voluntary among other associations. Applicants are asked by some association to understand and comply with a professional code of conduct. Some associations allow admission offers to be revoked if an applicant does not follow the code of conduct.

P. Process for notifying (or punishing) offenders

The task force considered an enforcement policy that would be similar to how the clinical education consortium operates. As such, all programs would agree to follow the rules on a voluntary basis. Most adhere to the rules, but there are some outliers. The group discussed the need for a commitment from the programs, so that the profession could benefit from the rules as a whole. Options considered for enforcement included reporting multiple offenders to CAPTE and rescinding a program's voting rights in ACAPT. If there is no enforcement policies in place, programs may not be motivated to abide by the rules.

ATTACHMENT 2

TIMELINE: Dr. Sheldon indicated the ACAPT Board would like an opportunity to review the final report and recommendations of the task force before the Educational Leadership Conference (ELC) in October. To meet this deadline, the task force must complete its work by the end of the summer. Ross will verify the deadline and meeting dates with Lisa McLaughlin, Executive Director of ACAPT. The goal is to bring a final set of traffic rules, as approved by the ACAPT Board of Directors, for a vote at the ACAPT Business Meeting at ELC 2014.

NEXT MEETING: The next meeting will be conducted the week of June 16.

2014 ADMISSIONS TASK FORCE MEMBERS

Name	Institution	Participated in 5/20 Meeting
Bob Barnhart	Concordia University Wisconsin	*
Loretta Dillon	University of Texas El Paso	*
David Lehman	Tennessee State University (Chair)	*
Matthew Nuciforo	Rosalind Franklin University of Medicine and Science	*
Mike Sheldon	University of New England (ACAPT Board Liaison)	*
Tyler Tracy	Texas State University (Student Representative)	*
Emma Wheeler	Virginia Commonwealth University	*

Staff:

Libby Ross, MA, Director, Academic Services, APTA *

Lisa McLaughlin, Executive Director of ACAPT and APTA Student Assembly, APTA

** participated in meeting*

ATTACHMENT 3

**American Physical Therapy Association
Program 40 - Activity 6
For the Four Months Ending April 30, 2014**

	2014 YTD Actual	2014 Annual Budget	2014 YTD Pct of Budget
411 - Dues Income	\$5,000.00	\$450,000.00	1.11%
421 - Interest Income	\$0.00	\$7,500.00	0.00%
440 - Donations	\$90,000.00	\$98,500.00	91.37%
444 - Miscellaneous	\$0.00	\$0.00	0.00%
451 - Registration fees	\$0.00	\$58,300.00	0.00%
Total revenue, gains and other support	\$95,000.00	\$636,800.00	0.00%
600 - Salaries	\$24,957.00	\$0.00	44.61%
602 - Employee benefits	\$8,274.00	\$0.00	44.61%
603 - Payroll taxes	\$2,166.00	\$0.00	44.61%
612 - Maintenance / Repair	\$0.00	\$0.00	100.00%
613 - Occupancy	\$4,753.00	\$0.00	44.61%
614 - Stationery / supplies	\$379.00	\$6,330.00	5.99%
616 - Postage and shipping	\$0.00	\$2,780.00	0.00%
620 - Printing (general)	\$0.00	\$14,672.00	0.00%
625 - Audiovisuals	\$3,874.00	\$29,010.00	13.35%
630 - Travel expenses (staff)	\$250.00	\$4,810.00	5.20%
631 - Travel expenses (member)	\$21,743.00	\$105,820.00	20.55%
635 - Meeting services	\$5,821.00	\$185,910.00	3.13%
636 - Honoraria	\$0.00	\$2,500.00	0.00%
640 - Professional fees	\$68,125.00	\$189,000.00	36.04%
641 - Awards / grants	\$0.00	\$0.00	100.00%
650 - Dues	\$15,000.00	\$15,000.00	100.00%
Total expenses	\$155,342.00	\$592,108.00	26.24%
Change in net assets	-\$60,342.00	\$44,692.00	(135.02%)

ATTACHMENT 5

Webinar Topics/Dates

1. Webinar 1 – Introduction to the conversation (Jody/Val). 90 minutes
 - a. Papers/Topics = Jette, Recker Hughes, Deusinger
 - b. Dates = Weeks of June 16 and June 23.
 - i. **Thursday, June 19, 1:00 PM EST**
 - ii. **Tuesday, June 24, 7:00 PM EST**

2. Webinar 2 - Clinical Education Curricular structure (Corrie/Leesa). 60 minutes
 - a. Papers/Topics = Hakim, Rapport
 - b. Dates = Weeks of July 7 and 14.
 - i. **Tuesday, July 8, 12:00 Noon EST**
 - ii. **Thursday, July 17, 8:00 PM EST**

3. Webinar 3 – Partnerships (Peggy/Scott). 60 minutes
 - a. Papers/Topics = McCallum, Applebaum
 - b. Dates = Weeks of July 21 and 28.
 - i. **Wednesday, July 23, 8:00 PM EST**
 - ii. **Tuesday, July 29, 4:00 PM EST**

ATTACHMENT 6

Pain Management Competencies: Feedback

1. Maura Iverson, Northeastern University

- Thank you for the opportunity to read this. Here are some quick reflections on the document:
 - Domain 3 outlines substance abuse and tolerance, however it does not specifically outline the PT need to have a concrete knowledge of various aspects of pharmacology such as over the counter, prescription medications, timing, alternatives etc. I know it is most likely understood to be part of "all treatments and approaches" but I believe it is important enough to list separately. Without a separate mention it gears the student only toward misuse and overuse and not underuse which is equally important especially with older adults.
 - I would also add a sentence stating something such as "Provide ongoing research and evidence of the ability for physical therapy interventions to assist patients in managing their pain"
 - I was unclear from reading the document whether this will be used to address pain in children – is that inferred by special populations? Perhaps that can be more explicit

2. Mark F. Reinking, Saint Louis University

- As Program Director, I support the endorsement of these competencies. The PT faculty at Saint Louis University will review these competencies and examine our curriculum for the inclusion of these competencies over the next year.

3. Nannette Hyland, Mercy College

- The faculty of Mercy College support endorsing these competencies.
NOTE: Nannette noticed what looks to be a typo: Domain 4 item 2: Should the word be manage versus management → "Explain how to assess and management pain across settings and transitions of care."

4. Suzanne Gordon, Husson University

- Husson University DPT faculty support these competencies.

5. Kim Ferreira, Andrews University

- The PT faculty of Andrews University also support the endorsement of these competencies. We are growing our interprofessional education in our School of Health Professions as well and will present the competencies to the committee

6. Gary Krasilovsky - Hunter College of CUNY

- As Departmental Chair, I support the endorsement of these competencies. Due to time constraints, I did not survey the entire faculty. These are important competencies for any health professional.

ATTACHMENT 6

7. Stephanie Johnson Franklin Pierce University Arizona
 - Franklin Pierce University Arizona faculty support the endorsement.
8. Jim Creelman Idaho State University
 - I generally favor the creation and implementation of core competencies in pain management in PT education. There seems to be one aspect of pain management that may have been overlooked or de-emphasized in the competency list (or it may be embedded within one of existing competencies - perhaps the one relating to plasticity) that would also seem to be of particular importance to PTs. I'm referring to the risk that the pain associated with a specific painful musculoskeletal condition will transition to a more chronic state. The existing competencies seem to me to mostly relate to pain that has already become chronic. I wonder if for PTs who may play an important role in helping to prevent such a progression, a more explicit coverage of the methods of identifying patients at risk to make that transition and of preventing the transition would be a useful addition. Thanks for the opportunity to provide input.
9. Patty Nelson PT, ScD, Eastern Washington University
 - The faculty at Eastern Washington University support the endorsement of these competencies
10. Denise Wise, PhD, PT; College of St. Scholastica
 - After review of the material which is comprehensive and methodical, the College of St. Scholastica DPT faculty supports endorsement of these competencies.
11. Robert Post, Neumann University
 - The faculty of the DPT program at Neumann University support endorsing these competencies.
12. Anne Thompson, Armstrong Atlantic State University
 - The faculty of Armstrong Atlantic State University support the endorsement of these competencies.
13. Debbie Ingram, University of Tennessee at Chattanooga
 - University of Tennessee at Chattanooga votes yes to endorse.
14. Tony English, University of Kentucky
 - The faculty of the University of Kentucky also supports these competencies.
15. Scott Burns, PT, DPT, OCS, FAAOMPT/ Temple University
 - Temple University PT Faculty support the endorsement of these competencies.
16. Julia Chevan, PT, PhD, MPH, OCS; Springfield College
 - Springfield College supports ACAPT endorsement.

ATTACHMENT 6

17. Jody Cormack, CSULB

- The faculty of the DPT program at California State University, Long Beach support ACAPT's endorsement of these competencies.

18. Susan S. Deusinger PT, PhD, FAPTA

- The faculty at Washington University support endorsement of these competencies.

19. Michael Sheldon

- The faculty of the DPT Program at the University of New England support the endorsement of these competencies.

20. Jim Farris, PT, PhD; A.T. Still University

- The faculty of the DPT Program at A.T. Still University support the endorsement of these competencies by ACAPT.

**Report of the Humanities Journal Task Force
May, 2014**

Recommendation:

The task force recommends that ACAPT support the creation of an open access, peer reviewed Journal: the *Journal of Rehabilitation Humanities*.

The recommendation requires the philosophical support of ACAPT for this new venture and a financial commitment during the trial period of two years September 2014-August 2016 of \$15,000.

In support of the recommendation the task force is offering the following background and resource material in support of the Journal.

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Introduction:

The Task Force is very grateful that the ACAPT Board is willing to explore the possibility of a Journal that provides an outlet for the intellectualism that goes beyond science into the humanism that surrounds the patient/therapist relationship. There are journals in Medicine and Nursing that provide this outlet for intellectual expression, but nothing in rehabilitation. (Appendix D) In a profession that is still less than a century old this intellectual endeavor is consistent with our maturation from technician to a doctoring profession. We are pleased that the ACAPT Board had the vision to explore this avenue of expression that is currently lacking in our discipline.

One of the concerns identified by so many academic programs is the difficulty students have to think critically, to do self reflection and to understand the uniqueness of the relationships that develop between patients, and therapists. The work done in this area specific to physical therapy and to rehabilitation in general is not widely disseminated. The task force felt that there are several opportunities for physical therapists to share scholarly work within our professional journals, which include the *Physical Therapy Journal* and the Journals of all of the sections. The most logical place to submit work are The *Physical Therapy Journal* and *Journal of Physical Therapy Education*. Neither journal has a section that is dedicated to these types of submissions as is found in both Medical and Nursing journals, such as the column "piece of my mind" in *JAMA*. Members of the task force approached the editors of both journals, and members of the editorial board on different occasions and while they were receptive to the concept of writings in the humanities being disseminated they were noncommittal regarding the likelihood of these writing being included in the respective journals. Simultaneously the task force directed its efforts toward determining if there is an interest in a journal focusing on the humanities. All task force members engaged in this dialogue with colleagues locally and at CSM in an attempt to gauge interest. We considered a survey tool but realized that it would most likely not provide us with any more data than we already were gathering which was an enthusiastic yet cautious interest. Questions were raised regarding whether we were really ready for this type of academic discourse and would another journal dilute the very effective journals we already have. The task force, over the course of several meetings, determined that we were indeed more than ready as a profession to begin a dialogue in the humanities. Our strong traditional Journals would not be weakened by a journal dedicated to the humanities but rather strengthened as we disseminate a robust body of information that reflects another aspect of the core knowledge of our profession.

We determined that we wanted the journal to be as accessible as possible and began investigating open access options. We were offered the opportunity to try a platform through the Emory Center of Digital Scholarship (ECDS), and we realized that it would be more advantageous to gather true interest by producing a sample journal through Emory. While Emory can support this launch through a grant in the summer of 2014, we have to commit to finance the next year to ensure the process. The digital format is exactly the type of open access platform that we wanted, permitting us flexibility, as content is accepted it can be added with older content

archived. The cost of maintenance is affordable and it lends itself to the expansion. We envision the journal to evolve into an inter professional dialogue.

Our progress report to the ACAPT Board of Directors in March included our preliminary recommendation and request for financial support. This final report provides the detail of how we arrived at our recommendations.

Overview of the Task Force Work Plan:

The Journal Task force was appointed in September of 2013. The task force began its work in October, 2013 meeting via conference call (4) times and in person at the Combined Sections Meeting in Las Vegas. Throughout the period the task force communicated via email and dropbox sharing resources and documents. The Task Force responded to the charge contained within the resolution and charge passed by the ACAPT board. (Appendix A)

The task force determined that the following areas were a priority to explore and divided into work groups to investigate these areas. Following the initial meeting articles were distributed through drop box that related to the topics above in preparation for the information dissemination. The subgroups reported on their subject areas at the December meeting.

1) How are we defining humanities? (Bruce and Dolly)

Using the resources provided for the task force, the group had a discussion regarding the definition of humanities. The work of Barnard, Dayringer and Cassel, in 1995 expressed their interest in joining the richness of the humanities with the work of those practicing in health care. They point out that “the medical humanities explore questions of value and meaning in and around medicine.” For example, what the patient and family experience as a result of illness, the social context in which both illness and healing occur and the overarching theme of how society and the medical community interact are just some of the intersecting points between medicine and the humanities. Of course the ethical dimensions of the patient-therapist relationship are a profound part of this dialogue.

2) What other professions are doing. (Gail and Jennifer)

Medicine and Nursing are aware of the intertwining of the art of medicine and the humanities and have long found a home for this intellectual discussion within its literature. Psychologists and social workers have also incorporated the humanities into their body of intellectual work. In some cases a stand alone journal and in others a section of an established work. Some of the work has gone to an online journal format, for example, *The Intima: A Journal of Narrative Medicine*

The complexities of medical care require that we work together as a cohesive team, not to protect our “staked out professional territory” but rather to see what we have in common to share in a non-threatening environment where no one leads the team or owns the space. The humanities, art, literature, music, provide that neutral platform for the team to come together to reflect on tough issues. The *International Journal of Healthcare and Humanities*, though not focused on rehabilitation, provides a great perspective on a multidisciplinary journal.

3) Mechanics, Paper or electronic, peer reviewed, open access; (Jonathan, Tom and Nancy)

The subgroup explored the various mediums with particular interest in containing cost and providing accessibility to the professional community. It was determined that the format that would meet the conditions of access, and low cost would be electronic.

Public open access platforms, as well as a new opportunity from the University of Minnesota libraries content services program as well as the Emory Digital Media Center were explored. From the beginning it was determined and confirmed that the journal would be peer reviewed.

4) Should the Journal be restricted to physical therapy or open to other rehab disciplines and patients for submissions? *Reed, Carol and Sarah*

The task force analyzing the publications available determined that ultimately they would like to encourage submissions from all disciplines to the Journal however during the initial start up time, it would be most appropriate to pursue submissions from the physical therapy community. With the anticipated success of the journal and its on line format, we expect that the journal will be appealing to other disciplines. The potential disciplines that may be interested and their contact information is contained in Appendix B.

5) Can there be collaboration with an existing PT publication. *Gail and Nancy*

The task force explored the concept of this journal from different perspectives:

The first was the need for an avenue to disseminate intellectual material in the humanities related to physical therapy, the second perspective was to determine if there is a home for this material in an existing journal or the profession would benefit from the development of another journal. The journal editorial staff was receptive however they deal with a very large volume of submissions, JOPTE has publications planned through 2015. The regularity and sustainability of an effort to include more in the humanities did not appear feasible, (See area of focus #10 for more detail)

The ACAPT Board requested that the task force address nine areas regarding the feasibility of the journal with a report back to the Board by June of 2014. The response to those nine areas follows but before we address those areas we felt it important to demonstrate how the proposed Journal of Rehabilitation Humanities is consistent with the mission and ACAPT strategic plan. In addition another area of focus was added to address the need for a new journal vs. integration with existing publications.

The relationship of the proposed journal to ACAPT's Mission and Strategic Plan.

Creation of the *Journal of Rehabilitation Humanities* (or similar name), under the auspices of ACAPT, is fully consistent with ACAPT's mission:

"To serve and lead academic physical therapy by promoting excellence in education, scholarship and research, practice and service to improve the health and wellness of society."¹

Establishing a unique scholarly journal dedicated to human welfare, values, and dignity within rehabilitation will stimulate new and deeper intellectual reflection, communication, and action, as both authors and readers, that will enrich us as academicians and practitioners, and thereby promote higher health and wellness. The traditional scholarly pillars of research and education within the rehabilitation discipline of health care are prominent, but the humanism of rehabilitation is relatively obscure despite its importance. The *Journal of Rehabilitation Humanities* will allow new important scholars, with expertise in reflection, critical assessment, and advancement of the human condition, to arise and shape fuller excellence for all within our discipline.

Relationship of New Journal to ACAPT Strategic Plan

Creation of the *Journal of Rehabilitation Humanities* is also fully consistent with the first two long-range goals within ACAPT's Strategic Plan² :

- 1) To foster a culture of innovation, intellectual engagement, and leadership among faculty in all of their roles within the council and professional community (Cultural Transformation).**
- 2) To develop mechanisms for achieving excellence in academic physical therapy (Excellence).**

As a continuation from above, establishing a new journal dedicated to humanism within rehabilitation would expand our culture beyond science and education into the core of our human existence with attention to such values as dignity, hope, compassion, justice and a great many more that drive our patients and us into who we are. Such a journal could only achieve higher intellectual engagement and excellence in all of us.

¹ACAPT website – <http://www.acapt.org/>, March, 2014

²APTA Academic Council Strategic Plan, March, 2011

Response to the nine areas of focus requested by the ACAPT Board

- 1) **Interest within the ACAPT community:** As addressed in the overview of the task force work plan it is difficult to gauge interest of the theoretical construct of a Journal with such a different focus. The opportunity to try out the concept of the Journal is a wonderful opportunity.
- 2) **Feasibility:** The open access platform provides an opportunity to produce this scholarly multimedia digital journal at a lost cost, with ease of access and broad potential for dissemination making this a feasible option.
- 3) **Cost:** We have the opportunity to take advantage of the Mellon grant that the Emory Center for Digital Scholarship has through August of this year. This will provide two-three students to assist with web design and uploading content. To continue the Journal a **commitment from ACAPT for two years of \$16,000**, year one \$9,000 would be requested and year two \$7,000 is requested. If the Journal is successful it should cost about \$6,000 a year to maintain and the editorial staff will be encouraged to seek advertising support within the interested academic community to offset the costs.
Maintenance Cost includes on going technical support for programming \$75-\$150/hour.
The rest of the cost would include interface with the Drupal platform permitting seamless contributions from authors with a variety of media and the ongoing expense for server space and cloud storage.
- 4) **Mission:** The *Journal of Rehabilitation Humanities* sponsored by ACAPT, encourages dialogue among health care professionals, patients, families, and caregivers that describe the human condition as it experiences the impact of illness and or disability. The journal invites narratives, art, and prose, submissions of any genre that describes the essential human element of rehabilitation. The special relationship between the patient and the health care provider, often lost in layers of medical technology, are shared in the electronic pages of this journal. The journal provides a venue for scholarly discourse on topics that focus on rehabilitation from the uniquely human perspective that patients, and providers share.
- 5) **Vision:** The editors of the *Journal of Rehabilitation Humanities* sponsored by ACAPT, believe that the contemporary and future practice of healthcare lies at the intersection of humanities and clinical science. This journal seeks to inspire and advance scholarship and education in the humanities for healthcare professionals who work in rehabilitation, to foster patient-centered care and mindful practice, and to explore the human experiences of individuals living with disabilities as well as healthcare professionals and families caring for the patients they will become.

6) ***Purpose and Goals:***

The purpose of the ACAPT Journal of Humanities (Journal of Humanities in Rehabilitation) is to provide a forum for publication, discussion, narrative expression, and dialogue regarding the human experience of physical therapists, patients, families, and other health care providers involved in physical therapy, rehabilitation, and health care.

The Journal welcomes contributions focusing on the human experience of individuals who confront movement and life limitations, disability, injury, disease, and the shared process of enablement through art, literature, and narrative.

Goals:

- ❖ Develop a forum through which research and scholarship regarding the humanities in practice will be disseminated.
- ❖ Create a multi dimensional platform to share work focusing on cross cultural approaches to rehabilitation expressed in literature, poetry, visual arts and film.
- ❖ Organize an environment that encourages inter professional communication across literature, poetry, ethics, anthropology, values based perspectives, history of rehabilitation, music, religious, and spiritual perspectives.

7) ***Governance and Operating Rules:***

Governance: The Journal, sponsored by ACAPT will be responsible to the Board of Directors, with a Board Liaison as the contact person.

Editorial Board: The initial editorial board will be physical therapists. The editorial board will start small initially to develop the peer review guidelines and solicit scholarly publications for the initial journal . The following members of the task force have volunteered to be on the initial editorial board, with additional members to be solicited as the Journal grows in depth. The ACAPT Board of Directors would appoint an Editor.

Editorial Board: Sarah Blanton

Jim Carey

Bruce Greenfield

Gail Jensen

Nancy Kirsch

Dolly Swisher

Peer Review Process: For the first journal, because of the short time frame, publications will be solicited, the following people will be approached: Lois Nixon, Amy Hadd, Ruth Purtilo, Randy Kolodney, Jon Nordrum. An internal peer review process will be developed and reviewers solicited beyond the editorial board for external review. The editorial board will develop the submission guidelines subject to the approval of the ACAPT Board.

Journal Format: The Journal Sections will be developed, but to date the task force has recommended the following be considered on an on going basis:

- a) Perspectives
- b) Research
- c) Teaching
- d) Patient/Family narrative
- e) Student blog/reflections
- f) A dedicated column for clinician narrative reflections (similar to the *JAMA* "Piece of my mind." column.
- g) Presentations: video, audio clips, texts from exhibits, conference proceedings.
- h) Reviews:
 - Media: Music, film
 - Literature/Poetry Review
 - Photo/video essays

8) *Impact on physical therapy faculty and students*

The clinical focus of the profession is centered on interventions yet at the very heart and soul of a therapeutic relationship is the trust and communication that the practitioner and the patient must establish. These relationships are often best expressed through reflection and are often visual or captured through some other medium. The Journal provides an opportunity for faculty and students to explore the clinical provision of PT through a different lens.

9) *Impact on related professions*

The proposed journal would be open to submissions from other health care providers, especially welcoming submissions from those in occupational therapy, speech language communication, nursing, and medicine. The focus of the journal is on the physical therapy perspective. A list of the related professions and their contact persons is in Appendix B

10) Considering a new Journal vs. integration into an existing professional journal. The task force discussed the possibility of integrating "humanities content" into existing professional journals (Physical Therapy and Journal of Physical Therapy Education). The task force's review and discernment process included conversations with the editors of the Physical Therapy and Journal of

Physical Therapy Education as well as a review of existing journals in other health professions. The editors of both Physical Therapy and Journal of Physical Therapy Education are open to considering content that focuses on the humanities that would be part of the regular submission and review process.

Given the proposed purpose of the ACAPT Journal of Humanities (Journal of Rehabilitation Humanities) is to provide a forum for publication, discussion, narrative expression, and dialogue regarding the human experience for not only physical therapists but also patients, families, and other health care providers involved in physical therapy, rehabilitation, and health care, the task force sees this broader purpose is best addressed with a new journal. This however, does not eliminate the potential for submissions to other physical therapy journals. The proposed format for submissions is quite broad including rehabilitation in literature or poetry, ethics, values based perspectives, history of rehabilitation, music, religious, spiritual perspectives, inter professional communication, anthropology, culture and sociology, cross-cultural approaches to rehabilitation, and personal experiences of rehabilitation or disability as portrayed in the visual arts and film. This broad array of formats lends itself best to a new type of journal.

Conclusion: On behalf of the task force we want to thank the ACAPT Board for considering this important new venture. The task forces wishes to extend a special thanks to Anne Beshnett and Jonathan Koffel, Health Science Librarians at the University of Minnesota for their professional guidance and assistance with this project. Their knowledge was invaluable and we are very grateful to them.

Appendices:

Appendix A: The ACAPT Resolution

Appendix B: Related Professions Contact list.

Appendix C: List of Task Force members

Appendix D: Humanities in Medicine related journals

Appendix A

The ACAPT resolution

Whereas, ACAPT was formed to promote intellectualism and academic excellence, and

Whereas, intellectualism (i.e. the faculty of thinking) is fundamental to advancing the humanities in rehabilitation, and

Whereas, intellectual discourse need not be restricted to data-driven research but can also include thought-provoking essays, prose, poetry, letters, memoirs, and audio/visual/movement arts to advance humanitarianism,

Whereas, no scholarly journal currently exists focused on the humanities in rehabilitation;

Therefore, be it resolved that a Journal Task Force be created by the ACAPT Board of Directors to explore a new open-access electronic journal published by the ACAPT dedicated to the humanities in rehabilitation. The task force should attend to 1) interest within the ACAPT membership, 2) feasibility, 3) cost, 4) mission, 5) vision, 6) goals, 7) governance and operating rules, and 8) impact on physical therapy faculty, 9) impact on related professions, and 10) a deadline of June, 2014.

Rationale: There are currently four journals devoted to humanities in medicine but they do not represent rehabilitation. Such a journal would offer a new academic forum for scholarly-minded physical therapy faculty, and faculty across all rehabilitation disciplines, to contribute and stimulate in colleagues creative thoughts that would help to advance the human condition in rehabilitation. Opening submissions to all rehabilitation disciplines could enrich the published content as well as the current movement cultivating interdisciplinary interaction. ACAPT, as the recognized leader in physical therapy education, would be the recognized publisher but the journal's editorial board could be eclectic with representation from multiple disciplines. Attention to non-research would not need to be viewed as an abrogation of our scientific roots. The mission could express that there are already journals dedicated to evidence-based practice and that the less quantifiable but equally impactful humanitarian forces of hope, trust, justice, etc., deserve as much scholarly attention. The relationship to promoting excellence in physical therapy education stems from the creative thinking and expression that faculty would engage in, with associated diffusion into the student ranks. It would be inappropriate to try to fit this cause into one of the existing physical therapy journals as the mission of the new journal would be entirely different – on thought-based evidence as opposed to data-based evidence.

**Appendix B Related Professions Contact List:
Groups with possible interest in ACAPT journal**

ORGANIZATION	PRESIDENT	EXECUTIVE DIRECTOR	MAILING ADDRESS	PHONE/FAX
American Occupational Therapy Association	Virginia Stoffel, PhD, OT, BCMH, FAOTA	Fred Sommers	4720 Montgomery Lane, #200 Bethesda, MD 20814-3449	310.652.2682 / 310.652.7711
National Association of Social Workers	Jeane W. Anastas, PhD, LMSW	Angelo McClain, PhD, LICSW	750 First Street, NE, Suite 700, Washington, DC 20002-4241	
Clinical Social Work Association	Stephanie Hadley, LCSW		P.O. Box 10, Garrisonville, VA 22463	703.340.1456 / 703.269.0707
American Therapeutic Recreation Association	Norma J. Stumbo, PhD, CTRS, FALS njstumbo@gmail.com 309.454.4582 (w) 309.660.2093 (c)		629 North Main Street, Hattiesburg, MS 39401	601.450.2872 / 601.582.3354
American Speech and Hearing Association	Elizabeth S. McCrea, PhD, CCC-SLP	Arlene Pietranton	2200 Research Boulevard, Rockville, MD 20850-3289	301.296.5700 / 301.296.8580
American Academy of Physician Assistants	Lawrence Herman, MPA, PA-C, DFAAPA, President James E. Delaney, PA-C, Chairman of Board	Jennifer L. Dorn, CEO	2318 Mill Road, Suite 1300, Alexandria, VA 22314	703.836.2272 / 703.684.1924
American Dental Association	Dr. Charles H. Norman	Dr. Quinn Dufurrena	211 East Chicago Ave., Chicago, IL 60611-2678	312.440.2500
American Dental Hygienists' Association	Denise Bowers, RDH, PhD	Ann Battrell, MSDH	444 North Michigan Avenue, Suite 3400, Chicago, IL 60611	312.440.8900

American Pharmacists Association	Steven T. Simenson, BSP Pharm, FAPhA, FACA, FACVP	Elizabeth K. Keyes, COO 202.429.7597	2215 Constitution Avenue NW, Washington, DC 20037	202.628.4410 / 202.783.2351
Brain Injury Association of America	Daniel S. Chamberlain, Esq., Chairman of Board	Susan H. Connors, BA – President and CEO	1608 Spring Hill Road, Ste 110, Vienna, VA 22182	703.761.0750 / 703.761.0755
National Spinal Cord Injury Association	David C. Cooper, Chairman of Board	Joseph Gaskins, Interim President and CEO	75-20 Astoria Blvd., Jackson Heights, NY 11370	718.803.3782
Paralyzed Veterans of America			801 Eighteenth Street, NW Washington, DC 20006-3517	800.424.8200
Muscular Dystrophy Association	R. Rodney Howell, MD Chairman of the Board	Steven M. Derks, President and CEO	3300 E. Sunrise Drive, Tucson, AZ 85718	800.572.1717
Alzheimer's Association	Gerald Sampson, Chair	Harry Johns, President and CEO	225 North Michigan Ave., Fl 17 Chicago, IL 60601	312.335.8700 / 866.699.1246

Appendix C: Task Force Members:

Anne Beschnitt	University of Minnesota	
Sarah Blanton	Emory University	
Jim Carey	University of Minnesota	ACAPT Board Liaison
Jennifer Collins	Nazareth College of Rochester	
Bruce Greenfield	Emory University	
Reed Humphrey	University of Montana	
Gail Jensen	Creighton University	Co-Chair
Nancy Kirsch	Rutgers University	Co-Chair
Jonathan Koffel	University of Minnesota	
Carol Likens	University of Tennessee	
Tom Mohr	University of North Dakota	
Dolly Swisher	University of South Florida	
Zoher Kapasi	Emory University	ACAPT Board Liaison
Lisa McLaughlin	APTA	Staff

Appendix D

Medical Humanities Journals

Journal of Medical Humanities

Yale Journal for Humanities in Medicine

Hektoen International: A Journal of Medical Humanities

Medical Humanities (BMJ)

Bellevue Literary Review

Medical Journals with Humanities Related Sections

Annals of Internal Medicine – On Being A Doctor, On Being A Patient, Ad Libitum (poetry)

JAMA – A Piece of My Mind

New England Journal of Medicine – Perspective, Medicine & Society

American Journal of Nursing – Art of Nursing, Viewpoint, Reflections

Medical Humanities Journals

Journal of Medical Humanities

<http://www.springer.com/new+%26+forthcoming+titles+%28default%29/journal/10912>

- Publishes original papers reflecting the journal's broadened perspective on interdisciplinary studies of medicine and medical education.
- Explores research emerging from three areas of investigation: medical humanities, cultural studies, and pedagogy.

Yale Journal for Humanities in Medicine

<http://yjhm.yale.edu/>

- Sponsored by the Program for Humanities in Medicine at Yale to encourage dialogue among physicians, nurses, nurse-practitioners and physician-assistants, students, and all other health-care workers.
- Fosters humanism in medicine, however defined.
- Welcomes contributions in poetry or prose, literature and other art reviews or opinion pieces, from anyone with something to say about medicine or medical care in a pleasant and literate fashion.

Hektoen International: A Journal of Medical Humanities

<http://www.hektoeninternational.org/>

- Explores the interdisciplinary field of the medical humanities.
- Features articles on the medical humanities from a wide spectrum of global and cultural perspectives.
- The journal also maintains an online art gallery and library for archiving artwork and articles.

Medical Humanities (BMJ)

<http://mh.bmj.com/>

- Aims to encourage a high academic standard for this evolving and developing subject and to enhance professional and public discussion.
- It features original articles relevant to the delivery of healthcare, the formulation of public health policy, the experience of being ill and of caring for those who are ill, as well as case conferences, educational case studies, book, film, and art reviews, editorials, correspondence, news and notes.

Bellevue Literary Review

<http://blr.med.nyu.edu/>

- Published by the Department of Medicine at NYU Langone Medical Center .
- Forum for illuminating humanity and human experience.
- Invites submissions of previously unpublished works of fiction, nonfiction, and poetry that touch upon relationships to the human body, illness, health and healing. We encourage creative interpretation of these themes.

Medical Journals with Humanities Related Sections

Annals of Internal Medicine – On Being A Doctor, On Being A Patient, Ad Libitum (poetry)

<http://annals.org/public/authorsinfo.aspx>

- On Being a Doctor submissions are short essays on illuminating experiences in practice.
- On Being a Patient submissions are essays by physicians on their own experiences of illness and accounts written by patients or those close to them.
- Ad Libitum – poetry

JAMA – A Piece of My Mind

<https://jama.jamanetwork.com/collection.aspx?categoryid=5766>

- Most essays published are personal vignettes (eg, exploring the dynamics of the patient-physician relationship) taken from wide-ranging experiences in medicine.
- Occasional pieces express views and opinions on the myriad issues that affect the profession.

New England Journal of Medicine – Perspective, and Medicine and Society

<http://www.nejm.org/page/author-center/article-types>

- Perspective articles are brief, accessible pieces covering a wide variety of timely topics of relevance to health care and medicine.
- Medicine and Society articles cover a range of social aspects of medicine and health care, including medical sociology, anthropology, history, and ethics, among other areas.

American Journal of Nursing – Art of Nursing, Viewpoint, and Reflections

<http://www.editorialmanager.com/ajn/>

- Art of Nursing submissions of poetry, very short “flash” fiction, and visual art.
- Viewpoint submissions present a clear point of view in a distinctive voice on a topic that may or may not be controversial. Opinion, reflection, debate, and musing are all acceptable in this column.
- Reflections is a forum for previously unpublished personal stories exploring any aspect of nursing, health, or health care.

Medical Humanities Journals

Journal of Medical Humanities

Yale Journal for Humanities in Medicine

Hektoen International: A Journal of Medical Humanities

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Bellevue Literary Review

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JAMA – A Piece of My Mind

New England Journal of Medicine – Perspective, Medicine & Society

American Journal of Nursing – Art of Nursing, Viewpoint, Reflections