

As Dreams Became Realities: 1980 through 1985
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The Orthopaedic Section is celebrating its 25th anniversary during 1999. The strength the Section now enjoys was made possible through the foresight and energy of a group of physical therapists of great purpose, vision, and organization acumen. Our 25th year seems an appropriate time at which to recount their efforts and to acquaint ourselves with the people, events, and initiatives that helped shape the Section in its first quarter century.

This article is the second of a 4-part series depicting the Orthopaedic Section History. It covers the period from 1980 through 1985. Stanley Paris and Dorothy Santi eloquently described the events leading to the Section's inception in the January issue of *Orthopaedic Physical Therapy Practice*. They gave us fascinating insights into the challenges and victories that occurred during the 1970s, our Section's formative years. We hardly knew an infancy! With membership doubling every 2 years between 1974 and 1979, we were off the growth chart of traditional human development. You could say that we hit the ground running.

As the Orthopaedic Section embarked upon the 1980s, we faced the stark realization that we must assume *responsibility* for the institution we had created with our youthful energy and enthusiasm. We had come of age. Our founding leadership had tested the waters and established the Section as a significant component of the APTA. It was up to the next tier to devise a plan and guidelines for continuing to achieve our mission. How must we proceed?

The Section was already widely recognized for its intensity, commitment, and vision. Hardly the oldest APTA Section, nevertheless we were the fastest growing and the first to propose the recognition of clinical specialization. We had forged ahead, intent on sharpening our knowledge and technical skills so that we could make an impact on the medical community. We explored and further defined our role as specialists in movement disorders, with proficiency in manual techniques. The Section established many national and international contacts with promises of promoting the scope and efficacy of orthopaedic physical therapy. Quite a mission to uphold.

Section leaders in the early- to mid-80s recognized the need to provide a solid, stable framework from which to build and expand. We embarked upon a plan to improve our efficiency by organizing internally. Countless hours and effort went into developing basic operational mechanisms that are now taken for granted. Duane Saunders and Jim Finch contributed to implementing *strategic planning and budgeting*. Carolyn Wadsworth and Bob Deusinger to developing *policies and procedures*, and Dorothy Santi and Dave Johnson to rewriting the *bylaws*. We instituted a Section master calendar, an extensive committee structure, and recognition events to provide continuity among past, current, and future activities. Membership involvement was a critical issue, so Jim Gould and Jerry Fogel led us in taking steps to inform members of opportunities and encourage their participation through open forums, an interactive column in the *Bulletin of the Orthopaedic Section*, and absentee balloting. Bob Burles expressed the sentiments of many, stating that we had “become an excellent section because of the dedicated work of a few...(but our) base must be broadened to include input from the mainstream” (*Bulletin of the Orthopaedic and Sports Physical Therapy Sections*, 1981). Rick Ritter said, “by utilizing our greatest resource, which is our diverse membership, the needs of the Section can be met” (*Bulletin*, 1981).

We also reached beyond our walls to establish a solid working relationship with APTA. Babette Sanders noted “we as a section must continue to support APTA activities so that we remain a united and strong group” (*Bulletin*, 1979). When some Sections were considering withdrawing from CSM, our Section voted in 1980 to continue its commitment to be involved in CSM through 1983. Also, Duane Saunders’ (President, 1981-1983) strategic plan stated: “provide for Section representation to the House of Delegates and encourage membership interest and communication regarding House actions” and “maintain contacts with agencies, organizations, and individuals related to the activities of the Section and the physical therapy profession.”

Several of our most compelling, ongoing objectives were pursuit of specialization, continuing education, and research. Candidate statements in the *Bulletin*, 1982, provide examples of commonly expressed goals: “to define a scope of clinical expertise through the establishment of Board Certification

for specialization in orthopedics...more emphasis must be placed upon increasing educational prospects to develop greater skill in the treatment of patients” (Janet Yamada); “to continue...the interchange and dissemination of information, identification of available resources, and fostering clinical research in orthopaedic physical therapy requires involvement of more members” (Bob Deusinger); “ensure that these high ethical and clinical standards are upheld...by advancing our education, clinical skills, and professionalism, we will be more capable of dealing with some of the issues facing us in the future” (James Keefe). Rather than give a tedious chronological summary of the ensuing 6 years, this article will summarize the major forces that shaped our Section.

CLINICAL SPECIALIZATION

The long road to specialization was one of the most pervasive challenges facing the Section. From the outset we were committed to the concept of developing and recognizing specialists. Arriving relatively late upon the scene of orthopaedic manual therapy, Americans had both the fortune and misfortune of deriving their training from vast continuing education offerings representing many schools of thought. This made it difficult to consolidate the diverse material into a unified educational model from which an examination could be derived. Assisted by Marilyn Anderson, Chairman of the APTA Committee on PT Competencies, Jim Robinson and Carolyn Wadsworth, representing the Education Committee, wrote the Orthopaedic Competency Document in 1980. Dan Jones (President, 1979-1981) used the competencies to develop the *Petition for the Establishment of a Specialty Area in Orthopaedic Physical Therapy*. The APTA Committee for Certification of Advanced Clinical Competence approved our petition in 1981, along with petitions from the Cardiopulmonary, Pediatrics, and Clinical Electrophysiology Sections. We appointed our first Orthopaedic Specialty Council in 1982, consisting of Eileen Vollowitz, Rick Bowling, and Randy Kessler. The APTA mandated that the Section was to be financially responsible for the Council, but the 2 bodies were to remain separate entities.

The Council announced its first goal was to complete a survey of advanced orthopaedic practice to determine the frequency and criticality of the content areas, or standards, from the competencies. It set 1985 as the target date for the first examination. The Section allocated \$13,800 to the Council for its

1983-1984 operating expenses. The Council was not able to complete a preliminary survey until 1985, which they distributed with an application for Subject Matter Experts (SMEs) to Section members. Under Dave Johnson's leadership (Chair, January 1985-June 1985), the Council analyzed the applications and selected 45 SMEs and 101 item writers. Betty Sindelar assumed the chair of the Council in July 1985. She announced plans to complete the task descriptions and an in-depth survey of the SMEs in 1986. The Section budgeted \$193,125 for support in 1986. The Council postponed the target exam date to 1987, but this was not to be; stayed tuned for the conclusion in the next article.

SECTION PUBLICATIONS

Our best means of informing our growing membership of events, issues, decisions, and contemporary research was through publications. Since 1976 we had published the Bulletin of the Orthopaedic and Sports Physical Therapy Sections, which contained primarily Section news. There was a dire need, however, for a more scholarly publication to disseminate research and clinical practice information. This void was filled in May 1979 with publication of the first issue of the *Journal of Orthopaedic and Sports Physical Therapy*, edited by Jim Gould and George Davies. After 2 issues, in the first year, we produced 4 issues through 1982, 5 in 1983, and 6 through 1985. The Orthopaedic and Sports Physical Therapy Sections established the first Journal office at 505 King Street, LaCrosse, WI in June 1984. We continued to publish the *Bulletin* annually, in 1980 by ourselves, and in 1981 through 1983 jointly with the Sports Section. December 1983 marked the beginning of our newly designed Bulletin of the Orthopaedic Section. With unique cover art and many new features, it was a big asset to member communication. Chris Saudek served as editor, publishing 3 issues in 1984 and 4 in 1985.

The Orthopaedic and Sports Sections also joined in producing an "abstracting service" in 1982, edited by Vince Basile. Initially subsidized by the Sections, it was projected to soon become self-supporting. Subscriptions, which cost \$18, included installments of cards containing abstracts of scientific literature, with a hole-punch retrieval system. By 1984 the Service had over 1000 satisfied subscribers, but due to competition from other resource services, it was difficult to break even on costs.

In 1985 the Sections found it necessary to dissolve the Service, and began publishing the abstracts in the *Bulletin*.

LEGAL ISSUES

The Section adopted a motion in 1981 to “study the issue of the legal rights of physical therapists to perform manipulation.” Legal counsel advised us to “provide for teaching of manipulation in the educational programs” and “revise...state practice acts to include the term manipulation.” Legislative Awareness Committee Chairman, Chuck Byers, reported in 1984 that “only seven states mentioned mobilization in the definition, three states used the term manipulation, while two states included both terms; no states mentioned restrictions prohibiting the use of the terms mobilization and/or manipulation by other health care professions.” We then adopted the motion that “the Orthopaedic Section support use of the term mobilization within the definition of physical therapy in state laws and practice acts.”

PUBLIC RELATIONS

The 1983 strategic plan objectives included “keep orthopaedic physical therapy and the Section publicly visible in the media nationwide through publicizing of Section events, activities, policies, decisions, and member’s achievements.” We developed our first PR brochure in 1983, which our members widely utilized. Plans also were underway to develop an exhibit booth. It materialized in 1985, under the supervision of Garvice Nicholson, Public Relations Committee Chairman, and Rick Clendaniel. This first booth consisted of an 8’ by 10’ silkscreen canvas attached to a collapsible frame, with an accompanying slide tape program, which we displayed at conferences.

OFFICE AND STAFF

Babette Sanders (Treasurer 1977-1981) encouraged the Section to pursue non-dues revenue to offset the costs of our programs, publications, and Orthopaedic Specialty Council. Success in this endeavor allowed us also to begin modest investing and make contributions to support our causes such as research and legislation. The desire for paid office support, however, was well beyond our means during our first decade. Our organization was run entirely by volunteers until July 1985.

When we initially contemplated obtaining office space and/or secretarial assistance in 1983, Jim Finch (Treasurer 1981-1985) estimated it would cost about \$55,000 which was prohibitive for us at the time. By 1985 we had saved enough to consider contracted services. Carolyn Wadsworth (President 1983-1985) and Bob Deusinger (President 1985-1987) drafted a job description and contract for a part-time executive secretary, and began soliciting applications. At our 1985 annual meeting we decided to contract with Pat Kirkbride, Association Resources, Inc., Winter Park, FL, pending approval of a vote to increase dues from \$20 to \$30 (regular member), \$15 to \$20 (affiliate member), and \$10 to \$15 (student member). The membership approved the dues increase and we officially signed the contract on July 1, 1985. The Executive Committee took immediate action to transfer all documents and records to our new headquarters in Florida, and to institute the necessary training for Pat and her staff. With great pleasure we held our Fall Executive Committee Meeting in our new office!

OTHER SIGNIFICANT EVENTS

- 1980 Section raised over \$4,500 for APT-CAC with “Sea Food Bonanza”
- 1981 Section began investing funds
- 1983 Section donated \$10,000 to the Foundation for Physical Therapy for research
- 1983 Section had 25 study groups
- 1983 Section initiated absentee balloting
- 1983 Section held first fall executive committee meeting
- 1984 Section computerized financial data
- 1984 Section copyrighted logo
- 1985 Section incorporated in Delaware

SUMMARY

By the close of 1985 we had reached “thirty-something.” We had matured and were becoming comfortable with our stature. As a large body with a common interest, we had pooled our assets to produce a phenomenal organization of which we were proud. The Section now had a roof over its head, and was moving toward financial security. We had hired personnel to manage logistics so that our

officers and committee chairs could spend more time developing innovative ideas and planning for the future. Bob Deusinger proposed that perhaps now it was appropriate to begin thinking about the Section and the role of the orthopaedic physical therapy in a NEW WAY (*Bulletin*, September 1985). At this time we had the stability to face new challenges.

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