

ORF-SIG Members,

Oh, how time flies... It is hard to believe that our Annual Combined Sections Meeting is right around the corner! Because schedules fill in quickly, I did want to let you know of some important meetings coming up!

- 2/12/19 ORF-SIG Sponsored Preconference Course: *Beyond the Basics—Design and Implementation of Best Practice in Residency and Fellowship Education*
- 2/12/20 5:15-6:45 p.m. (Tentative) Ortho Res/Fellowship Career Fair
- 2/12/20 7:00-8:30 a.m. AOPT Special Interest Group Meet and Greet
- 2/15/20: 7 a.m.: ORF-SIG Business Meeting

The ORF-SIG continues to be very active in creating a Community of Excellence in Physical Therapy Residency and Fellowship Education. Some of you may have noticed a slight change in the nomenclature for what was previously labeled at “Work Groups” or “Task Forces.” The change is to be consistent across all AOPT Special interest Groups and our Rules of Order. Outside of the name change these individuals will still serve as your Commu-

Committees	Subcommittees
Research: Kathleen Geist & Mary Kate McDonnell • kgeist@emory.edu • mcdonnellm@wustl.edu Communications: Kirk Bentzen • kirk.bentzen@ah.org Membership: Bob Schroedter • bob@movethrurhab.com Practice/Reimbursement: Darren Calley • dcalley@mayo.edu	Applicant Sharing: Steve Kareha • Stephen.Kareha@sluhn.org Curriculum: Molly Malloy • mollyscanlanmalloy@gmail.com ACAPT: Carrie Schwoerer • CSchwoerer@uwhealth.org Mentor Development: Kris Porter • kporter@thejacksonclinics.com PD Admin Survey: Kathleen Geist • kgeist@emory.edu

nity of Resources in the development of Excellence! Please be sure to get involved with one of our Committees or Subcommittees.

Thank you to all our members for their hard work. We look forward to great things in 2019!

*Matt Haberl,
President, ORF-SIG*

Here are the latest updates from our working committees:

Research Committee:

Members of the ORF-SIG Research Committee and Academy of Education Residency and Fellowship Special Interest Group (RFE-SIG) discussed the development of a shared research collaboration among all residency and fellowship programs. Members of the RFE-SIG developed a framework and key initiatives to foster the development of research in all areas of residency and fellowship education. Goals of the research collaboration would include (1) assisting with the dissemination of research projects, developing research questions, and identifying those individuals interested in

collaboration; (2) identifying resources and funding opportunities for collaborators; (3) each SIG could serve as a platform to disseminate information about developing and ongoing research projects through a shared online platform; and (4) surveying SIG members to identify what platform would be the most beneficial to share ideas for individuals with similar research interests.

OTTP Quarterly Submissions:

The ORF-SIG will continue to accept case reports, resident/fellowship research, etc. to be highlighted in future *Orthopaedic Physical Therapy Practice*. Take this opportunity to highlight your program participants work!

Membership Committee:

Residency and Fellowship Career Fair at CSM 2020

We are proud to assist our members by bringing back the **Residency and Fellowship Career Fair** at CSM in Denver, CO. This Career Fair was previously hosted by the ABPTRFE and included all specialties and subspecialties. This career fair will be specific to orthopaedic residency and fellowship programs hosted on **Wednesday, February 12, 2019 from 5:45-6:45 p.m.** We look forward to meeting with the aspiring orthopaedic residents and fellows. To find out more information, please contact Tara Fredrickson at tfred@orthopt.org.

A New Face Lift! ORF-SIG Website

Thank you to Matt Stark and Bob Schroedter for giving our website a new face lift. Surfers of the web will now be able to better choose which wave best fits them with a more condensed experience. Upon arrival individuals will choose what path best fits them either a **Program Director/Faculty** or **Resident/Fellow**.



All individuals will also find easy navigation with clear links to our meeting information, webinars, and ways to get involved with our committees. **Program Directors and Faculty** will find information related to Developing/Accredited Program information,

additional R/F Resources, and information regarding the AOPT Curriculum and Grant.

Residents/Fellows will be provided with information on how to choose a program, the process for applying, and available programs. We will continue to grow this site to the needs of our members!

The website will provide a location for key information where we will still use Our Facebook Group as a place for mass communication and more immediate information sharing. The Facebook Group will be limited to members only so **Become a Member Today!**

- <https://www.facebook.com/groups/741598362644243/>

Member Make Up

We are in the process of reviewing all our member demographics so that we can better serve you. For current members, please keep an eye out for a survey trying to understand your background and what else the ORF-SIG can do for you.

In 2020, we will be creating more resources available to members only built around mentorship, your orthopaedic curriculum, webinars, and more! Help us achieve 100% Orthopaedic Residency and Fellowship Program Director involvement!

Communication Committee:

ABPTRFE New Substantive Changes Policies and Procedures

In June 2018, the ABPTRFE released their new Policies and Procedures (P&P) connected to the Quality Standards. In November 2018, complimentary documents to the P&P were released including Substantive Changes documents. To address new policies that would significantly impact the sustainability of residency and fellowship programs, the ORF-SIG and AAOMPT Program Director's Special Interest Group sent a survey out to programs. Particularly, the addition of policy 13.4 and the requirement of additional site visits for programs adding >3 clinical sites in one year was surveyed.

Following discussion at the 2019 Combined Sections Meeting in Washington, DC, the ABPTRFE placed a Proviso on policy 13.4 which was later clarified to only 13.4.2 until a key stakeholders meeting could occur.

With the assistance of APTA leadership a key stakeholder meeting was held at APTA headquarters on April 29th regarding Policy 13.4.2. Approximately 50 stakeholders participated, including residency and fellowship program directors and faculty, ABPTRFE Board members, APTA leadership, and the AAOMPT President. In June, ABPTRFE released the findings and recommendations from the newly established Standards Committee following their initial meeting. The Committee provided 5 recommendations to the ABPTRFE including:

- Standardization of Mentors
- Random Site Visits
- Virtual Site Visits
- PD responsible for oversight
- Type of education being provided

The complete description of these findings can be found in the June ABPTRFE Newsletter. The ABPTRFE will be further reviewing these recommendations at their September meeting. At this time, no further changes have occurred regarding the Proviso and current suspension of policy 13.4.2. AOPT leadership and the ORF-SIG continue to evaluate these policies and procedures and

how they will impact post professional development in the physical therapy profession.

ABPTRFE Communication

Please make sure to sign up on the APTA HUB to receive ongoing communication from the ABPTRFE. We encourage all programs to **contact ABPTRFE** in addition to the **ORF-SIG** with any specific questions or concerns. Directions how to sign in and receive weekly emails regarding posts to the APTA HUB visit our website for directions.

- <https://www.orthopt.org/content/special-interest-groups/residency-fellowship/program-directors/residency-and-fellowship-resources>

Practice/Reimbursement Committee:

The Practice committee is currently creating a survey to send to residency/fellowship programs to learn more about how mentoring is being implemented. Plans to send out a survey in the Fall 2019 to capture residency/fellowship mentoring patterns, including novel delivery of mentorship that might be of benefit for members of the ORF-SIG and greater residency and fellowship community as they evaluate mentoring in their programs.

Applicant Sharing Subcommittee:

To identify developmental changes in residency and fellowship education that are impacting programs and their participants, it was brought to our attention that some programs were turning away applicants due to lack of space in their programs while other programs were unable to fill their spots. Given these struggles, the ORF-SIG has been evaluating possible ways programs could either share participant information with other programs or for programs to share with participants turned away information regarding programs still seeing candidates.

Communication with Ryan Bannister and RF-PTCAS has identified some barriers due to information sharing and confidentiality. The ORF-SIG will continue to explore other avenues to ensure programs can have ongoing full enrollment for their programs.

ACAPT Subcommittee:

In 2018, the Clinical Education Special Interest Group released a white paper presented by a partnership of several DPT programs about DPT students in their terminal affiliation requesting time off for residency interviews. The controversial paper outlined challenges and barriers DPT programs encountered with clinical sites and advocated for students to focus on their terminal experiences. Given these new perspectives the ORF-SIG is working with ACAPT to publish recommendations for both residency directors as well as education of prospective residents by setting expectations of DPT students while in the professional program, helping DPT students/potential residents identify a single area of residency practice to pursue, and educating Directors of Clinical Education (DCEs) and clinical instructors (CIs) regarding the perspectives of residency programs. We look forward to completing this work.

Academy of Education Residency and Fellowship Special Interest Group:

The Residency and Fellowship Education SIG (Academy of Physical Therapy Education) is interested in developing a mentor-

ing program for Residency/Fellowship Directors & Coordinators with the goal of pairing experienced program directors or coordinators with newer program directors or coordinators to foster support, feedback, and guidance throughout the year. For more information, contact Christina Gomez at cgomezpt@gmail.com.

Program Director Administration Survey Results:

The ORF-SIG surveyed residency and fellowship Program Directors and Coordinators nationwide to collect feedback regarding the diverse roles, needs, and time requirements consistent with the administrative obligations within current programs. Eleven fellowship Program Directors and 59 residency Program Directors

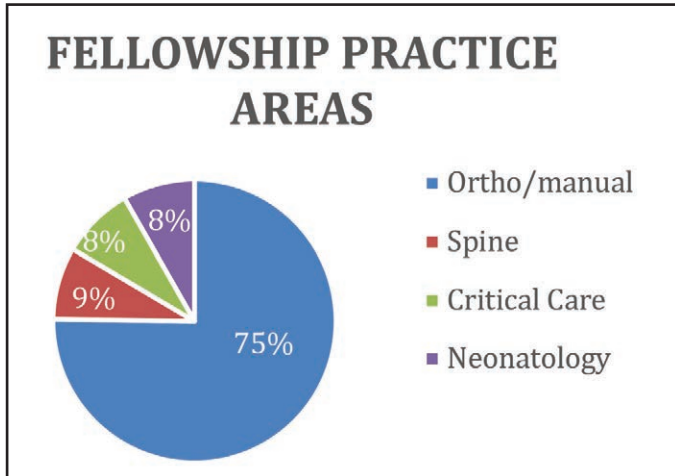
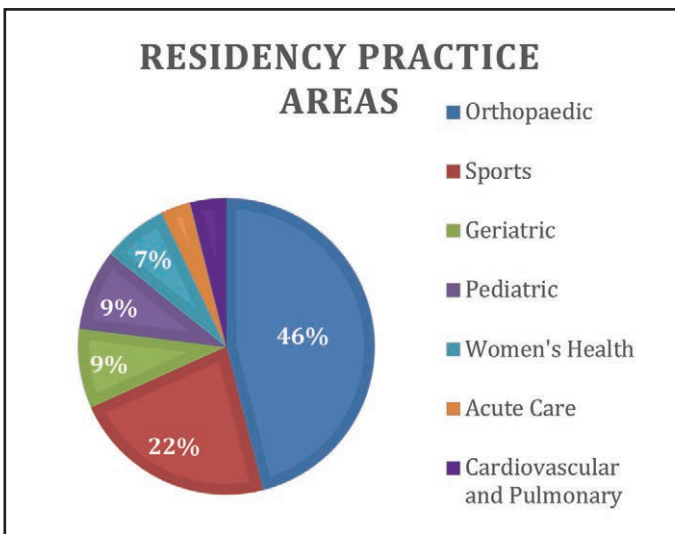


Figure 1. Practice areas.

responded to the survey. The distribution of fellowship and residency practice areas that participated in the survey are provided (Figure 1).

Fellowship programs: Approximately 50% of surveyed fellowship programs accept 1 to 5 fellows and 40% accept 12 to 16 fellows per year with an average of 27 active and 15 in-active clinical sites per year. Thirty-six percent of programs reported that their clinical sites do vary year to year. The median number of clinical faculty per fellowship program is 14 with a range from 5 to 30 fellowship faculty members within an individual program. Forty



percent of fellowship programs who responded to the survey have added a Program Coordinator to assist with administrative tasks. The most reported administrative tasks that required the most dedicated time per week included the following: ABPTRFE/IFOMPT reporting and maintaining accreditation standards, clinical mentoring with fellows-in-training (FIT) and faculty, admissions and recruitment, coordination of fellowship coursework/curriculum, and communication with faculty, mentors, and fellows (Table 1). An itemization of the weekly tasks provided by various fellowship practice models is provided (Table 2). There was a greater variation in the oversight of clinical mentors and hours dedicated to teaching among hospital, academic, and private practice models that participated in the survey.

Residency programs: Approximately 92% of surveyed residency programs accept 1 to 5 residents per year and have an average of 5 active and 3 in-active clinical sites per year. Nineteen percent of programs reported that their clinical sites do vary from year to year. The median number of clinical faculty per residency program is 9 with a range from 2 to 35 residency faculty members within an individual program. Forty-two percent of residency programs who responded to the survey have added a Program Coordinator to assist with administrative tasks. An itemization of the weekly tasks provided by residency programs is provided (Table 3). A comparison of weekly mentoring hours was higher among hospital and academic settings compared to a greater number of hours dedicated to teaching/didactic instruction in private practice settings (Table 4).

Residency programs identified difficulties in the provision of administrative tasks to include a significant time commitment, financial constraints of nonproductive time without passing the expense onto the current residents, and a lack of budgetary and administrative support from the primary residency institution. Many respondents reported that the Program Director performs the aforementioned duties while maintaining a full caseload, maintaining productivity standards, and do not have sufficient administrative time allotted from the primary residency institution. Other concerns from programs highlighted the difficulty keeping up with

Table 1. Fellowship Program Director/Coordinator Responses (n=11)

Question	Mean
How many hours a week do you estimate your faculty spend completing fellowship tasks?	11
How many clinical mentors do you oversee?	26
How many hours per week do you estimate your mentors spend completing fellowship tasks?	10
As a Program Director, how many fellowship programs do you oversee administratively?	1
As a Program Director, how many hours do you spend on the following activities?	
Teaching/Didactic Curriculum (per year)	430
Clinical Mentoring (per week)	7
Participant Admissions (per week)	5
Participant Communication/Reviews (per week)	6
Faculty/Mentorship Communication (per week)	7
Review of ABPTRFE Requirements (per week)	6
Budget Planning (per week)	4
Grading Exams, Developing Curriculum (per week)	4

Table 2. Comparison of Responses Among Fellowship Programs

Question	Hospital/Clinic (n=6)	Academic Institution (n=1)	Other/Private Practice (n=3)
Mean			
How many hours a week do you estimate your faculty spend completing fellowship tasks?	11	9	11
How many clinical mentors do you oversee?	21	8	44
How many hours per week do you estimate your mentors spend completing fellowship tasks?	8	4	7
As a Program Director, how many hours do you spend on the following activities?			
Teaching/Didactic Curriculum (per year)	361	8	786
Clinical Mentoring (per week)	7	1	11
Participant Admissions (per week)	6	1	3
Participant Communication/Reviews (per week)	5	2	8
Faculty/Mentorship Communication (per week)	6	2	11
Review of ABPTRFE Requirements (per week)	6	2	5
Budget Planning (per week)	5	1	2
How much time does the Program Coordinator spend on Fellowship tasks per week?	8	N/A	N/A

Table 3. Residency Program Director/Coordinator Responses (n=59)

Question	Mean
How many hours a week do you estimate your faculty spend completing residency tasks?	4
How many clinical mentors do you oversee?	7
How many hours per week do you estimate your mentors spend completing residency tasks?	4
As a Program Director, how many residency programs do you oversee administratively?	2
As a Program Director, how many hours do you spend on the following activities?	
Teaching/Didactic Curriculum (per year)	70
Clinical Mentoring (per week)	20
Participant Admissions (per week)	5
Participant Communication/Reviews (per week)	6
Faculty/Mentorship Communication (per week)	2
Review of ABPTRFE Requirements (per week)	2
Budget Planning (per week)	1
Grading Exams, Developing Curriculum (per week)	2
How much time does the Program Coordinator spend on residency tasks per week?	6

Table 4. Comparison of Responses Across Residency Programs

Question	Hospital/Clinic Settings (n=33)	Academic Institution (n=18)	Private Practice (n=4)
Mean			
How many hours a week do you estimate your faculty spend completing residency tasks?	4	4	4
How many clinical mentors do you oversee?	8	7	6
How many hours per week do you estimate your mentors spend completing residency tasks?	4	4	4
As a Program Director, how many hours do you spend on the following activities			
Teaching/Didactic Curriculum (per year)	63	68	161
Clinical Mentoring (per week)	25 (range 1-191)	13	3.25
Participant Admissions (per week)	2	1	1
Participant Communication/Reviews (per week)	2	2	2
Faculty/Mentorship Communication (per week)	2	2	2
Review of ABPTRFE Requirements (per week)	2	2	1
Budget Planning (per week)	1.5	1	1
How much time does the Prog. Coordinator spend on residency tasks per week?	5	5	4

(Continued on page 252)