

RESIDENCY/FELLOWSHIP

CADEMY OF ORTHOPAEDIC PHYSICAL THERAPY, APTA

President's Message

Matt Haberl, PT, DPT, OCS, ATC, FAAOMPT

It was great to see those of you who were able to make it to Washington, DC, for our annual Combined Sections Meeting. It was especially great to see and thank **Matt Stark** for his hard work this last year as his term on the Nominating Committee Chair came to an end. We look forward to you handing off the baton to Melissa Dreger and our newly elected Nominating Committee member **Bob Schroedter**. Thank you Matt for all your assistance!

This year was a busy year for the ORFSIG as things kicked off with our "sold out" preconference course followed by our business meeting. The ORFSIG was also involved in several other collaborative meetings with the Academy of Physical Therapy Education Residency and Fellowship Special Interest Group (RFE-SIG), The American Council of Academic Physical Therapy (ACAPT), the American Academy of Orthopaedic Manual Physical Therapy (AAOMPT), and the American Board of Physical Therapy Residency and Fellowship Education (ABPTRFE). It has been very exciting to see the progress every year in the growth of Residency and Fellowship Education!

Continuing that growth forward in 2019 we have been very eager to share with everyone our **new Strategic Plan, Goals, and Objectives.** As with any strategic initiative, it could not occur without the great assistance our members. I want to thank those who shared their time and expertise in making this happen.

Board Liaison:	Facilitator:
Aimee Klein	Janet Bezner
Practice Committee Chair:	Members:
Kathy Cieslak	Chris Gaines
Residency and Fellowship:	Chrysta Lloyd
Molly Malloy	Darren Calley
Academy Office Staff:	Megan Frazee
Tara Fredrickson	Kirk Bentzen
ORFSIG Leadership :	Kris Porter
VP/Education Chair:	Matthew Thomason
Kathleen Geist	Mary Kate McDonnell
Nominating Committee:	Sarah Nonaka
Chair: Melissa Dreger	Stephen Kareha
Mary Derrick	-
Bob Schroedter	

Mission:

Serve and support the orthopaedic residency and fellowship community.

Vision:

To be a community of excellence in orthopaedic residency and fellowship education.

Goals, Objectives, Strategies

- . GOAL: The process of residency and fellowship accreditation will be positively impacted through relationship building and advocacy.
 - a. OBJECTIVE: Formalize the ORFSIG's liaison role between ABPTRFE and members/directors of residency and fellowship programs to promote communication and excellence in practice.
 - i. Identify a communication method to allow residency and fellowship directors to communicate needs to ORFSIG by the end of 2019.
 - ii. Communicate in writing all Residency and Fellowship matters with the AOPT Board Liaison on a minimum quarterly basis.
 - iii. Serve as the liaison from AOPT to ABPTRFE regarding all orthopaedic residency and fellowship matters on a quarterly basis.
 - iv. Establish a current ORFSIG member as a member of the ABPTRFE Standards Committee by 2020.
 - b. OBJECTIVE: Establish relationships with other stakeholders related to residency and fellowship education.
 - i. Communicate with entry-level PT education stakeholders (programs, students, and clinical site/ instructors, Clinical Education/ACAPT) to enhance understanding of and access to residency and fellowship education by 2020.
 - ii. Meet with other Academy/Section Residency/Fellowship leadership on a quarterly basis regarding shared initiatives.
 - Establish liaisons with the Academy of Education-RFSIG to collaborate on residency and fellowship research, shared resources, and other residency/fellowship matters by the end of 2019.
 - iv. Identify an ORFSIG Liaison to communicate with AAOMPT leadership and Program Director-SIG regarding OMPT Fellowship accreditation issues and opportunities for networking by the end of 2019.
- 2. GOAL: Excellence in orthopaedic residency and fellowship education will be promoted.
 - a. OBJECTIVE: Provide and encourage the use of mentoring resources for all orthopaedic residency and fellowship programs to establish common practice strategies.
 - i. Develop mentorship resource task force by end of 2019.
 - ii. Survey current programs about innovative mentoring strategies and environments by 2020.
 - Review and disseminate current research and existing resources on mentoring best practices by January 2020.
 - iv. Provide educational webinars and resources for the mentorship and development of mentors and faculty by 2021.
 - v. Identify and address gaps in current research regarding effective mentorship practice by January 2022.

- b. OBJECTIVE: Provide resources to enable programs to perform regular curriculum monitoring and evaluation.
 - i. Develop curriculum task force by the end of 2019.
 - ii. Collect and share resources that programs are using to meet the New Quality Standards requirements for clinical residencies/fellowships by 2020.
 - iii. Identify areas that need to be modified or added to the AOPT's curriculum package to meet the new DRP/DFP and Quality Standards requirements, and communicate these needs to the ISC Editor by Jan 1, 2021.
- c. OBJECTIVE: Identify developmental changes in residency and fellowship education that are impacting programs and their participants.
 - i. Disseminate a poll to program directors to query the interest in participating in a standardized offer date for orthopaedic residency programs at CSM 2019.
 - ii. Develop task group to evaluate annual aggregate data regarding the number of residency/fellowship positions, availability and sharing of resources by 2019 year end.
 - Develop a task group to monitor and evaluate ABP-TRFE Quality Standards, and the new Policies and Procedures by 2019.
 - iv. Survey current residency/fellowship programs in 2019 regarding changes in ABPTRFE Quality Standards and impact on sustainability.
 - v. Evaluate the new ABPTRFE Policies and Procedures and the impact this will have on program development by 2020.
- d. OBJECTIVE: Facilitate the conduct of research in residency and fellowship education.
 - i. Identify a member of the ORFSIG to lead orthopaedic residency and fellowship education research by end of 2019.
 - ii. Create a research work group by 2019 to work with AOPT Research Committee.
 - iii. Develop and distribute a residency and fellowship research agenda by 2020.
 - iv. Request funding from AOPT for funding one research project annually by the end of 2019.
 - v. Solicit members to write and publish at least one resident/fellow case report/case series or research report annually in Orthopaedic Physical Therapy Practice by 2020.
 - vi. Provide annual reference list of clinically relevant journal articles related to residency and fellowship to members via Orthopaedic Physical Therapy Practice.
- 3. GOAL: Members of the ORFSIG will be engaged and connected.
 - a. OBJECTIVE: Recruit relevant stakeholders to become members of the ORF-SIG.
 - i. Investigate the possibility of adding residency and fellowship roles to the Academy database by 2019 year end.
 - ii. Determine current member make up (Program Directors, Faculty, Mentors, Resident/Fellow Graduates, current or aspiring resident/fellow) by 2019 year end.

- iii. Recruit 100% of program directors & >50% program faculty to be members through annual requests, monitoring of ABPTRFE developing and accredited programs, engagement with other relevant SIGs, promotion at CSM, and Next Conference by 2021 CSM.
- iv. Increase ORFSIG membership by 10% by recruiting aspiring or current residents and fellows through promotional efforts by 2020.
- v. Promote the ORFSIG at least one national conference per year by funding and having a presence at the meeting.
- b. OBJECTIVE: ORFSIG membership will be reached and engaged across all program and membership categories.
 - i. 50% of members will read/receive direct emails to members by 2020 (send read/receipt in outlook for tracking).
 - At least 50 members will attend ORFSIG quarterly webinars and CSM in person annual Business Meeting by 2020.
 - iii. Greater than 50% of members will participate in ORFSIG distributed surveys.
 - iv. ORFSIG leadership will recruit members to engage in all liaison positions and work groups to complete required strategic planning by 2020.

Over the next year, we will be working on implementing this Strategic Plan. Make sure to reach out to the SIG to help and get involved!

COMBINED SECTIONS PRECONFERENCE EDUCATIONAL COURSE

Kirk Bentzen, Kathleen Geist, Aimee Klein, Tara Jo Manal, and Eric Robertson filled every seat with their preconference course "Clinical Excellence and Quality Standards in Residency/Fellowship Education." It was a pleasure working with all types of programs from developing programs to those programs who have been here since the beginning. The presenters of the course shared their program forms and policies and answered several questions for the participants. We look forward to hosting similar courses like this in the future.

If you are interested in presenting at CSM 2020, please contact our VP, Kathleen Geist at kgeist@emory.edu.

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, complimentary documents to the P&P were released including Substantive Changes documents. Following this, AAOMPT PD-SIG members and ORFSIG members identified the significant strain some of the new policies may have on their programs. To fully understand the impact, the new policy 13.4 - Substantive changes would have on programs the ORFSIG in collaboration with the AAOMPT PD-SIG developed a survey to send out to its members.

Given the significant impact this would have on programs, the Academy of Orthopaedic Physical Therapy (AOPT) and AAOMPT Board members and its respective leaders were notified. Further communication with APTA staff and leadership ensued sparking a meeting at APTA headquarters including key stakeholders in April. The AOPT remains committed in supporting excel-

Residency Program Results:	Fellowship Program Results
• 57/104 (55%) Programs responded	• 26/32 (81%) ABPTRFE accredited OMPT Fellowship
• 40/57 (70%) Are Multi-site programs	Programs completed survey
• 20/57 (35%) Were not yet aware of the Policy changes	• 0/26 (77%) were not in support of requiring physical site
• 24/57 (42%) Are unsure or will not keep their accredita-	visits for new participant sites
tion status with ABPTRFE.	• The opposed programs offer 250 (90%) of the available
• These sites account for:	training positions annually
✓ 67% of Clinical Sites: 356/533	Estimate the need to add a total of 232 participant sites in 2019,
✓ 71% of Annual Resident Graduates: 311/436	costing a total of approximately \$111,000 in total for physical
• 63% were not in favor of the new policy changes	site visits alone.

Substantive changes program director survey results.

lence in residency and fellowship education and look to address these concerns, as well as program questions regarding the tracking and reporting of the new Primary Health Conditions, the requirements of a specialty certification prior to a fellowship with the removal of a skills track, and the potential for a two tiered system requirement for fellowship training hours. We look forward to this meeting in addressing these concerns.

Members are encouraged to continue to contact the ORFSIG and members of the ABPTRFE and APTA staff regarding these and any other concerns. At this time, **ABPTRFE has postponed the implementation of policy 13.4 Substantive change until further evaluation**. We will continue to keep you updated as processes change.

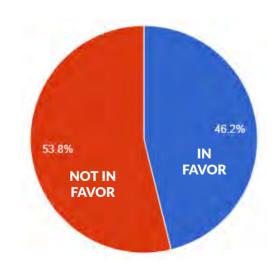
STANDARDIZED OFFER DATE PROGRAM SURVEY

In an effort 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. In response, the ORFSIG surveyed orthopaedic residency and fellowship programs to query the interest in participating in a standardized offer date for orthopaedic residency programs in the Fall of 2018.

Seventy-six (76) program directors responded to the survey along with 1 program coordinator. Of all respondents, **only 46% were interested** in exploring a common application date for orthopaedic residency programs.

Common app date interest

- o Yes (36, 46.2%)
- o No (42, 53.8%)



We found that 79% of the responding programs use RF-PTCAS. Sixty-four percent of respondents were from residency programs, 14% were from fellowship programs, and 22% ran both residency and fellowship programs. Sixty-seven percent of responding programs use an onsite learning model, 10% a distance learning with onsite labs, and 23% are a hybrid of distance and onsite learning models. It is important to note that sub-analysis found that none of these subgroups demonstrated more than 55% interest in exploring a common application date.

Based upon the feedback gleaned from the sports residency common application date, it is imperative to have a vast majority in favor of a common application date prior to investing further into a similar model. Thus, it is the recommendation of our subcommittee to investigate other methods of applicant pooling unless at least 90% of programs are in favor of a common application date.

ACAPT WHITE PAPER ON TERMINAL INTERNSHIP INTERVIEWS

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. Further recommendations were made for residency programs to offer alternative methods of interviewing and selecting their candidates.

Given this new perspective and impact on other stakeholders along the post-professional continuum, ORFSIG members, Kirk Bentzen, Carrie Schwoerer, and Matt Haberl initiated a dialogue with ACAPT regarding the white paper leading to a meeting with Carol Beckel, St. Louis University and Tiffany Enache, University of New Mexico. Discussion included the perspective of residency directors and the need to abide by program and sponsoring organizations' guidelines in relation to hiring practices. Based on the discussion, it was further decided that the white paper needed to be expanded to address issues across the professional development continuum including, but not limited to 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 ongoing collaboration.

RFESIG UPDATE

The ORFSIG continues to collaborate with the RFESIG. Over the past year, the RFESIG has focused on two main initiatives:

- Assistance in mentoring and curriculum development for current or developing residency/ fellowship programs
 - ✓ To do this the RFESIG Think Tank work group was established to focus on collecting, reviewing, and organizing resources from established residency/fellowship (RF) programs as an open access resource center for programs. These resources are now available to all APTA members and housed in the "RFESIG's Think Tank Compendium" on the APTE's website at the following link: https://aptaeducation.org/special-interest-group/RFESIG/think-tankcompendium.cfm.
 - ✓ The Think Tank is an ongoing effort and will continue to review resources submitted. If you would like to share unique or creative resources with other programs, please submit to the Think Tank at the above link.
- Promoting research on residency and fellowship education - The RFESIG has implemented two strategies for this initiative:
 - ✓ Highlighting current research on RF education in the RFESIG's quarterly newsletter.
 - ✓ The creation of a work group to analyze past and current RF education research to determine the needs of future research, develop strategies to increase communication across RF programs about current and upcoming research projects, and increase collaboration in research across residency specialties. The work group has met twice in the past 4 months and will continue to meet throughout the year.

PROGRAM DIRECTOR ADMINISTRATION SURVEY

A work group has been developed to understand current program director administration duties and the time associated with these. We hope to better understand what processes may lead to additional time requirements and how programs directors use their time. Please keep an eye out for the survey if you have not seen this yet.

ABPTRFE COMMUNICATION AND QUALITY STANDARDS

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 ORFSIG with any specific questions or concerns. Directions on 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

OPTP QUARTERLY SUBMISSIONS

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

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