

OKCPTP Spring/Summer 2017 Meeting Minutes

Dayton, OH: July 11th 9:00am – 3:30pm

Members in attendance: Jamie Bayliss, Amy Both, , Cara Carramusa, Paula DeLorm, Chalee Engelhard, Lynn English, Karen Furgal, Sean Gallivan, Deb George, Carrie Hawkins, Janice Howman, Erin Hofmeyer, Beth Quinn, Christine McCallum, Erin Thomas, Deb Belcher

I. Called to Order/Attendance: 9:08 am

II. Call for Time-Keeper – Carrie Hawkins

III. Approval of Last Meeting Minutes: Fall Meeting 2016 – minutes unanimously approved

IV. Nominations:

- A. Nominations will remain open until Fall Meeting 2017
- B. Chair – Amy Both nominated
- C. Secretary – Jamie Bayliss nominated

V. Officer's Reports:

A. Chair's Report

- a. Welcome to Karen Frugal (DCE at Western Kentucky) and Paula DeLorm (Assistant DCE OU); additional member introduction
- b. Member to serve as the PTA Liaison – Janice Howman will be stepping down – role of attending PTA consortium meetings and giving a report back, may be on list serve, not time intensive; PTA consortium meets fall and spring in central Ohio – **Christine McCallum** volunteered to begin in the Spring of 2018 as she is on sabbatical in the fall
- c. ELC Accepted Presentations; call for volunteers – Amy sent Gina Musolino about offering volunteers from the consortium to assist with ELC, however has not received any returned correspondence from the planning committee; suggestion to contact the ACAPT rep instead; ELC presentations – several members are presenting
- d. Pre-Clinical Requirements-Onboarding - letter was drafted on behalf of the consortium to Genesis about the onboarding costs; Amy Both spoke with a representative from Genesis without much resolution other than programs are willing to pay the required amount – therefore the letter was not forwarded on; Fairfield Mercy in Lancaster, Ohio also charges an onboarding fee of \$300

B. Vice-Chair's Report – Dinner meeting 7/10/17

- Statement about best practice – Concern that the document is implying that programs are not creating entry level professionals
- Sharing main points from discussions last evening; make sure to read through the Best Practices document so we are ready to voice an opinion once it is asked for
- Where do new clinicians struggle – business aspect of practice, professional behaviors / soft skills (empathy)
- As DCEs and part of the consortium we need to do a better job reaching out to clinicians about ELC
- Assist CCCEs with how to create a clinical education curriculum for within the clinic

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- Discussion about whether or not general practitioners are still valued based on Best Practice report – should there be more specialties than what is currently available
- More open sharing about concerns students or CIs may have about student performance – concerns about FERPA – do programs share information ahead of time that may or may not bias CIs? Or do you merely encourage students to be open with their CIs about those issues/concerns?

C. Secretary's Report – each member to ensure they have updated their information on the OK roster and data on the ICE Google Docs

1. Need 2 reviewers for today's minutes – Beth Quinn, Karen Furgal
2. Shared documents and reports

D. Treasurer's Report: still maintaining 2 accounts (PNC and Fifth Third) but working to transition from Fifth Third to PNC, all programs have paid their consortium dues; see **treasurer's report** for specifics on updates and expense/revenue report

1. Reports and Audit-Change in Banking Partner to PNC – opened February 6, 2017 with Cara C and Amy B as co-signers on account
2. Suggestion to make sure anyone who receives funds from the consortium for a conference or course submits for reimbursement in a timely manner – do we need to change our procedures/processes?
3. KOL award clarification – will support 2 CIs for up to \$600 each for course fee and travel
4. Discussion about what consortium money is being spent on (proposal for 2017)
 - a. Student SIG?? What is the purpose? Proposed benefit was to give a contribution to students in an attempt that it would give us recognition within programs/students; suggestion to follow up with Tonya Apke about the history of the monetary support
 - b. Now the NCCE is formed and is trying to have a meeting at ELC annually could the consortium consider funding housing for one night for the representative who would represent us at the annual meeting (academic partner, clinical administrator and/or clinical instructor)?
5. Request from the State of Ohio for registration as a Charitable Organization

VI. Committee Reports

- A. OKCPTP Annual Workshop: Table-see item in NEW BUSINESS
- B. Clinical Ed SIG: Tonya – per Erin Thomas – there is nothing to report
- C. Student SIG: Tonya – per Erin Thomas – there is nothing to report
- D. PTA Consortium Report: Deb Belcher – consortium is still in conversation with the APTA about moving the PTA degree to a bachelors level; budgeted to award an excellent CI to attend ELC; working on better financials; working on an updated consortium list serve; continued concerns about new programs in Ohio (23rd school is attempting to open a program);

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consortium drafted a letter to CAPTE asking them to make a new program's criteria more explicit, ongoing concerns about new graduates obtaining full-time positions, working on developing a website, how to determine readiness to enter into clinical education

- E. ACAPT-NCCE: Christine, Chalee, Janice (representatives on the board) – business meeting Saturday 8-10 am at ELC; board is still forming; there will be another task force coming re: payment for clinical sites; Janice will be coming off as Academic Representative at large after this upcoming year and Christine's term will also end; 2016 report was sent out; Janice will be the NCCE representative for ELP (ACAPT, CAPTE, APTA, and APTA education section representatives) (faculty development needs of clinical partners); this year's NCCE goal is to spur action
- F. Suggestion on how to more routinely open lines of communications with our clinical partners – could the operations group consider ways to enhance partnership/communication (intentional processes)
- G. PDM Memorial Update: Sean – 9/13 schools participated in Organ Donation Awareness Challenge – suggestion for one school to challenge another school within an institution or one cohort to challenge the next cohort; suggestion to consider having students go places to seek out new organ donors instead of setting up a table

VII. Old Business: (start by 10:15am)

- 1. Bylaws – Call for a vote; final comments, and vote on the revised bylaws as submitted – request for final comments/key points –
 - a. Janice: officer under **4.1 – chair must hold title of ACCE/DCE** – don't limit description based on job title; suggestion to strike the sentence completely
 - b. Christine: recommendation that only one institutional representative can cast a vote at meetings (**3.4.1**)
 - c. Erin T – consideration for when meetings are held – not a concern as long as two meetings are held
 - d. Ballot vote: YES to approve bylaws as revised or NO bylaws need further revision
 - i. NO - 9
 - ii. YES - 3
- 2. Regional Core Network (RCN) – Janice, Christine, Jamie, Tonya, Chalee-check with Jamie and Janice – **TO BE DISCUSSED UNDER CONTEMPORARY ISSUES GROUP**
 - a. Report/Update
 - b. Shared Data Set

VIII. New Business:

- A. Annual Clinical Education Conference: (30 minutes)
 - 1. Considerations for this year due to ELC location; sponsorship of clinicians
 - i. Consider not doing an annual CEU this year but instead use money to support clinicians at ELC; could we spend the same amount of money on ELC

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registrations as we would on a fall course (~\$3000) OR do we fund taking our clinical partners out to dinner one of the days of ELC

- ii. Could we do something to welcome people to Ohio?? 5 minutes in front of the large group, small gift (pens with consortium name), chocolate/candy, etc.
- iii. See Proposal for Consideration document (A. Both)

2. Future endeavors-brainstorm ideas

- i. Timing it takes to develop a course/conference – should we consider developing resources that are more sustainable and could be accessed multiple times on our website (web-based courses) – would allow for more efficiency and contain costs
- ii. Do we postpone our model for how we do our CEU course annually? Would this negatively impact clinicians?
- iii. Consider trying an online option for one year to see what happens with participation – per Christine her experience is that several clinicians will start an online CEU but are not good with the follow through of requirements
- iv. Concern about discontinuing the face-to-face CEU course because of the value of in-person conversation with clinical partners
- v. **Motion to hold hosting 2017 FALL CEU course – all in favor**

3. Use of consortium funds for ELC

- i. Support for clinicians – do we offer an opportunity for individuals who applied for Peter D. Mosher ELC scholarship who don't receive it to be eligible for support from funds saved not hosting the CEU course (10-13 clinicians)
- ii. Promotion of consortium - 'welcome' gift
- iii. Support on our behalf to NCCE meeting
- iv. Suggestion for consortium to share what we do with ELC attendees through use of funds
- v. Suggestion to be a sponsor based on level of sponsorship available through ELC
- vi. **Motion by Sean G to spend a total of \$5000 on this endeavor** – however, another consideration - not bringing in money this year as we are not hosting a CEU course especially if we are planning to spend a large amount on ELC sponsorship – **motion approved**

B. Best Practices in Clinical Education - Carrie, Sean

- 1. ACAPT board of directors will be voting on whether or not to accept the recommendations in the Best Practice document in November
- 2. Suggestion to reach out to clinical partners about their reaction to the document – are they aware of the document
- 3. Amy Both will do a 'shout out' about information on the Best Practices, survey and upcoming virtual events through our website

C. Preliminary Discussions: Mission, Purpose Statement, and Work groups (45 minutes/over lunch)

- 1. Revisit/define our direction
- 2. Mission and Purpose Statement-determine group to draft based on discussion
 - i. All in favor of current mission
 - ii. Vision – suggestion to adjust the time frame from 2017 to either 2020 or 2022 and for the full group to discuss possible changes as opposed to a work group

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- iii. Suggestion to share what accomplishments we've had to each program and clinical partners
 - iv. Purpose – partnerships with clinical partners, collaboration with programs within consortium (needs to be intentionally included) / healthy collegiality; need to continue to be purposeful in our size; communication efficiencies; assist in management of changes / challenges that come across within clinical education
 - 1. Should we consider opportunities for funding for clinical education research?? Educational research??
 - 2. Promotion of leadership e.g. CCCEs
 - v. Look at where we are now compared to where we were – consider creating a **strategic plan** (general frame work) in a more intentional discussion at the fall meeting
 - vi. Suggestion to create a spreadsheet that lists our mission statements and what we have done toward accomplishing those goals
 - vii. Suggestion to plan for a 2-day meeting in the fall – one a business meeting and one a retreat
3. Work groups – Are we addressing items that are a sense of urgency based on when national events are held and when the business meetings are?
- i. Work groups need to be focused on what our mission and vision are
 - ii. Smaller 'task forces' (3-4 people)
 - iii. Clinician to clinician networking (document on website)
 - iv. Do we involve clinicians in our work groups?
 - v. Fall meeting – do we include clinical partners as part of consortium and/or members of work groups?
 - vi. How do we share burden within our work groups because of personal work load? Do we need to consider more intentional / regular meetings / conference calls?
 - vii. Do individuals need to stay in one work group for a finite period of time instead of 'jumping' from work group to work group? Accountability??
 - viii. In lieu of work groups and ELC being in our area, could we sponsor a booth at ELC?

D. Ad-hoc ELC 2017 Task Force

- 1. Support clinician attendance – new scholarship (Lynn, Kara Lee, Karen, Beth, Amy)
- 2. OKPTCE marketing / booth (Carrie, Erin H, Jamie B, Erin T, Paula, Deb)
- 3. Scholarship PDM – Amy B, Beth Q, Lynn E, Erin H and Karen F - review applications, mentoring group
- 4. Coordination committee - Correspondence with ELC planning committee (Cara, Sean, Jamie, Janice)
- 5. Review of what each group is working toward with expected deadlines

https://docs.google.com/spreadsheets/d/1_mE2iWVbB5VWf1Y3Oa0vxtrAbIxZRwaRW8HyX7gGesw/edit#gid=0

- 6. Institutional members of the group to complete a Google Doc with – our accomplishments related to 7 mission items and 3 vision items (Jamie)

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https://docs.google.com/spreadsheets/d/1x9rm_9rDxUHiZr1z12tPjiK80lQdpCbgQmZG4dvnALI/edit#gid=0

Agenda items below tabled in lieu of ELC Task Force Group meetings

E. Preliminary Discussion on Current Topics of Consortial Interest

1. Integrated Clinical Experiences-George/Weaver (10 minutes)
 - a. Google doc to review what programs are doing
 - b. Successes and challenges to share
2. CPI Feedback-Siles (10 minutes)
 - a. How to mentor-possible CEU on website for CPI use
 - b. How to provide feedback
3. Remediation prior to return to clinic- Siles (10 minutes)

IX. Break into Work groups (suggested topics-subject to change based on earlier discussions):
(start by 1:00pm and meet for 60-90 minutes)

A. Contemporary Issues-

- a. Best Practices in Clinical Education-consortium letter, statements
- b. Regional Core Network and Shared Data Set
- c. Connection to current NCCE and ACAPT task forces

B. Mentoring and Service- Scholarship/Awards-

- a. Need readers for PDM Scholarship
- b. Clinician involvement; ELC
- c. CEU on website/website- Ideas: CPI use, remediation, ICE – CPI is on the agenda of the APTA
- d. Review current scholarship process and suggested changes

C. Operations-

- a. Platform for communication-google drive; one drive; others
- b. Consider working with Mentoring and Service on projects
- c. Website-invite clinicians to write for blog

D. ELC Task Force groups report back – see Google Doc Link

https://docs.google.com/spreadsheets/d/1_mE2iWVbB5VWf1Y3Oa0vxtrAbIxZRwaRW8HyX7gGesw/edit#gid=0

Adjourned at 3:14pm

Next meeting: Consider breakfast or meeting time at ELC or in the beginning of November