

## **Academic Administrators Special Interest Group (AASIG)**

Business Meeting Minutes

October 4, 2003

1. Call to Order (1:10 p.m.)
2. Approval of the minutes from February 13, 2003 – approved as published
3. Informational Reports
  - A. **Division on Education, APTA, Jody Gandy** discussed the PT Normative Model 2004 and acknowledged the ad hoc group (Laurie Hack, Mary Rodgers, Alma Merians, Kyle Myer, Cheryl Bainbridge, Elizabeth Rogers, Cindy Moore, Jan Gwyer). The draft will be sent to each program director to share at the educational facility and at clinical facilities. Core values have been added and items related to cultural competency. The practice expectations were reorganized. The PTA Normative Model group will begin work in January 2004 and will culminate in 2005. For the CPI, a group will meet in December for revisions. The revised CPI will lag behind revisions of the PT Normative Model and accreditation criteria review to ensure consistency. Approximately 10,300 CIs have been credentialed since 1997. A Train the Trainers workshop will occur April 30 to May 2, 2004. Contact Angela Boyd for information. Applications due in December, 2003. In the Spring of 2004, the core essentials for clinical education at beginning of clinical experiences and at the end and in different practice settings will be proposed through the use of a consensus conference. Two investigations of alternative clinical education models were established by the House of Delegates and results will be presented to the House in 2004. The Division continues to monitor DPT and tDPT programs. The House voted to separate annual conference from the House of Delegates and that begins in 2006. Preview 2020, a regional meeting, was held in Las Vegas and 280 people attended. Dr. Gandy discussed changes in the PT Faculty Activity survey to include the number of grants, kinds of grants, research and teaching expertise for linking people together (will occur after the revision of the Normative Model is completed). She answered a question about the House intent to have exercise incorporated into PT programs (Fitness and Wellness Group) would be in the revised Normative Model. Dr. Gandy replied that the Board approved the item and it will be a supplement to the Normative Model.
  - B. **FSBPT, Mark Lane.** Exam administration process has been worked on last two years and is enhanced for speed of results. Wanted better data on status of the item bank, etc. Explored bringing exam development in house, and as of July 2003, FSBPT is no longer contracting with PES. All development will be in house or contracted as needed. He discussed the sharing of recalled items on a review course website. Emergency exam construction meetings were held, and the new content outline had to be adjusted. Four candidates

have been investigated and pursued legally. The Federation continues monitoring the discussion site. Three candidates will likely settle out of court and acknowledge that they posted items. Probably continued legal action with one candidate. He asked for help to get message out to students. In February 2003, a staff member became ill and passed away in August. This was a psychometrician of great assistance to the Federation. Soon he expects to get information out to program directors about the new content outline, new pass point study and new forms introduced last November. He thought pass rates would be lower. An increase occurred in 2000. An external Commission was established and is preparing a final report. Ten people served on the Commission and included PT educators, psychometricians, legal counsel, public member, president of FSBPT. He shared an Executive Report summary. Pass rate has experienced fluctuations for PT exams. Eight factors related to pass rate fluctuation: 1) Equating of forms of exams; 2) new standards after practice analysis; 3) changes in content specifications; 4) variable stat list characteristics; 5) Exam security; 6) changes in candidates (educational level up or decline in applications); 7) changes in mode of test delivery; 8) overuse of test items. Fluctuations have not occurred for PTA examinations. Shared some recommendations, but the Board of Directors (FSBPT) will make final decision. He shared the belief that no public harm has occurred nor have qualified applicants been prevented from practice. Some changes are proposed in test delivery, test administration, and the general program.

1. Increase item pool. 400 first time US candidates to pretest items. 30% don't meet standards
2. Increase items pretested (50 pretest items rather than 25) 225-250 for PT and 175-200 for PTA. No decrease in counted items
3. Additional information in the item pool
4. Targeted item writing
5. Decrease number of attempts in a year (FSBPT allows four if state allows - to move to three attempts) Low impact.
6. Increase number of test forms
7. Increase test security. Can now take breaks (Test lasts 4 hours for PTs; 3.5 hours for PTAs). Plan to develop blocks of questions in set time frames.
8. Changes in test delivery (long range goal)
9. Detect item exposure
10. Establish technical advisory committee
11. Improve documentation
12. improve information to stakeholders

Continue regular meeting with CAPTE and Section on Education. He recognized attendees who have been involved and thanked them for service. He reminded people that they can apply anytime on website (need item writers –small stipend). School reports are changing. Programs will be able to obtain reports online quarterly. The information that CAPTE needs will be available at no cost. They have developed a new software package. To get actual

candidates' scores will cost \$200 per year and will be available two times per year. Schools will be able to download into Excel and display data. Both reports are \$375 or \$200 for content analysis for your students. He discussed the trend for states to have laws/rules/jurisprudence exams. He answered questions about the levels of questions on the exams.

C. **Program Prerequisites, David Lake.** Before reporting on the findings related to prerequisites, he indicated the availability of a home study course on cultural diversity and older persons. He obtained information on 186PT/73 DPT (or transitioning) and 113MS or MPT programs. 80% require BS degree. 70% require GRE. 78.5% have a minimum GPA. 41% use an overall and prerequisite GPA. 21% no required GPA. The required GPA was usually 3.0 with some variation. 60% require volunteer hours- no consistency about the number of hours. Course requirements range from 0-28 courses. Required general education usually matched the institutional requirements with alternatives allowed. 11-12 courses (of 3 or 4 credits was the most common); range is from 6-17. Discussed courses required by greater than 50% of programs. 91% require A&P (at least one course); 97% require chemistry (at least one course); 93% require physics (two courses); 84.4% require statistics (one course); 83% require psychology; 79% require general biology and 49% require two biology courses. Less than 50% require English comp; social science; humanities; computers; medical terminology; exercise physiology; Less than 10% require human development; kinesiology; organic chemistry; research methods; cell biology; pathology. The data demonstrated many differences among the programs. Greater than 75% of programs require a degree; Greater than 75% of programs require a minimum GPA (75% of those require a GPA of 3.0); 9-15 prerequisites courses was typical (2 in A&P; 2 in physics; 2 in chemistry; 1 in biology; 1 in psychology; 1 in statistics). Medical schools have less distribution of required courses. The Section on Education wants to see if common ground can be found. There is a need for a task force, but the programs appear to have a fair amount of consensus. Laurie Hack asked to discover feasibility of common application. The liaison from the national association of advisors for health professions was present and thanked the group for these actions and asked for a common core as soon as possible. David Lake recommended that we consider developing a handbook for advisors. Laurie Hack stated that the success rate of advisors was measured in terms of getting into medicine/dentistry. We need better public relation, and we need to attend advisors' meetings.. Suggested that we determine content we want or just courses to predict academic ability. Volunteer to Laurie Hack if want to serve on task force. Section on Education will coordinate. David and his committee were thanked for their hard work

D. **Pittsburgh-Marquette Challenge, Laurie Hack.** (Laurie Hack for Tony Delitto). Ability of students to raise money is more than we think. \$4500 from Pittsburgh. The students arranged to provide continuing education to

raise money and had speakers donate time. We need to encourage students to look for more ways. Thanks to FA Davis for sponsoring and allowing drawing for books for Foundation.

- E. **Manipulation, Robert Wainner.** US Army Baylor Program. He is on a Task Force and Education group for Manipulation. Purpose is for full integration of manipulation into curricula of professional programs. Provided data on why it should be taught. Can it be taught? Offered suggestions. Educational Case Series-outcomes of first clinical affiliation. Only 44% of programs teach thrust-level procedures. Evidence is compelling that it should be part of practice and should be taught. He provided some litigation cases and indicated that manipulation is currently taught in continuing education and not in professional entry-level education. Educators should be the persons to give current best practice and be consistent in terms. The Task Force has a packet of info available to programs and a resource list (PTs in areas who may be helpful in instruction).
- F. **Admissions Data, Diane Jette.** Discussed PT and PTA trends in applications and admissions. Will put charts on website.
- G. **Nominating Commission, Dan Erb.** Next year, the AASIG will be electing a Chairperson, a Secretary/Treasurer and one member of the nominating committee. Nominating Committee: Elizabeth Rogers; Sandy Quillen, Chair; Dan Erb, Outgoing member.

#### 4. Old Business

- A. **Physical Therapy Honor Society.** Will not be considered unless re-introduced.

#### 5. New Business

- A. **Oath for Physical Therapy Students.** Ideas for an oath to be taken by PT students were discussed. USC has had an oath for PT for ten years (written by Helen Hislop), and the oath can be found on their website. They have a white coat ceremony in the first week of class culminating with oath. Another suggestion was to utilize the Code of Ethics. Creighton has an oath, students are writing an oath in Florida, and California students are discussing the development of an oath at the California annual meeting, so students seem to have interest. One approach could be to get the House to charge the AASIG or the Section to develop an oath. Core element might be agreed upon and then adapted within individual educational cultures. Diane Jette asked for volunteers to work on this issue.
- B. **Motions to House of Delegates 2004.** Diane Jette is Section Delegate. We may care about motions that are coming, particularly a motion about

educational programs and the selection of clinical instructors and on the motion from the Student Assembly about professionalism.

- C. **Content for 2004 Meeting.** The AASIG meeting will occur with the clinical education meeting at St. Louis and with Diversity fund raiser. Ideas included: Extending the time for the business meeting; Economic modeling for program chairs (McKinnon article); Symposium- residency programs; Faculty workloads; Preparing clinical education site for administrative experiences and other non-patient experiences; Clinical education models; Values and benchmarking; teaching public policy; Comment from the PTA educators was that programming needs to be increased. PTA educators were encouraged to add to the list and to suggest speakers.

6. Announcements

- A. **JOPTE** – the term has expired for the current editor. Committee to determine new editor.
- B. **Book Drawing** – books donated were distributed through a drawing. The vendor was thanked.

7. Adjournment (4:05 p.m.)

Respectfully submitted by Venita Lovelace-Chandler, AASIG Secretary