

Academic Administrators Special Interest Group (AASIG)
Business Meeting Minutes
October

1. **Call to Order (8:05 am)**
2. **Announcement of reordering of agenda**
3. **Approval of the minutes:** The minutes approved.

4. Meeting for next year

The meeting next year will be with the Clinical Education SIG of Section and Diversity Dinner (1/3 AASIG meeting & 2/3 with Clinical Education SIG). A call for topic suggestions brought the following:

- a) Fund-raising (endowment)
- b) Legal Issues – students; ADA
- c) Faculty Assignments – Teaching loads & research
- d) Student Research
- e) Integrity (Student cheating)
- f) Research vs. Case studies for students

Additional suggestions should be forwarded to the SIG.

A call for sites brought the following suggestions: Phoenix, Pasadena, Denver, Salt Lake City or somewhere out west. Email other ideas to the SIG.

5. Announcements - none

6. Informational Reports

A. Division on Education – Jody Gandy

1. Updates – Professionalism Task Force will meet the end of October. Clinical and Academic Curriculum suggestions available late in 2005.
2. PT CPI ad-hoc group meeting and revising the instrument.. ACCEs, Faculty, and CCCEs will give feedback. Field study of final version will be finished by 2006. Electronic version and online training.
3. 2004 PT Normative model available (since June). Thanked group who worked on it and those who gave feedback. Electronic version created to ease use and reasonably priced. PTA Normative Model group has begun to meet, should be ready in 2006. A longer time has passed since revision of the PTA Normative Model so will take considerable revisions. The revisions will go out for feedback and then to the APTA Board of Directors.
4. Clinical Instructors Training Group currently has 124 trainers with over 12,000 PT and PT CIs trained since 1997. Other disciplines now participating. Revising now and testing this fall in updated language, etc. New version will be sent to trainers.

5. Mark and Jody are finishing an article on educational research agenda and submitting overall ranking by cohort. Hope for acceptance.

6. Questions about elaboration on Professionalism Task Force. After approval of Core Values, the Board of Directors was asked about infusion throughout the profession. Teaching model determined to be helpful and assigned to Task Force. Core Values integrated in Normative Model and CAPTE's draft of new criteria. Members of Task Force were shared.

7. CPI-PTA - is that revision planned? Jody answered, that it will follow revision of PT Normative Model. Anticipated 3 years to finish and then go to Board of Directors of APTA. ACCEs are asked to share revised CPIs with all faculty.

8. Questions:

- Will Task Force discuss PTA related to professionalism for teaching model? Yes, with modifications as appropriate for PTA; may relate to both PT and PTA in content but not yet developed.
- Credentialing – does data show effect of credentialing? An article has been published in the Journal of Allied Health. APTA has collected perception data.
- Dissertation has been done but not yet published. Knowledge not different but attitudes, etc. were different for credentialed CIs. Invited studies on the credentialing process. Diane added that a student group in her DPT program is addressing that topic.

B. CAPTE – Mary Jane Harris

1. PT and PTA Fact Sheets 2004 went up yesterday onto website (from BAR data).

2. HEA reauthorization – on hold now. House of Representatives is not going to vote on it this year. No action in the Senate. However, effects on accreditation remain. a) Public disclosure – positive and negative information disclosed. b) Public disclosure of outcome (CHEA also revising recognition criteria and looking at this too).

3. Criteria revision – 3rd draft is up on website. To be discussed on Sunday. To be adopted later this month and will be effective January 1, 2006.

4. BAR accreditation report –

Faculty work load information has not really helped and may not be reliable. One idea is to collect data as percent time spent in certain activities– asked for a show of hands of those who favored this level of data. Need ways to have benchmarks; Questions about listing courses – hard to translate into total role. Data (more than 10 yrs. Old) says faculty work 55 hrs. –not 40 hrs. Would be asked to report percentage of whatever your institution says is full time. Workload with web-based instruction not now included and needs to be. Suggested to ask how many hours PT Faculty typically work. Careful about reporting contact versus credit hours. Salaried employees generally don't worry about hours. Percent of time more accurate.

Question about part-time faculty. Do you consider the percentage of their work time at the institution? Mary Jane thinks current questions get at that.

5. How is data collected on BAR used related to CAPTE discussion? Not used for making individual decisions. Used for context and for benchmarking. Program chairs know that the information gets tied to institutional budgets so careful about dissemination and justifying loads.

6. Practice Department asked MJH questions “incident to” rules for CMS – opposition from ATC community which claims a paucity of PTs so ATCs should work under MDs. MJH needs information to be sent to the Department on Practice. How many programs have rural missions, clinical education programs in rural areas, grads going into rural areas? Get information to Andrew Guccione by Wednesday, October 6th. If ATCs not in MD’s offices – good to sent that information to Andrew.

7. MJH was asked for time to ask CAPTE questions about PT/PTA relationship position paper. The Federation content list does not match. A member asked if a discussion could occur at CSM or sometime – Mary Jane said, “yes” could talk at PTA SIG or here on Sunday. One person suggested that PTA programs are getting mixed signals about what Federation is expecting.

C. Manipulation Manual, Barbara Sanders

The Task Force wants to provide support to programs. The Manual has been disseminated – can obtain through Justin Moore (APTA). The Task Force charge has been fulfilled; next step- determine how tool is working and what revisions are needed. Programs for educators will continue to be offered. The Section has programming on this topic at CSM.

D. Cultural Competence Committee – Meredith Harris

Meredith gave a brief overview and enlisted the aid of AASIG. South Carolina, through the House of Delegates, charged APTA to develop strategies. Task Force formed and met with APTA staff. Health Care Disparities – report from the Institute of Medicine (IOM, 2003) showing disparities in research. NHDR, 2003, p.39. Where is PT’s data; are problems with access the same for physical therapy? Secondary data sets exist – US Government and Medicaid – but none are specific to PT. One way to get at the information might be to start with identifying programs that have pro bono clinics or services. Who are the clientele for these clinics in terms of race, ethnicity, gender and SES – need to collect this data.

Descriptors of clinicians do not exist either. Not measuring cultural competence in our curriculum. Contact Meredith if pro bono services are provided through your program– try to identify who is receiving services by race, ethnicity, access and outcome. Volunteers to help CCC consultant task force should contact Meredith Harris, Northeastern University, Boston, MA 02115, (617) 373-5980, m.harris@neu.edu Meredith also asked people to provide info on research being conducted on health disparities. Hopes for AASIG to help with task force in getting info and getting it back to APTA. Will post on website.

Questions: Can you provide help with collecting data, forms, etc.? Yes, Meredith will work with others to develop a form. Can you help people to get over the hesitancy in asking the

questions? NIH grants asks racial, ethnicity information to ensure that minority persons are included or why not. IRB proposals want information. She will try to provide information. A question was asked about legality of seeking this information. She responded about the importance of knowing if the information can or can't be reported in individual states, and she asked for members to help discover what the laws indicate. Someone suggested that de-identifying might not be enough. Thanked the group for attention and interest in the topic.

E. Admissions Data (collected by D. Jette and will be posted on website).

PTA – 69 programs responded. Diane discussed the data and applications are up; enrollment up slightly. Similar in public and private schools. Regions fairly comparable.

PT – 108 responded (50% public / 50% private) Target class size approximately 37. About 100 applicants/program, public and private. Applications are flat over last 3 years. Similar in who attends. Slightly more (may not be statistically significant) attend DPT. Applicant chose other institutes due to cost, location, DPT (not clear).

Question about common prerequisites. Section adopted those as a statement. Section could follow-up if charged.

Issue raised that data show essentially a steady state of programs competing for steady state of applicants. In this scenario, there is a question about whether class sizes will increase. Could cut program # in half or increase applicants for entire pool. Need to examine how to do that. Understood down turn but have not rebounded – need to know why. Market is strong. Need to explore why in a systematic way and to ask APTA – can be discussed tomorrow. PTA educators will not be in the meeting tomorrow – in separate session. PTA educators say that students are saying – don't want to go to school that long.

F. APTA Discussion of Letter of Demand to Federation of State Boards of Physical Therapy – Ben Massey

APTA leadership felt a need to share information about the APTA's decision to send a Letter of Demand to the FSBPT. Blair Packard, outgoing president of the FSBPT, presented the Letter of Demand at the Federation's State Meeting so some information about the Letter was public. J. Bezner (liaison to the Federation) and Ben Massey, President of APTA, attended the Federation's meeting. The APTA's primary concerns are the increase in exam fees and constitution of exam committees.. The APTA has documentation of correspondence and has a contract with Federation. In 1992 - \$90 fee for exam, the Federation had proposed an exam fee of \$400 for 2005– then reduced the fee to \$350. APTA's analysis showed the Federation's budget was healthy and a fee increase would produce a large profit. Federation disagrees. The APTA met with Federation and feels the Federation has failed to comply with the contract. APTA sent August 2, 2004 Letter of Demand requesting that the contract be enforced and that the planned fee be reduced. The Federation response in September 2004 indicated that the fee will not be reduced. One concern is that the EDC – Exam Development Committee has oversight for the exam. APTA has no representation on that Committee and is supposed to have 40% representation on all committees that have responsibility for the exam. The APTA has 40% representation on ECRCs. APTA asked for negotiation with Federation President to reduce fees. Federation says can not reduce exam fee lower. The AASIG

participants had questions about terms of contract. Answer - Frank Mallon – current issues are exam fee and composition of committees. The Contract has other terms, but those two issues are the only ones of concern to APTA at this time. Ownership of exam rests with Federation at the present. The return of ownership to APTA is not an issue now. Provisions exist but not an issue now. Pass rates were not a part of Letter of Demand. Liaison Panel has been established for a number of issues.

G. FSBPT – Dargan Ervin, PT, Federation President; State Board of South Carolina

The new Federation President came to the AASIG meeting to talk about Letter of Demand. He thanked the AASIG for the time to share the Federation’s perspective. The Federation’s Board of Directors has academicians including school directors. The Federation has 53 members (50 states and 3 territories). He reviewed the NPTE Commission’s recommendations made in 2003 and implemented in 2004. 1)more information to stakeholders; 2)hold education sessions at National Meeting (4 hrs at CSM are planned and in 2005 at the Federation’s meeting in Austin, TX another faculty track will be held); 3)develop a research agenda and fund (\$30,000 planned for research and working on grant application process).

He addressed the APTA Legal Demand and stated that the Federation agrees on exam fee and exam committee as issues and agrees on communication. The APTA asked to roll back exam fee to \$125 – tie future increases to inflation rate; to have 40% representation on committees. The consequences of not complying - a law suit and seek reimbursement of fees in excess of \$125. He discussed the Transfer Agreement of 1989. The price of the exam from 1980-2004 has increased as follows: 1980 - \$55, 1990 - \$90, 1995 - \$185, 2004 - \$350. He questioned if overly burdensome for PT students and offered comparisons to other professions; the proposed fee is not higher than other professional students pay. Federation thinks fee is not overly burdensome. Many improvements associated with fee increases– now (if state law provides) can take exam and get results as quickly as 1 day.

Cindy, psychometrician for the Federation, spoke about the external committee formed last year and the number of changes being implemented. PT exam from 200-250 questions (50 will be pretest). PTA 200 questions (50 – pretest). Increase in number of items related to maintaining exam security. Want large item bank to void overexposure, to prevent overlap, and to retire items. Increased time to take test. PT 4.5 -5 hrs, PTA 3.5 – 4 hrs. Give questions in Sections. PT – 5 sections, PTA – 4 sections. Each section is a “mini exam”; every set of 50 questions match the content outline. Each section will have pre-test items. Candidate can work within the section but once submitted, can not go back to that section. Scheduled breaks – between 2nd and 3rd sections. 15 minutes break-time not counted. 15 minute optional break – does not have to be taken. Unscheduled breaks – between sections – time continues to elapse. Reduced number of attempts to take exam. In 12 month period, candidate can take exam only 3 times. “Grandfather” the number of attempts for 2005 only; if start before March – still get 4 attempts. More “Forms” of exam so that in a given cycle, candidates will not see the same questions on more than one form.

Mark Lane discussed exam security issues. The Federation has appointed of Panel of Psychometricians to assist with increasing the quantity and quality of items, and the

Federation is maintaining on-going monitoring and investigation. He also discussed the new school report:

- Program pass rate will be sent free of charge. Can not get release of specific scores, on demand service, or content area report. He mentioned the new website for faculty about NPTE.
- Pass rates by graduation year will be posted on website.
- Question: Calculation of ultimate pass rate? He replied that the new report gives both initial attempt information and the percent of people who passed or failed regardless of how many attempts. The free report allows schools to get list of students who took exam but not individual scores. Free score reports mailed to schools (Feb. & Aug.). He was asked about on-going negotiations about score report fees. He indicated that Dargan and Ben were continuing with talks.

Meeting recessed on Saturday at 10:15 am until Sunday morning when the discussion would include Residencies, Fellowships and New Business

Meeting re-called to order at 8:30 am Sunday, October 3, 2004.

H. New Business –

1. Motion to recognize academic administrators upon retirement from the academy. Section of Education had already decided to do this annually and to post it on the website. Dr. Sandy Quillen asked that the Section recognize Dr. Martha Clendinin who retired and moved to Gainesville, FL after 30+ years, Carolyn Heriza who retired from Colorado and others.
2. The Review Committee for Section posters and presentations for CSM discussed the submissions by members. This year the Committee had a 50% acceptance rate. Faculty are submitting more (more than 130 submitted this year), but the caliber was low. Sufficient quality needs to be achieved and the Committee is willing to mentor faculty in developing better abstracts and research activities. Suggestion of a workshop on scholarship of teaching. Section on Education Board wants Review Committee to develop an on-line tutorial to assist faculty in submitting abstracts. Also, Section wants to develop a cadre of mentors to work with faculty new to scholarship. Section thinks a separate workshop on that topic probably not financially viable. An issue of the Section for Education Journal is already being developed for next year on Scholarship of Teaching. The Review Committee continued on the importance/significance to Section, sound methods, and well written abstracts. Most of the abstracts submitted this year were either not important to the Section or not significant. Special interest papers were not scholarship. Many of the abstracts had limited generalizability. Members suggested that replication was important and that not everyone may know that special interest has to be generalizable. Committee recommended getting multiple readers before submitting an abstract. Answered question about on-line submission system. Section on Education will ask Section on Research to adhere to proposed deadlines - has been in July but have been extended. Qualitative research – comment about the value.
3. One member stated that he looks forward to this meeting and networking at the informal events. He is disappointed at length of business meeting relative to total meeting. Change to

Saturday time for meeting is good, but the meeting time should be longer. Forums and strategic planning sessions would be helpful. Other members concurred.

4. Another member stated that people in this group like to share, and this group has the potential to be a positive change in the association. More interested in colleagues' opinions and thoughts than on educational programming. The President Invited a motion about business meeting. A question was asked about mission statement. The response was that the AASIG has an objective which is listed in the Section bylaws. A recommendation was made to have a program committee for the AASIG meeting and to have local help. The local group could ensure that facilities were acceptable. Members asked for the agenda to be out well ahead of time for comments. This year sharing with the consortium (independent group) limited some of the options for the meeting. For now forward, the Clinical Education SIG will take over the National Clinical Education Meeting and will work to plan a meeting with the AASIG meeting. APTA will manage the facilities. The Section President spoke against a committee which would do planning far ahead of the meeting time. The meeting is usually planned in February which allows latest topics to be considered. Diane invited more people to help to spread work. A member suggested a 2-day meeting – suggested 1 day on business and issues and other on outside programming. President Jette responded that we have some constraints if we meet together with the Clinical Education SIG as has been proposed. PTA and PT school directors already have problems meeting their relative needs at the meeting, and members are concerned about adding an additional group – clinical educators. The AASIG has also been supporting the Diversity Dinner, and that group's interest need to be considered. Several people agreed to assist in developing a mission statement for the AASIG. Diane asked that all interested parties give her business cards.

5. A member moved that the AASIG, with the Section, examine methods for representation of AASIG in the examination process. A response to the motion was that the Section has already begun to work with APTA staff, and the result of that work was the Letter of Demand. Information was provided that the call for volunteers for the ECRCs has resulted in 22 responses. CAPTE sent letter too. The motion was withdrawn.

6. A member indicated that she thought much of the intent of the previous motion is in place. She moved that the APTA Board of Directors be asked to consider the feasibility of taking the exam back for ownership by APTA. Seconded. Someone questioned if the contract with the Federation is permanent. No proviso exists in the contract for automatic review and return to APTA. The APTA has rights if the Federation does not adhere to the contract. One member spoke about being on the APTA appointee on an ECRC and the efforts of the Federation to develop a quality exam. Discussion included indicating that a breach of the terms of the contract might trigger renegotiation of the contract. One member suggested that the APTA might have conflict of interest in owning contract. Another member indicated that the Federation has too much control – state boards feel they must be members. Cost of exam is high. With the high failure rate, students must pay again, generating fees for the Federation. The 40% representation on the committees must occur, and that area has been a problem. The school directors may have a difference of opinion about a quality exam (from the psychometricians of the Federation). Federation has made too great a division between the academic administrators (education community) and themselves. The relationship is the

problem. Several members suggested becoming involved as a way to influence the Federation through item writing and serving on committees. The motion was amended and seconded to *ask the APTA Board of Directors to consider alternative examination processes or ownership of the exam.* Passed.

7. A member noted that the Federation has not had complaints from students. Program directors hearing complaints should have students write to the Federation.

8. A member moved that *the Section on Education on behalf of AASIG ask the APTA Board of Directors to assist with strategies to increase the quality and quantity of the applicant pool.* Seconded. One suggestion was to develop relationships with advisors of health care professions, and the response was that the House of Delegates had considered that motion. The motion as stated passed.

Meeting adjourned at 9:35.