



This March was our annual *MMIs* (Multi-Mini Interviews). 144 applicants made it to *Step Two* in their quest to grab a spot in the MPT program this fall. It's a hair-raising experience for most; a nine station "What's behind that door?" interview experience. Acceptance letters have now been sent out, meaning another 80 students arrive at the end of August, and we start all over again!

Doing the math, that means a lot of clinical placements required for each cohort (MPT1 and MPT2) each and every year - 480, give or take. Since I started here five years ago we now have FOUR student-led clinics (read all about the newest, PRISM, on the *NRC News*, page 2). That is a big boost not only to our program, but to the health authorities who have partnered with us. They provide our students with a new placement opportunity, and in turn our students positively contribute to BC's health care system.

We value the ongoing support of the physiotherapy community in *paying it forward*; public practice, you know you rock - always stepping up to the plate when we need more offers. Thankfully we are also hearing from more private practice clinicians and clinics, but we always need more! We are happy to answer any questions you might have. Think it's not possible to take a student at your clinic? [Read our latest "testimonial"](#) from Elisabeth, a clinic owner who has been running a practice in Williams Lake for over 30 years.

Carolyn



Our Friedman Building, framed by one of the many beautiful cherry trees currently blooming on the UBC campus.

Our medalists!



The Sochi Olympics are a distant memory, but tying into those games, we would like to present our latest winners in Clinical Education! The **CLINICAL EDUCATOR AWARD** annually recognizes excellence by clinicians in the education, supervision, and mentoring of our MPT students. Students may nominate a Clinical Educator who has provided an exceptional experience on any of their placements or as part of their ongoing coursework. Nominations are reviewed each spring by a sub-committee of the UBC PT PACE Committee (Provincial Advisors for Clinical Education).

All nominees are acknowledged with a certificate of appreciation and the award winner(s) is honoured at the annual Physiotherapy Forum.

Congratulations to this year's winners:

Level 2: *Sara Kavanagh*
University Hospital of Northern British Columbia

Level 3: *Nadine Nembhard*
MPT Program Instructor, UBC

It's that time of year again, for the *V.I.P. Clinical Educator Recognition Program* draw. This program is a lottery for physios who take our students on clinical placement.

Every time you supervise an MPT student on a placement you earn points. When you have attained sufficient points you can submit an application for a draw (at various levels) and have the chance to win \$300, \$500, or \$1,000 (the top prize includes a 1-year PABC membership). Draws are twice a year in March and October.

Congratulations to the winners of our March 31, 2014 draw:

Cobalt Level (\$300)	Scott Okrainetz Royal Jubilee Hospital
Sapphire Level (\$500)	Brenda McKnight Providence Health Care Holy Family Hospital
Royal Level (\$1,000 + 1-yr PABC membership)	Keith Tam Providence Health Care Holy Family Hospital



NRC News: from UNBC & Northern and Rural BC communities

Spring is here! Spring is here! For those of us in the North, if we repeat it enough, it just might melt the snow! It's been a very busy and productive winter, but we are looking forward to spring, and with it a fresh batch of *Northern and Rural Cohort* students embarking on clinical placements. Our 20 MPT1 NRC students will be heading out on placements at the end of April, and they will be located from Invermere in the southeast all the way to Prince Rupert in the northwest, and many rural and northern communities in between. The first year students seem to have caught the infectious enthusiasm of the first official Cohort students who are currently lining up their final two placements. It's hard to believe that our first Cohort have already completed four placements! I had the pleasure of supervising a handful of our students when I filled in as the Clinical Instructor for the Prince Rupert Interprofessional Student-led Model (PRISM) Clinic for the Level 2 placements. The Clinic officially opened in November 2013, and has had five MPT students, one MOT student and one Rehab Assistant student go through on placement. It was very exciting to put into motion the integrated primary health care model of rehab service that we had carefully planned over the past 10 months and start using the brand new equipment and space we had. And use it we did! Our schedules quickly filled with patients who had been on the Rehab waitlist for up to a year and referrals from physicians who were happy to have new programs such as Pulmonary Rehab! Students had the opportunity to see patients across the continuum of care and in the most appropriate setting, whether in the community, in acute care, as an outpatient or in complex care.

"During my time working in the PRISM Clinic, I was exposed to a multitude of learning experiences specific to rural health care practice. It was amazing to get to work with people in a variety of settings, such as complex care, outpatient, the School District and even client homes. I was thrilled to contribute to increasing physiotherapy services to the individuals of Prince Rupert."

Kate Anderson MPT student (2012-2014)

The richness of learning alongside students from other health professional training programs was a highlight for some of the students, not to mention increased satisfaction and outcome for patients.

"Working in a student-led, inter-professional model has allowed me to observe and work with team members more intimately and therefore broadened my understanding of each role, how they overlap, and how to best utilize a team approach to health."

Carmen Bedard- Gautrais MPT student (2012-2014)

Students who come on rural placements are often surprised about the breadth of rural practice, and they develop an appreciation for the 'Specialist Generalist' label that is so often applied to rural practitioners.

"Often PTs anticipate that working in rural practice narrows your scope of practice but in fact I have found it is truly the opposite. The PRISM clinic has given me the opportunity to work with a variety of different cases in a number of settings. From pulmonary rehab to hydrotherapy to treating neck or shoulder injuries you are never bored. You are challenged to use a range of skills and are frequently encouraged to develop yourself as a professional. What a unique experience and environment to develop the tools needed as a new grad!"

Charlene Copeland MPT student (2012-2014)

Students also had an opportunity to enjoy the natural beauty of the coast, including going hiking, snowshoeing and kayaking, and eating fresh seafood! After feasting on fresh shrimp on the beach, one student was heard saying: "Now, why on earth aren't there PTs knocking down the PRISM Clinic door to work here?" Yes, the Clinical Instructor position is still open and we'd love you to come try it for yourself.

Here's to all the new Northern and Rural clinics that have recently joined us and signed up to take students. Thank you. Our NRC students are very excited about the amazing array of experiences from which they have to choose.

Best wishes for a warm and gentle spring and a great summer ahead.

Robin Roots

Coordinator for Clinical Education,
Northern and Rural Cohort
Prince George/UNBC Campus

Photo: Justin Wilson and Charlene Copeland, MPT2 students kayaking in Prince Rupert Harbour

NRC

CLIN ED TEACHING TIP

Using T-Res to set learning objectives



Have you ever thought about using the student clinical logs as a tool when setting learning objectives? As students go through their placements, they complete a clinical log on the T-Res system, which keeps track (among other things) of what treatment procedures the student has done, what patient diagnoses they have seen, and the percentage of their placement experience so far which has been in each of the domains (MSK, Cardiorespiratory and Neuro).

Students can print out (or show you on their mobile device) a report on any of this data. By knowing the practice profile of what each student has done prior to your placement, it is easier to identify "learning gaps" and you and your student can more effectively strategize goals and learning objectives for the current placement.

Eventually we hope to give preceptors access to the T-Res system, but for now the students will have to provide the data for you. If you have any questions about what the data looks like or if you want to see a sample report, just send us an email!

Lindsey Donner

Upcoming
Lower Mainland
Clinical Educator
Workshops

North Vancouver
May 2
Lions Gate Hospital
[Register here](#)

Would your practice or community like a workshop to come to you?
Contact us if you have 6+ people to attend. We'll make it happen!

Northern & Rural Workshops
Hoping to come to these areas this year.
Contact Robin Roots if you are interested!

100 Mile House
May 23

Fernie
May
Date TBD

Invermere
May
Date TBD

Dawson Creek
Date TBD

Inservice

in-serv-ice [in-sur-vis]

Adjective

Taking place while one is employed: an in-service training program.

One part of Sue's job is providing **Inservice sessions** to whoever requests one. If your unit or clinic (public or private) is in the Lower Mainland, she is more than happy to come to you and do an Inservice.

Here is a list of commonly requested topics:

- **Setting objectives for your student**
- **Placements with Pizazz: Using theory to make your learning experiences successful**
- **Providing Feedback**
- **The evaluation process and form(s): Do's and don't**
- **Interprofessional placements: What and how**

She doesn't have to stick to those topics, mind you. Please [contact Sue Murphy](#) to request more information.



Our new student-led clinic and Clinical Instructor!

We are very pleased to announce the opening of the **Student Rehabilitation Outpatient Clinic** at Surrey Memorial Hospital; another successful collaboration between the UBC Department of Physical Therapy and Fraser Health.

Physiotherapy outpatient services are provided by up to six students per placement. Students will be working in a currently functioning Outpatient Physiotherapy Department, providing the opportunity to work in a busy clinical setting. The students are supervised by physiotherapist **Melissa Idle**.

The goal of the Student Rehabilitation Outpatient Clinic is to improve functional outcomes of clients, improve patient flow through the health care system, and reduce future hospital admissions or increased level of care of clients.

Often when Ingrid and I meet newly graduated students the obvious question eventually arises... "So, when are YOU going to take students??" Usually the response is guarded. "It's too early." "I need a few years, I think." "I wouldn't know what to do."

Of course we understand there may be many reasons for why a brand-new PT doesn't want to take on a student, but often it comes down to a case of apprehension. Recent grads might believe they need a few years of practice under their belts, but if you think about it, they are fresh out of the same experience a student on placement is dealing with. They have a lot in common!

Meet UBC MPT grad Scott Okrainetz. He graduated in November 2011, attended a Clinical Educator Workshop in March 2012, and took his first student at Victoria General Hospital May of 2012! He now works at Royal Jubilee Hospital in Victoria, where he will be supervising his fourth student in April...

Taking a Student on Placement as a **NEWLY GRADUATED PHYSIOTHERAPIST**

or...

Overcoming the **"BIG SCARY REASONS"**

By Scott Okrainetz, MPT

"What can I teach a student so early in my career?"

A valid question, and one I asked myself when I first considered taking a student on clinical placement. Then I saw the need... regular emails from the UBC Department of Physical Therapy, emails from the physiotherapy lead at my site, and knowing that an ever growing class size at UBC meant it was always a struggle to find enough placement sites. So the next question came along: **"Yeah, why not me?!"**

First, it's time to tell you a little about me. I'm Scott, a graduate of the 2011 UBC MPT Class. In the two-and-a-bit years since graduating I've taken three students on clinical placement. *[It would have been four if not for an unfortunate wrist fracture, but that's another story].* I started off my career right away working for an acute medicine ward at Victoria General Hospital (site for student #1) and then followed that up by adding some evening private work with CBI-Saanich. Now I have established myself as the permanent full-time physio in Royal Jubilee Hospital's respiratory ward and Adult Cystic Fibrosis Out-Patient Clinic (site for students #2 & 3). I'm also happily in the process (with a partner) of starting a new multi-disciplinary clinic in Victoria called *Fernwood Health and Performance*; opening in April. Yes, it's been a busy couple of years, but I've never been so sure of my choice to join our amazing profession.

So let's get back to this whole preceptorship deal. When I was considering taking a student I took a hard look at my six placements during my time at UBC. Were they great? Some were, absolutely; and then there were others that left something to be desired. Sometimes the preceptor and I didn't mesh well over the five weeks, but that's why support is there for students at UBC. Whether it was the Clinical Education team helping things move more smoothly, or the often hilarious post-placement debriefs with fellow students, there was always someone to talk to. Even though I may have not been over the moon about all of my placements, I definitely learned something from each of them! Placements are undeniably valuable both to the student and the preceptor, since you learn things that you just can't in many other situations.

When new graduates come out of the Masters program it is quite a daunting task. Though many left school with the "fake it until you make it" slogan from their own placements still rolling in their heads, there can be no doubt that they are still learning. This is often **BIG SCARY REASON #1** that new graduates don't take on students. The new grad is still building his/her own confidence with techniques, assessments, filling their therapeutic tool box, and even getting oriented to a new career as a whole. *Now you want me to go and confidently teach a student, answer their many questions and even critically assess their skills???* This is, of course, coupled with the fact that the new graduate remembers acutely those less than perfect placements they had or that they heard about from friends and doesn't want to disappoint an eager student in the same way.

If you somehow pole-vault over #1 you might find yourself facing **BIG SCARY REASON #2**. This is where you are wondering if you have the realistic caseload to support both yourself and a student. Is there enough patient time, teaching time, skills the student can do at their level and general content to fill a student's day so that they feel they got enough from the placement overall?

Wait though, don't pull out the big red "NO" stamp just yet new graduate; there is always hope of crushing those reasons. *Big Scary Reason #1* can be conquered purely by realizing you have been there, you've done the exams, you know what you were like when you started your schooling compared to right now, and if you didn't know something you wouldn't have that MPT after your name. Also, even if you started to work right out of the gate and are taking the first available 1A student then you already have five months as a physiotherapist under your belt. Students are HUNGRY for knowledge and there is so much you can give them - everything from charting, patient interviewing practice, interprofessional communication skills, clinical knowledge you've learned from your case load; and more than anything, time to practice. We all know that in class you learned stuff, but on placements you were able to do, and be proud of what you learned - many students will be more than happy just with that opportunity to practice skills alone!

Big Scary Reason #2 can be harder to get past, but it is doable. It is an amazing benefit for preceptors to take students because nothing solidifies your own learning like teaching what you know. Teaching is often even stronger than repeatedly drawing out those brachial plexuses again and again, and then reciting them, or making pipe cleaner models because you really want to make sure you've got it down! So here are a couple of things that can be done with a slow caseload to further improve a student's experience.

1) TEAM UP!

Student's can benefit greatly from working with two physiotherapists and having two points of view to consider while they earn their full placement hours.

2) MULTIDISCIPLINE IT!

It never hurts to have a student work with other professions to get different perspectives of how their future patient may be treated. Several professions I have used in my practice include Occupational Therapists, Respiratory Therapists, Speech Language Pathologists and Rehabilitation Assistants. Observing surgeries can also be a valuable part of the learning experience.

3) IT DOESN'T HAVE TO ALL BE IN ONE PLACE!

If you are part of a physio committee or have to go to a work in-service or conference take them along for the ride. It allows the student to see there is much more to being a practitioner than just patient care.

I hope I've given you some ideas to ponder as a new grad when it comes to taking students on clinical placement. I have found training each and every one of my students a rewarding and energizing experience as I feed off their thirst for knowledge. A lot of this comes down to **paying it forward**; some super-amazing preceptor brought you into their practice to give you all the benefit they thought they could and it would be awesome if you could overcome the **BIG SCARY** and consider doing the same.

See you at the next Physiotherapy Forum.

Scott.



APP Eval Update



Are you still wondering if the APP form is a feasible way to assess student performance? Have you seen out the online edition of *Physiotherapy Canada* recently? If so you might have noticed a familiar name or two!

Click on the magazine cover to be taken to the article *"Assessing Physical Therapy Students' Performance during Clinical Practice"* (Sue Murphy, Diana Dawes and Meghan Dalton) to find out what the statistics say about the APP.

We owe everyone who laboriously filled out two evaluation forms (the CPI and the APP) during our initial pilot of the form a **HUGE** thank you – we definitely couldn't have done this without you!

See you at the Forum!

Ingrid and Carolyn will be there again this year, at the UBC Clinical Education Table in the **UBC Lounge**. Drop by and say hello. As always, we'll have a fun giveaway item and treats -- in exchange we're happy to talk to you about our program, and how you can become involved in the education of a UBC MPT student.

Australian Telesupervision Project

Sue and Robin Roots are co-investigators on a "telesupervision" project with the University of Sydney, Australia. This project is in its early stages but will explore the use of iPads, iPhones and other technology to provide remote supervision to students in rural areas or areas with limited supervision, or to provide mentorship and support for preceptors who are new to their role. It will involve students from OT, PT and Speech Language Pathology from UBC, Sydney and the University of Alberta. More info coming soon!

UBC Workshop for PT Clinical Faculty

Are you a UBC Clinical Faculty Member? If yes, you are eligible to register for the faculty development workshop series *ABC Educational Primer for Clinicians*. This "primer" consists of three 3-hour workshops spread over 1.5 days. These problem-based and highly interactive workshops cover the knowledge, skills and behaviours that are needed to become an effective clinical teacher. Although designed for medical preceptors, the principles apply to any clinical education situation and it is a great way to meet your Interprofessional colleagues! [Click here for more information.](#)

WHAT'S NEW?

Tidbits of information worth knowing!

On the Road to Pittsburgh

In June Sue and Stacey Rigby (Physiotherapy Clinical Practice Leader at Royal Columbian Hospital) are going to the *"Altogether Better Health VII"* conference in Pittsburgh to give a presentation on the RCH Student-led clinic. This is an international conference on Interprofessional Practice and Education. Sue and Stacey will be presenting on behalf of all the partners in the clinic.

WorkSafeBC Links

We wanted to make sure that everyone has these two important web page links re: UBC WorkSafeBC reporting information. [Click on the links below for details.](#)

[WorkSafeBC coverage for practicum/clinical placement students](#)

[Reporting Accidents and Incidents](#)

"An investment in knowledge pays the best interest."

— Benjamin Franklin



Coast Progressive Physiotherapy
Sechelt

**Oakridge Physiotherapy Centre/
Vancouver Physiotherapy & Sports Centre**
Vancouver

Deep Physio
Dawson Creek

Gastown Physio & Pilates
Vancouver

Did you know you might be eligible to become a UBC Clinical Faculty member?

Look here, or contact **Carissa Dyck** for more information!

Excellence in
Clinical Education
& Learning

MODULES
excel UBC PT

"EXCEL"ent NEWS! Clin Ed Learning Modules are coming!

Sue and Carolyn have signed off on a "Statement of Work" with UBC's Educational Technology division to produce a series of online resource modules (to be called "EXCEL Modules"). The idea has been floating about since 2011 - Carolyn was always just looking for the support and technical help to materialize!

Our aim is to provide more in-depth resource materials to aspiring and current Clinical Educators who live outside of BC's large urban centres and cannot attend a Clinical Educator Workshop. We also have you, the private practice clinician, in mind. We know our workshops provide valuable resources for those about to take a student on placement and want to get that same information on our website, easily accessible to all. We hope these eventual 12 modules on hot topics (e.g., Learning styles, Providing feedback, Dealing with poor performance) will provide added support to anyone looking for it. We aim to make the modules straight-forward, fun and informative, in easy-to-digest formats and lengths!

In early May we start work with a videographer. We are looking to release the first three modules sometime in August. We will keep you posted!!

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UBC

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