Looking Forward

Well, I was tempted to put a snowflake at the top of this newsletter, given the “Juneuary” weather that most of the province experienced this year. I have, however, opted to go with a picture I took at the Salt Spring Island Market a few weeks back (in glorious sunshine, by the way!).

I had a great working trip up to Prince George in May, hosted by Robin Roots. I was able to put a name to many faces, went on several site visits (thanks Les and Angela!) and spent some time with Amy and Robin at the UNBC campus.

Summer is a time to regroup, work on projects, and plan ahead for our next cohort of 80 students arriving at the end of August. This year will be especially interesting, given a cohort-within-a-cohort will be starting—15 students in the NRC (Northern and Rural Cohort). Robin has been working very hard with our stakeholders in these communities (I think she would have appreciated a clone to help her!) and exciting times are ahead!

Happy August everyone!

Carolyn

Preceptor Recognition

Oh, it’s almost here! We are in the final stages of putting together our new UBC/PABC “Preceptor Recognition Program.” We appreciate you. Come on, you know we do. Maybe we just haven’t told you often enough… We would gladly be like Mary Kay and hand out pink Cadillacs if we could—you all deserve one!!

We have heard from many of our Clinical Educators who take students that one of the forms of recognition they would most value is support for professional development. While, unfortunately, we can’t give you continuing education credits at UBC, we will be unveiling a new recognition program (based on points and draws) that will offer some financial support for use towards courses, resource books, etc. Our budget is limited but we know every little bit helps!!

More coming to your mailbox soon….

High praise

She will probably protest, but I invoke editorial rights to include this on the front page, as it is worthy of praise!! Our very own Sue Murphy won a UBC Killam Teaching Prize this spring!! The prizes are awarded annually to faculty nominated by students, colleagues, and alumni in recognition of excellence in teaching. This award is THE TOP teaching honour at UBC and we are all very proud of Sue!

No more “Weak Pass!”

For many years there has been a “weak pass” as one of the Pass/Fail options at the end of the placement. This category provided a means to indicate that while the student was not unsafe or incompetent, his/her skills in the placement area of practice were weak and needed more practice. As of September 2013*, we will be phasing out this “weak pass” category, and placements will be evaluated as “Pass/Fail” only.

*(In 2012-2013, MPT2 students will continue to operate under the “weak pass” rule as this is how they entered the program, but the incoming MPT1 class and all subsequent cohorts will operate under the new Pass/Fail system).

There are many reasons for this change, in particular to bring us into line with most other Canadian Universities and to clarify and simplify student progress in the program (see diagram to the right, which gives you an example of how administratively complex it becomes when a student is graded with a weak pass!). We hope that this change will make it simpler for everyone, students and clinical educator alike. If you have any questions about this change please contact Sue.
Website changes

Behind the scenes, several of us in the department have been working at updating information for our website. The timing was good, as the Faculty of Medicine was transitioning over to a more user-friendly platform called WordPress. I (Carolyn) have been involved in creating, editing, and updating content and navigation on our Clinical Education pages. WordPress has allowed me to take more control of where I can put information. I have also learned how to make things like online forms, so they will figure more prominently from now on, making registration quick and easy for everyone involved! Keeping up with technology has been fun, frustrating, and enlightening! I am always happy to hear any feedback if you have problems or suggestions! Our Clin Ed pages are a work in progress!!

Here are some highlights of new items (found in under Clinical Education > For Clinical Educators):

- A common question is placement dates for both cohorts. They are now listed.
- I have created a new sub-menu called Registration links. Here I’ll post links to any open registrations (for example, an upcoming Clinical Educator Workshop).
- The Clinical Educators Workshops calendar is now on its own web page, rather than a PDF!
- If you are a clinical education site (you take students on placement) you can now easily keep your site information up-to-date. Simply fill out our Site Information Update for Clinical Sites online form and submit!
  - You can let us know any changes you might have to your site—e.g., contact, website, address, etc.
  - This form also allows space for sites to provide information about the clinic. Ingrid will take that information and update our records so students can get the best possible picture of what type of services are offered at a particular site.
  - As well, we have included an area where our contacts can provide information on possible student accommodation suggestions (e.g., perhaps a rural hospital has off-site housing for visiting doctors/students, or staff at a clinic have a room to rent).

Please take a moment to fill out this form if you have any new information to provide to us. Much appreciated!

Also of note, and hot off the cyber presses, is the redesign of our UBC PT homepage. It has now morphed to the UBC brand “look and feel.”

The navigation has changed from a left-hand menu ① to a top-band version ②.
Perplexing Perceptions with Private Practice

[Gee, alliteration is fun!] One of the common themes that we come across is the challenge private practice perceives regarding taking a student on placement. Ingrid, Sue and I—in our travels to events—often hear sentiments like these:

- “We are fee-based. A student would lose me money.”
- “Our patients are paying for their treatment—they expect a high level of care.”
- “I work varied hours. I don’t know how that would work with a student.”

Despite these challenges, however, we feel it is important to expose students to the private practice setting, especially as students request this and many go on to work in private clinics immediately after graduation. We have clinics of all sizes and types who now successfully take students on a regular basis, and we would like to add more. Interestingly, clinics that take students once almost always continue to take students—and are often surprised how well students fit into overall clinic operations, adding value for clients and staff rather than taking it away. And the Clinical Education team is always ready to answer your questions and provide help if you need it! If you are considering taking a student for the first time, consider attending our workshop/think tank for Clinical Educators in private practice on September 15th (see flyer on the following page) where we can provide you with information and discuss any questions.

Jill Renowitzky (P.T.,) is Regional Team Leader–Burnaby for pt Healthcare Solutions Corp. pt Health has been a great supporter of our MPT Clinical Education program. We asked Jill for a little insight on the ins and outs of taking a student in a private practice setting.

Tell us a bit about pt Health
pt Health is a multidisciplinary private healthcare company that focuses on two main pillars—integrative treatment to offer best care options for patients, and improved accessibility to care by maintaining lower fees or no fees whenever possible.

What is your role in coordinating student placements?
I am the first point of contact for the university. I coordinate with my staff of physios and the PT department to determine best fit for the student and their learning environment. I also follow up with students throughout their placement 1-2x and speak to their supervisors on a weekly basis regarding their progress. At the end of a placement round we usually host an event to allow the physios, the students and those of us that recruit, a chance to mingle and review the quality of their experience on placement.

What are the benefits (to your company) of offering a student a placement in a private practice setting?
They are both selfless and selfish to be honest. Above all, it gives us a chance to be recognized as a teaching facility supporting the students with practical experience to prepare them for work after graduation. It is also an opportunity for us to give back to our profession. We all play a role in moving the field of physiotherapy forward in healthcare. As well, fellow coworkers are able to meet the soon-to-be graduates—many of whom we would love to recruit to work for us! Offering a placement can further provide the student with an invaluable experience that shows them what pt Health can offer for their careers (e.g., mentorship/support, educational allowance, etc.).

What do you think a private practice setting offers a student?
In private practice, we learn a few things that, although we may experience it everywhere in healthcare, we may not encounter it to the same degree in other environments. One is that we often have a busier caseload and have to get very good at multitasking and delegating. We also have to learn how to interact with third party payers including understanding coverage, the process to get extensions, learning how to fill out the required paperwork and what to communicate directly to adjusters. Lastly, we often are more focused on customer service in an environment where more of the patients are paying for their treatments and thus can be more demanding with their expectations.

What does a PT take out of the placement opportunity?
Having a student around helps us to question how and why we do what we do. They also have some of the newest theories or research results and keep us up to date. But what I like most is that we get to meet some great and very qualified individuals in the graduating class. I believe we have hired someone every year for the last few years.

Are there any special considerations related to patients or patient treatment to think about in private practice?
As for treatment in private practice, in general, what we learn in school is what we need to know when we work. Coming up with a diagnosis, goals and treatment plan and rolling out expectations with the patient should be based on the injury. However, as mentioned previously, we need to learn how to interact with third party payers and the process required for further treatment extensions. We need to manage and be on top of coverage so that there is no interruption to our treatments. We also need to be good at customer service, making sure that we are not only offering our patients the best treatment but the best overall care from the time they walk in to the time they leave.

Do you have any advice/suggestions for private clinics (small or large) that are planning to take their first student?
Just do it! It is a wonderful experience for everyone and a great way to be part of the physiotherapy community.

Are there any special considerations in organizing a student placement within a large private practice setting?
Certainly! There always need to be special considerations to be sure it is a seamless transition between practitioner and student. At this time we take students in their final two placements so that the supervising therapist can block off time throughout the first week and slowly transition a portion of their caseload over to the student without overwhelming the student or the supervisor.

“...I never teach my pupils. I only attempt to provide the conditions in which they can learn.”

— Albert Einstein
Summer was a little late arriving to Northern BC however much like the NRC initiative, it is now in full swing! The Prince George physiotherapy community has opened their doors to students offering excellent learning opportunities and lots of extracurricular fun. Ten MPT1 students were in PG for 1A, seven for 1B and three for 3A and 3B. Students were quick to jump into a number of events to help raise the profile of physiotherapy clinical education in the North. This included hosting a hands on session for high school students (Discover Health Careers Fair) and taking part in a Canadian Sport for Life Physical Literacy Project, assessing the physical skills of local youth. In June, two MPT students and one MOT student participated in the Health Care Travelling Road Show, an inter-professional initiative to promote health careers to youth. Together with students from medicine and lab technology, they travelled to the remote communities of Fort Nelson, Chalo, Chetwynd and Saulteau. “I never knew Prince George was so far south!” said one student. Besides learning from, about and with other health profession students, they visited health care facilities to get a sense of what health care services exist in remote communities.

The Prince George community has been territorially supportive: helping students find accommodation and treating them to a number of events such as canoeing and kayaking on the Crooked River, hiking in the local mountains and community hall fiddle dancing. Students were also invited to join local physiotherapists for continuing professional development (CPD) sessions held this spring and summer. The first was a broadcast of the PABC podcast on gait given by Deb Trelora, PT. The second was a presentation given by Lois Lochead, PT, on the use of real time ultrasound for the assessment and treatment of pelvic floor dysfunctions and strategies to improve core function. We look forward to hosting future CPD sessions in our newly renovated UNBC Physiotherapy Plinth Lab. Fully equipped with audiovisual capability to connect to UBC and

outfitted with physiotherapy plinths and equipment, we hope to begin regular education sessions in the Plinth Lab in September.

Feedback from all the students has been very positive, frequently voicing an element of surprise by the breadth and wealth of learning opportunities available in northern and rural communities. The four students that have been a part of the Northern and Rural Cohort Pilot have expressed significant interest in continuing their rural experiences and are grateful for the opportunities afforded to them. We are still looking for more clinical education placement sites in the North, particularly outside of Prince George, as well as other rural sites in the Interior. We will be admitting 15 students into the Northern and Rural Cohort this coming September so will need more northern and rural sites come Spring 2013. We are working closely with Northern Health on a number of education and physiotherapy service initiatives, but I would love to hear from you with your ideas and interest - - - -

Robin Roots, Coordinator of Clinical Education, Northern and Rural Cohort
robin.roots@ubc.ca

What’s Happening?

A committee of health professional educators from Northern Health and UNBC (including our own Robin Roots) is organizing a Clinical Educators conference in Prince George October 22 and 23. Here is the information, for anyone interested!

Clinical Educators’ Conference 2012

Prince George, BC from October 22 to 23, 2012

registrationisnowopen

keynote speaker - Barb Bancroft RN, MSN, PNP is a widely acclaimed national speaker, noted for her humorous, entertaining and information packed seminars. She is author of the books Medical Minute, An Apple a Day, the ABCs of Diet and Disease and Live a Little, Laugh a Lot.

multidisciplinary themes

• Models of Clinical Education
• Inter-professional Education & Practice
• Innovations to Clinical Skills, Education & Practice
• Clinical Education Partnerships in Clinical Education

call for abstracts

Abstracts for oral presentations, workshops and posters is now open. To submit please visit: clinicaleducatorsconference2012.com

deadline for submission: August 15, 2012

Draft Agenda

8:00-8:30 Registration/Hot breakfast/Mingle
8:30-9:00 Introduction/’What’s the problem?’
9:00-10:00 Presentations and first activity
10:00-10:30 Networking break
10:30-11:30 Second activity
11:30-12:15 Where to go from here
12:15-12:30 Wrap up

Want to join in the discussion? Click here to register online

Any questions? Contact Sue Murphy
sue.murphy@ubc.ca
604-822-7413

Physical Therapy UBC

For more information and registration details please visit clinicaleducatorsconference2012.com

Registration deadline: Wednesday, September 5th @ 4:00 pm
Hello Everyone!

Thank you to all of you for your diligence in sending back the completed student CPI Evaluation packages in such a timely manner. It is very much appreciated.

Our MPT2s will be starting their last placement August 27. Graduation is just around the corner for this cohort!

We are in the planning stages of our Level 2 placements — the dates being:

- Level 2A November 13 – December 14, 2012
- Level 2B January 2 – February 1, 2013.

If you haven’t already done so, kindly send me your offers! For those HSPnet users, please enter your offers for this timeframe.

We appreciate your support in providing wonderful clinical placement experiences to our UBC students!

Ingrid Dill

Optimal Learning Strategies

Ok, so you have all heard about the “VPD” – but what the heck is “ZPD”?! The Zone of Proximal Development, or ZPD, was first described by a Russian psychologist, Leo Vygotsky. The ZPD describes the level of tasks that are just beyond the learners independent capability. Vygotsky’s theory says that optimal learning occurs when learners are challenged and supported to complete tasks in that zone. In other words, when increasing the degree of difficulty of a task for a learner, it is better to progress activities in a “stepwise” way, gradually increasing the level of challenge, rather than to present a learner with a task that is way ahead of their current abilities. So what does this mean in the clinical setting? Ways to increase the difficulty of the task might include decreasing the time allowed for the task, increasing the level of autonomy and independence, or assigning a more challenging patient.

According to Vygotsky, incorporating one of these factors at a time rather than all at once will lead to more effective learning – and less frustration for you and for the student!

We welcome the following new clinical sites...

Väkkommen

That caught your attention, didn’t it?!? Väkkommen is Swedish for “Welcome…”

Optimale Läringsstrategier


Enligt Vygotsky, att använda en av dessa faktorer en gång i taget istället för att använda dem samtidigt kommer att leda till mer effektiv lärning – och mindre frustrering för dig och för den elev.

Kontakt...

Sue Murphy
Associate Head, Clinical Education
sue.murphy@ubc.ca

Carolyn Andersson
Clinical Education Officer
→ Contact Carolyn for workshop info
carolyn.andersson@ubc.ca

Ingrid Dill
Clinical Placement Assistant
→ Contact Ingrid about placement logistics
ingrid.dill@ubc.ca

Robin Roots
Coordinator for Clinical Education,
Northern and Rural Cohort
robin.roots@ubc.ca