Meeting Commenced: 12:00p

1. **Call to order, attendance sheet, introductions of members and guests, and welcome:**
   
   **Tamara Gravano**
   
   a. Tamara Gravano -- Outgoing Chair; moving to AGPT BOD
   b. Mary Milidonis -- voted in as Interim Chair
   c. Officers
      
      i. Jackie Osborne – Secretary – term ends in Fall 2017
      ii. Will Dieter -- Nominating Committee Chair
      iii. Emma Phillips (absent) – Nominating Committee Member
   d. In Attendance: Kendra Harrington, Heather Knight, Becky Olson-Kellogg, Jennifer McMahon, Missy Criss, Chastity Hayter, Jose Kottoor, Gemma Longfellow, Jacob Dorman, Linda Bloodworth, Deb Kegelmeyer, Joy Caguimbaga, Jackie Metro, Sarah Ortlieb, Ali Holder, Marika DeSantis, Andrew Harnish, Kathy Brewer
   e. Please contact Karen Curran, administrator for the AGPT, if you are not receiving our communications via email.

2. **REVIEW:**

   **Mission purpose of R/F SIG:** *The purpose of the R/FSIG shall be to provide a forum through which individuals having a common interest in postprofessional residency and fellowship education in geriatric physical therapy may meet and promote excellence and the advancement of the specialty of geriatric physical therapy via the growth and development of accredited residency and fellowship postprofessional educational programs.*

   **Objectives of R/F SIG**
   
   A. *Promote the development and expansion of accredited residency and fellowship programs in geriatric physical therapy in the United States.*
   B. *Develop and distribute collaborative resources for geriatric residency and fellowship didactic and clinical curricula.*
   C. *Provide a forum for discussion for residency and fellowship program faculty related to:*
      
      a) Accreditation standards and criteria
      b) Faculty development and training
      c) Curricular development and planning
      d) Overall program management
      e) Collaboration between and among existing and developing programs
D. Provide a forum for current or former residents and fellows to present evidence-based work produced while enrolled in a residency or fellowship program.

E. Provide an avenue for interaction with other recognized specialty areas within physical therapy and with other health care professionals who have an interest in accredited postprofessional residency and fellowship education.

3. Updates from AGPT/ABPTRFE: Kendra Harrington
   a. Talking Points
      a. RF-PTCAS:
         i. An APTA annual report was posted last fall with data from the 2014-2015 application cycle, inclusive of application trends from non-RF-PTCAS participating programs. This document is under the Aggregate Residency/Fellowship Program and Applicant Data located within the News and Updates section of abptrfe.org.
         ii. APTA staff is current migrating the 2015-2016 application data from both RF-PTCAS and information from non-RF-PTCAS programs provided within the annual reports filed last month.
         iii. To facilitate data analysis and the publication of the APTA Residency/Fellowship Program and Applicant Data annual report, please make sure you provide final admission outcomes after each application cycle.

      b. Current Program Statistics
         i. 224 accredited residencies; 44 accredited fellowships (268 total programs)
         ii. Applications (81 applications total)
            1. 59 initial accreditation applications
            2. 22 reaccreditation

      There are another 29 programs who have been granted recognized developing status

      c. 2016 saw a 7% increase in the number of accredited programs. While the average annual increase has been 20% over the last 4 years, ABPTRFE changed its initial accreditation process in 2015 by including a candidacy phase to accreditation. This has resulted in a longer time period for programs to complete the initial accreditation process. Therefore, looking at the percent increase in accredited programs for 2016 is not a true representation of residency/fellowship program growth.

      Looking at the number of new programs that have applied for initial accreditation between 2015 and 2016 is more representative of ABPTRFE growth. In 2016, ABPTRFE experienced a 28% growth in the number of programs seeking initial accreditation compared to 2015. This does not include the 20 additional programs that sought recognition status (first phase of accreditation) in 2016.
d. Update on Work of Consultant
   i. The consultant hosted an open forum on Thursday, February 16 and provided a summary of the work she has done to date and the timeline for work accomplishments in 2017.
   ii. Please go onto the ABPTRFE website, review the proposed revised clinical residency/fellowship standards and provide feedback using the survey link. The feedback period will close on March 30.
   iii. Please note the revised standards are only for clinical programs at this time. The non-clinical program standards will be revised and public feedback sought this summer.
   iv. The remainder of 2017 the consultant will be focused on:
      1. Collating the feedback from the clinical standards open feedback session; presenting the summarized feedback to ABPTRFE; and creating the final draft of the revised standards;
      2. Creating companion documents for program to use in applying for accreditation and reaccreditation based on the revised standards;
      3. Revising the non-clinical residency/fellowship program standards; conducting public feedback sessions and finalizing these revised standards; and
      4. Auditing the ABPTRFE policies and procedures and providing recommendations for modifications to these policies and procedures.

e. Residency Competency Instrument
   i. The statistician hired by APTA to conduct the validation study of the Physical Therapist Residency Competency Instrument has received IRB approval to move forward with the study. Programs will be contacted beginning next week regarding their interest in participating. The hope is that 100% of residency programs will participate in this important step to validate the instrument. Please contact APTA residency/fellowship staff for questions on participation or the study in general.

f. Practice Analysis Process
   i. ABPTRFE and ABPTS have put together a subgroup of its members to review the practice analysis process required for residency/fellowship recognition through ABPTRFE and specialty recognition through ABPTS.
   ii. The purpose of this group is to determine what measures are necessary, and any impact of these measures, for aligning the practice analysis process thereby ensuring that the content included within the practice analysis meets the needs of both boards.
iii. The subgroup will report to each board during the joint ABPTRFE-ABPTS meeting held in May.
iv. Once the practice analysis process is revised, ABPTRFE will begin to validate or revalidate those areas of practice that are not ABPTS-approved areas and have been established at least 10 or more years ago.

g. Accreditation Management System
i. One recommendation from the ABPTRFE consultant was to streamline processes related to accreditation and reaccreditation activities of residency and fellowship programs.
ii. The creation of an electronic accreditation management system will help ABPTRFE achieve such streamlining.
iii. The APTA Board of Directors approved the money within the 2017 to explore and begin development of this system.
iv. APTA staff has identified a vendor and is currently working to secure a contract, and staffing, to begin work on the development of this system.
v. The plan is to have the system operational for January 2018.

Talking Points will be in the program director newsletter that will be sent out next week. Please feel free to contact Kendra with any further questions. KendraHarrington@apta.org

b. In Geriatrics -- 15 accredited programs, 4 candidacy phase, 2 in development (4 more total than last year at this time)
c. Post professional Geriatric competencies for Residency Grads: Task force has been working last two years to develop a resource manual based on geriatric specialist essentials for the geriatric practitioner

4. Support for Residents: Tamara
i. Last year goal was to Support Resident’s applications to Geri Residency Programs; Investigate awarding scholarships to residents
ii. Tamara brought forth a motion to the AGPT board -- $5000 to help support new applicants to residency programs
1. Requested $5000 for a geriatric resident or future resident.
2. Merit based award.
3. If awarded, will need support to develop criteria.

BRAINSTORMING: What should the merit criteria be?

1. Based on discussion members of the SIG agree that multiple awards in smaller amounts better meet the goal of attracting applicants to geriatrics.
   o Agreed on -- Five $1000 scholarships
   o Will need to refine the criteria however the following ideas were generated:
     ▪ A statement such as “awarded contingent upon acceptance” is valuable
A statement such as “the AGPT recognizes the value of Residency education and therefore there are scholarships available” posted in RFPTCAS or program websites will be valuable

There is agreement that the merit criteria should include letters of recommendation, essays, demonstrated commitment to geriatrics and experience with older adults personally and/or professionally, short essay about “Where do you see yourself in 2 years?” and/or “What do you think are the most pressing issues in the area of geriatrics currently?” Perhaps put a word limit. (250 words? 500 words? Members have not agreed on word limit at this time.)

- We could create a rubric of the items we ask for to score applicants
- Will need to appoint a subcommittee to review applications
- Want to have a rep from the RF SIG have a vote along with the AGPT Board when the final decision is made.
- No current agreement on when award would be made available to recipient. There may be a mismatch between when people come into residency and when we give the award.
- Could put a tagline on brochure that indicates that merit-based scholarship is available; perhaps that could go on RFPTCAS
- First Academy or section to offer this type of scholarship
- If this is successful then perhaps we can develop an award to off-set cost of GCS exam

**ACTION ITEM:** Group determined criteria should be developed based on discussion and sent out for group review and comment.

5. **Advertise open positions for Geri Residencies:** New Presentation at CSM
   a. Geriatric Residency: A Call to Action for Students, Clinicians and Educators
      i. Kathy Brewer, Tamara Gravano, Greg Hartley, Heather Knight, Becky Olson-Kellogg, Jackie Osborne and Rob Robinson
      ii. Presented on Saturday 11am-1pm. Henry B. Gonzalez Convention Center Room 007B
   Please join us! (Could be Room 008B – this is what is listed in the CSM App.)

6. **New Business: Call for nominations from the floor for the following positions:**
   a. Interim Vice Chair is now an open position – until 2018
   b. Looking for someone from the floor for Nominating Committee need three
      i. Will Dieter – Chair
      ii. Emma Phillips – Senior Member
      iii. Open Member Position
   c. Secretary – Will D. to work on finding someone to fill this role
   d. Duties of these positions were read and are detailed below:

   Per standing rules:
   **Duties:**
   Vice-Chair
   a. Serves as R/FSIG Chair in the absence of the Chair.
b. Serves as liaison to the AGPT Program Chair to coordinate R/FSIG programming at CSM and Annual Conference.
c. Reviews the R/FSIG Standing Rules biannually for consistency with the AGPT and the APTA, and recommends appropriate revisions.
d. With the R/FSIG Chair, or designee, prepares the R/FSIG newsletter.
e. Other duties as assigned by the Chair.

Secretary

a. Records and distributes minutes of all R/FSIG officer and membership meetings. Minutes will be distributed to members, officers, the AGPT Board and Executive Director as appropriate. Minutes are submitted within 45 days of the meeting.
b. Maintains all written records of the R/FSIG.
c. Maintains the R/FSIG membership record.
d. Completes routine official correspondence of the R/FSIG including notification of meetings, elections results, etc.
e. Other duties as assigned by the Chair.

i. Nominating Committee members

The senior member of the committee will serve as Chair.
b. Identify and slate candidates for the R/FSIG officers.
c. Distribute ballots and candidate information.
d. Count ballots and convey results to the Secretary for distribution.

e. Will Dieter opened to the floor any opportunity for nominations or interest for stated vacancies. No interest from the floor. Will then proposed filling the interim chair role and Andrew Harnish (member in attendance) filling role in Nominating Committee

f. ACTION ITEM: Tamara to take this proposal to the AGPT Board Addendum- Incoming interim chair, Vice cahir and Nom Com member Voted and approved on 2/18/17 at AGPT BOD meeting.

7. New Business: (Mary Milidonis) **Review AGPT 2017-2019 Strategic Plan items relevant to the RF SIG**: See Attached Appendix 1- RF SIG areas highlighted in yellow.

a. What can the RF SIG do to help increase pool of residency applicants?
   i. Ideas generated from discussion
      1. Develop a video/product that can be disseminated to entry level programs and/or for residency program directors about value of residency education in geriatrics
      2. Implement local residency panels to talk about value of residency
      3. Establish a social Media presence -- Twitter specifically for this SIG
      4. Schedule an Open Forum at future CSM for current residents to talk to future applicants – could be an informal meeting/roundtable; could be formal presentation; could address “I was in your spot a year ago”...

Meeting Adjourned: 1:00p

Appendix 1
American Academy of Geriatric Physical Therapy
2017 – 2019 Strategic Plan

Vision Statement
The physical therapist will be the practitioner of choice for promoting optimal health and movement of the aging adult.

Mission Statement
The mission of the Academy of Geriatric Physical Therapy is to promote physical therapist best practice and to advocate for optimal aging.

Values Statement
To respect the uniqueness and diversity of aging adults through compassion, caring, commitment, and excellence in the provision of services, we value…

- Aging as a positive experience.
- The unique perspectives and contributions of all physical therapists, physical therapist assistants, and students to enhance the quality of life of older adults.
- Collaborative relationships based on respect with internal and external constituencies.
- Leadership’s communication and accountability to all stakeholders.

Goals/Objectives/Strategies

Goal: Provide educational initiatives that advance physical therapist practice for the aging adult.
Goal Champion: Myles Quiben

1. Ensure that entry-level physical therapists and physical therapist assistants are prepared for contemporary practice with the aging adult.
   a. Promote the published entry-level geriatric competencies using multiple communication platforms (website, GeriNotes, etc.) Academic Education Committee, Communications Committee
   b. Develop a compendium of teaching strategies for academic programs. Academic Education Committee
      i. By June 2017, establish a task force to develop the compendium
      ii. By Sept 2017, release a call for submissions from membership of educational strategies
      iii. By Sept 2018, complete review of submissions
      iv. By CSM 2019, release completed compendium
   c. Develop continuing education programs for educators to incorporate the competencies into the curriculum. Academic Education Committee
      i. Identify individuals to develop proposals and presentations (March 2017)
      ii. Submit a proposal for CSM 2018
      iii. Submit a proposal for ELC 2018
   d. Create a venue for educators teaching geriatric content to collaborate. Academic Education Committee, Communications Committee
      i. Add an educators’ community to the new website
      ii. Populate content under the educators’ tab

2. Ensure that clinicians are current in knowledge of contemporary geriatric physical therapist practice.
   a. Provide continuing competency resources.
      i. Develop an advanced proficiency course for the PTA to be delivered by fall 2017. Regional Course Director
      ii. Develop and disseminate a list of speakers and topics for regional programming by fall 2017. Regional Course Director, Home Study Editor
      iii. Develop annual continuing competency agenda, including free webinars and podcasts for members. Regional Course Director, Home Study Editor
iv. Develop the Advanced CEEAA program by CSM 2019. Regional Course Director, CEEAA Administrators.

v. Finalize the Balance and Falls credentialing course by fall 2017. Regional Course Director final faculty approval (CVs, locations, contracts) by summer 2017. Regional Course Director.

vi. Promote resources for residency curricula annually. RF SIG, Communications Committee.

vii. Promote resources for GCS preparation annually. Practice, Communications Committee.

viii. Board develop annually topics for focused issues for GeriNotes (copyright, test question development, etc.). BOD and GeriNotes Editor.

3. Educate other health care professionals and associations about the role of the physical therapist with the aging adult.
   a. Develop a process for marketing AGPT to related associations’/organizations’ meetings
      i. Identify potential meetings and exhibit at one external association conference in 2018. BOD and SIGs
      ii. Advertise the due dates of submissions and encourage members to submit abstracts/presentations to external association meetings by March 2017. PR and SIGs
      iii. Investigate provision of funding for members presenting at external organization meetings by xxx. Finance Committee
   b. Develop educational brochures/presentations for members for community use.
      i. Update the current resources for members by December 2017. SIGs

ii. Develop new resources for members to use with consumers and students by 2018. SIGs

Goal: Promote physical therapist practice that delivers value by utilizing evidence, best practice, and outcomes.
Goal Champion: Sue Wenker

1. Create evidence based resources.
   a. GeriEdge will create at least one document per 18 months that recommends outcome measures specific to health and movement in the aging adult. Practice Committee 18 months from January 2017
   b. Collaborate with the APTA registry work group biannually to assure outcome measures specific to health and movement in the aging adult are included in the registry. Practice Committee
   c. Develop at least one evidence based document (CPG, CGS, SR, etc.) biennially. Practice Committee

2. Disseminate evidence based documents.
   a. Make available all AGPT evidence based documents open access on the AGPT webpage within 3 months of the new website launch. Practice Committee, Communications Committee
   b. Within six months of the publication of evidence based documents, create and disseminate translational materials (e.g. infographics, pocket guides, fact sheets, etc.). Practice Committee, Communications Committee
   c. Within three months of the publication of evidence based documents, collaborate with APTA to include all AGPT evidence based documents in PTNow. Practice Committee

3. Promote advanced geriatric physical therapist practice.
   a. Develop a task force to identify priority areas for fellowship education development by the end of 2017. BOD
b. Provide resources to conduct at least one analysis of practice for at least one area of fellowship education by the end of 2018. Finance Committee, RFSIG

c. Promote the development of geriatric physical therapy residencies in geographically underrepresented areas by xxx. RFSIG, Communications Committee

Goal: AGPT will actively engage and inform internal and external stakeholders.
Goal Champion: Patty Brick and Lucy Jones

1. Enhance internal communication.
   a. Identify current communication vehicles for AGPT to share information and create a process to determine the best method for dissemination of information by 6/17. Communications Committee
   
   b. Establish a consistent and professional presence on social media by 12/17. Communications Committee
   
   c. Create a brief (less than 5 minute) tutorial on best use of the website within six months of new website launch. Communications Committee

2. Establish communication with strategic external stakeholders to advance AGPT’s mission and vision.
   a. Identify ten potential organizations with whom to collaborate by 6/17. President, SIGs
   
   b. Select three of the above organizations with whom to collaborate and initiate relationship by 12/17. BOD
   
   c. Identify the external sources and users of physical therapy information related to geriatric physical therapy by 12/17. BOD
   
   d. Evaluate and enhance the academy’s communication strategies with the identified external sources and users of physical therapy by 12/18. Communications Committee, PR

3. Facilitate member engagement in AGPT.
   a. Evaluate current committee/SIG structure and identify potential enhancements by 12/17. Task Force
   
   b. Implement committee/SIG reform recommendations by 12/18. BOD
   
   c. Develop a process to match an interested volunteer with available opportunities by 12/18. Membership Committee
   
   d. Charge nominating and membership committees to identify members who have potential to serve AGPT by 12/18. Membership Committee
Geriatrics

Brooks Rehabilitation Geriatric Residency
RF-PTCAS Participant: Program Profile
3599 University Blvd., South
Jacksonville, FL 32216
Contact: Jacqueline Osborne PT, DPT
Phone: 904/345-7061
Fax: 904/345-7193
Email: Jackie.Osborne@Brooksrehab.org

Cincinnati VA Medical Center & University of Cincinnati Geriatric Residency
RF-PTCAS Participant: Program Profile
Physical Therapy MDP 117
3200 Vine Street
Cincinnati, OH 45220
Contact: Alice Holder PT, DPT, MHS
Phone: 513/861-3100
Fax: 513/487-6624
Email: alice.holder@va.gov

Creighton University-Hillcrest Geriatric Residency
RF-PTCAS Participant: Program Profile
Department of Physical Therapy
2500 California Plaza
Omaha, NE 68178
Contact: Heather Knight PT, DPT
Phone: 402/280-4595
Fax: 402/280-5692
Email: HeatherKnight@creighton.edu

Durham Veteran's Administration Medical Center Geriatrics Residency
RF-PTCAS Participant: Program Profile
Durham Veteran's Administration Medical
508 Fulton Street
Durham, NC 27705
Contact: Phyllis Vandenberg PT, DPT
Phone: 919/286-0411
Fax: 919/416-5913
Email: phyllis.vandenberg@va.gov
Fox Rehabilitation Geriatric Residency
RF-PTCAS Participant: Program Profile
7 Carnegie Plaza
Cherry Hill, NJ 08003
Contact: William Dieter PT, DPT
Phone: 877/407-3422
Fax: 877/407-4329
Email: William.Dieter@foxrehab.org

Louis Stokes Cleveland VA Medical Center Geriatric Residency
RF-PTCAS Participant: Program Profile
PHYSICAL THERAPY DEPARTMENT--PM&RS
10701 East Boulevard
Cleveland, OH 44106
Contact: Linda Dundon PT, DPT
Phone: 216/791-3800
Fax: 216/707-7953
Email: linda.dundon@va.gov

Mayo School of Health Sciences Geriatric Residency
RF-PTCAS Participant: Program Profile
5777 E Mayo Boulevard
Phoenix, AZ 85054
Contact: Kathryn Brewer PT, DPT, MEd
Phone: 480/342-1896
Fax: 480/342-0123
Email: brewer.kathryn@mayo.edu

National HealthCare Corporation (NHC) Geriatric Residency
RF-PTCAS Participant: Program Profile
1927 Memorial Blvd
Murfreesboro, TN 37129
Contact: Sara Hoffman
Email: shoffman@nhcrehab.com

St. Catherine's Rehabilitation Hospital & Villa Maria Nursing Center Geriatric Residency
RF-PTCAS Participant: Program Profile
1050 NE 125th St.
North Miami, FL 33161
Contact: Gemma Longfellow PT, MSPT
Phone: 305/891-8850
Stanford Health Care Geriatric Residency
RF-PTCAS Participant: Program Profile
300 Pasteur Drive, MC 5284
Stanford, CA 94305
Contact: Meghan Miyamoto PT, DPT
Phone: 650/483-5801
Fax: 650/736-6437
Email: geriatricPTresidency@stanfordhealthcare.org

The Jewish Senior Services Geriatrics Residency
RF-PTCAS Participant: Program Profile
4200 Park Ave
Bridgeport, CT 06604
Contact: Sheila Watts PT, DPT, MS, MBA
Phone: 203/365-6443
Fax: 203/396-1046
Email: wattss12@sacredheart.edu

University of Delaware Geriatric Residency
RF-PTCAS Participant: Program Profile
540 S. College Ave
Suite 160
Newark, DE 19713
Contact: Grace Ademski PT, DPT, GCS, NCS
Phone: 302/831-8893
Fax: 302/831-4468
Email: gkeenan@udel.edu

University of Minnesota Geriatric Residency
RF-PTCAS Participant: Program Profile
420 Delaware Street SE, MMC 388
Minneapolis, MN 55455
Contact: Becky Olson-Kellogg PT, DPT
Phone: 612/624-6591
Fax: 612/625-4274
Email: olso0184@umn.edu