This consortium will serve as a resource and forum for educators both clinical and academic interested in best practice for teaching and assessing clinical reasoning skills. Additionally, the group will work to develop a research plan relative to clinical reasoning and will conduct multi-institutional research projects to increase our understanding of clinical reasoning.

APTA Combined Sections Conference _ 2019
Washington DC
Agenda

• Open Call for Nominations for Leadership positions
• Strategic Vision Planning
• Understanding the alphabet soup: ACAPT, APTA, Academy of Education and the ELP
• Future Membership Offerings: A discussion with the authors
Thank you!! KAREN HUHN, PT, PHD

• Thank you to Dr. Karen Huhn for her years of service to the CRCAC as Chair. Her efforts can be seen in throughout the successes of the Consortium with increased visibility of the importance of clinical reasoning in all aspects of physical therapist care.
Call for Candidates for the Executive Committee

Call for Candidates

The Clinical Reasoning Curricula and Assessment consortium will serve as a resource and forum for educators both clinical and academic interested in best practice for teaching and assessing clinical reasoning skills. Additionally, the group will work to develop a research plan relative to clinical reasoning and will conduct multi-institutional research projects to increase our understanding of clinical reasoning.

Leadership Teams Positions

The ACAPT Clinical Reasoning Curricula and Assessment Consortium (CRCAC) will hold elections in the spring/summer during the ACAPT election cycle. The nomination cycle is now open. If you are a member of the CRCAC, you are eligible for the following leadership positions. If you have not yet joined, please do so by registering on the home page for the CRCAC consortium.

The term of office will begin immediately following the CRCAC Annual Business meeting held during the APTA Educational Leadership Conference, Bellevue, Washington from October 19-20, 2019. Persons elected to a leadership position are expected to attend all meetings during national conferences and attend monthly teleconferences.

Leadership Positions and Description of Responsibilities open for nominations this election cycle:

Vice Chair: The Vice Chairperson shall assume the duties of the Chairperson at the request of the Chairperson or in the absence or incapacity of the Chairperson and oversee (SCRC) the committee or work group as a voting member. The Vice Chair shall serve as the Parliamentarian during the on-site meetings of national conferences.

Nominating Committee Member: The Nominating Committee shall consist of three (3) members. Each serving for three (3) year term. The senior member of the committee shall serve as Committee Chair for the last year of her term.

The nominating committee shall prepare a slate of one (1) or more names for each office to be filled. The slate (i.e. list of candidates) shall be published on the CRGAC website and distributed to the membership prior to the election. The Nominating Chair will provide the slate, together with the information on each candidate, at least 30 days in advance of the election. Members of the nominating committee will conduct elections by electronic mail. The nominating committee chair notifies the candidates of the results of the election maintains a record of their consent to serve for future considerations and needs that may support the work of the Consortium.

Online Voting

The Clinical Reasoning Curricula and Assessment consortium online voting for election of officers occurs in the Spring in concert with the ACAPT election cycle.
Strategic Planning 2017 - 2019

• OBJECTIVE: To develop best practice standards for clinical reasoning curricula and assessment
• STRATEGIC GOAL: Develop a teaching compendium
• Teaching Compendium Task Group with Wing Fu as Chair:

• Action Items:
  • Explore a mechanism for hosting a “living” document related to best practices in teaching clinical reasoning
  • Create a “living” document on best practices related to teaching clinical reasoning based on what we know from the literature

UPDATES from the Chair:
• The Teaching Compendium task force has been working on a systematic review to address the research question - What effects do educational interventions have on the development of physical therapy learners' clinical reasoning?
• We have started our preliminary search on 6 databases and are now customizing our search strategies to produce comprehensive yet manageable search results.
Strategic Planning 2017 - 2019

• OBJECTIVE: To provide continuing education relative to teaching and assessing of clinical reasoning

• Strategic Goal: Develop educational material to improve general understanding of CR
  • Assembled the Education Task Force with Karen Huhn as Chair
  • Coordinate Educational activities supported by the Consortia including web based, print and live courses
    • Develop “fact sheets” related to CR
  • Work with other SIG’s, Consortia and Sections to plan a Gordon-like conference

• Hosted 2 virtual journal clubs based upon published literature

• Assembled a working group and submitted for budget regarding Gordon-like conference
Strategic Planning 2017 - 2019

• OBJECTIVE: To develop best practice standards for clinical reasoning curricula and assessment

• Strategic Goal: Develop competencies across the educational continuum

• Competencies Task Force with Tracy Brudvig (current) and Kelly McCauley (past) as Co-Chairs

• Challenges

• Discussion
III. Core Competencies of a Physical Therapist Resident

1. **Clinical Reasoning:**
   Demonstrates the ability to organize, synthesize, integrate, and apply sound clinical rationale for patient management.

   **Behaviors:**
   - Efficiently and strategically gathers, interprets, and synthesizes essential, accurate, and disconfirming information from multiple resources in order to make more effective clinical judgments.
   - Evaluates evidence-based practice, physical therapist expertise, and patient’s perspective and value in management of patient’s needs across varied practice settings or diverse patient populations. Effectively reflects upon the application of evidence and modifies accordingly.
   - Integrates into patient care a comprehensive biopsychosocial model\(^2\) in clinical reasoning.
   - Presents a logical rationale for clinical decisions with patients, colleagues, and the interprofessional\(^3\) team, while incorporating patient’s needs and values, within the context of ethical clinical practice.
   - Responds to anticipated and unanticipated outcomes in both simple and complex clinical conditions across varied practice settings or diverse patient populations.
   - Analyzes data from specialty-specific outcome measures in a manner that supports accurate analysis of patient outcomes across varied practice settings or diverse patient populations.
   - Integrates self-reflection to enhance outcomes across varied practice settings or diverse patient populations.

2. **Knowledge for Specialty Practice:**
   Demonstrates the ability to organize, synthesize, integrate, and analyze practice specialty...
Strategic Planning Task Group

• Objective: To present to the CRCAC members draft objectives that are in alignment with the ACAPT Strategic Goals at ELC 2019

• Call for interested members for these conversations
Future Membership Offerings

• A discussion with the Authors:
  • Clinical reasoning in physical therapy: a concept analysis November 2018

• Quarterly Newsletter
  • Suggested Topics

• Postings to the Website
  • Fact sheets
  • Meeting minutes