**NCCE: Academic and Clinical Institutional Pair**

**Purpose and Background:**
The purpose of this document is to outline the academic-clinical institutional pair for the NCCE, describe the qualifications of the partners, present further clarification of the roles of the partners, and recommend a review process for the academic-clinical institutional pairing. In keeping with the objective to foster “academic-clinical partnerships that provide a collective voice in academic physical therapy in support of clinical education,” it is essential to ensure clinical voices are heard and that the agreed academic-clinical institutional pairing meets this objective.

**Definitions and Qualifications**
The NCCE Operation Procedures provide the following membership definitions in Article III, Section 1, 2, 3, and 4:

**Institutional Pair:** An “Institutional Pair” from each ACAPT member institution representing one academic partner and one clinical partner make up the membership of the NCCE. Both partners of the Institutional Pair must be members of the American Physical Therapy Association.

**Clinical Partner:** The clinical partner is one representative from the ACAPT institution who serves as Site Coordinator of Clinical Education (SCCE), Clinical Instructor (CI), and/or Clinical Administrator/Manager (CAM). The clinical partner should be directly involved with the academic institution’s clinical education program and able to speak about clinical education (CE) beyond their own organization and give a voice at the national level.

**Academic Member:** The academic partner is one representative from the ACAPT institution. The academic partner should be directly involved with the institution’s clinical education program.

**Roles and Responsibilities**
As outlined in Article III, Section 5, the “NCCE Institutional Pair members are invited to attend NCCE meetings and vote on NCCE motions and in NCCE elections.” Involvement of both members is essential and requires contribution of time. Routine communication between the academic and clinical member should be organized to take place at least every other month and at times where pressing issues arise, may be more frequent. Communication between the academic and clinical partner is ongoing and the time commitment is variable. At times when pressing conversations/issues arise, more time may be required, but rarely exceeds more than 2 hours per month.

Below are specific responsibilities of each member:

**The academic institution representative should:**
- select a clinical partner with broad knowledge of different practice settings.
- register its Institutional Pair and maintain the currency of this information.
- have a regular communication structure with the clinical partner.
- maintain awareness of national clinical education issues and initiatives through attendance at national meetings, participation in webinars/podcasts/other virtual meetings, etc.
- be actively involved in NCCE discussions, activities and/or leadership opportunities by participating in surveys or open forums, volunteering for committees or Task Forces, etc.
- be an active member in the APTE and CESIG and encourage/facilitate clinical partner membership and involvement in these organizations.
- attend the NCCE business meeting held at ELC (either in person or virtually).
- share national news in clinical education to the clinical partner.
- solicit input from the clinical partner regarding pressing clinical education issues.
- enhance the professional development of the clinical partner.
- inform clinical partner of opportunities for involvement and leadership in NCCE and other national organizations.
- advocate for funding for the clinical partner to attend a conference at least once per year.
The clinical partner should:

- maintain or develop a broad knowledge of multiple practice settings relevant to CE.
- advocate for employer support of national involvement to ensure clinical voice is present.
- maintain awareness of national clinical education issues and initiatives through attendance at national or state meetings, participation in webinars/podcasts/other virtual meetings, etc.
- be actively involved in NCCE discussions, activities and/or leadership opportunities by participating in surveys or open forums, volunteering for committees or Task Forces, etc.
- be an active member in the APTE and CESIG and encourage academic partner membership and involvement in these organizations.
- attend the NCCE business meeting held at ELC (either in person or virtually).
- participate in regular meetings with the academic partner to share news and issues affecting clinical education.
- provide feedback when solicited by the academic partner and/or national organizations (NCCE, ACAPT, APTA, etc).
- solicit feedback from other clinical voices to deepen the discussion with the academic partner.
- serve as a conduit for national information to the clinical environment related to but not limited to: task force work, survey distribution, etc.
- be directly involved with clinical education by:
  - routinely teaching students in the clinical environment or
  - promoting clinical education in other leadership roles by supporting student placements and development of CIs
- participate in advisory board activities when appropriate at the partner institution.

Recommendation for Review of Terms:

A review process of the institutional pairing is recommended. A collaborative review process of the institutional pairing is recommended in order to formally evaluate and assess the interests, responsibilities and needs of both the academic and clinical member. Instituting a review and term limit process would allow rotation, when necessary, of clinic sites and clinicians among academic institutions. Similar to term limits in leadership roles on the NCCE, this review and term limit process could open opportunities to those who are interested in serving. Increasing involvement in others can potentially broaden partnerships among institutions, enhance professional development of others, broaden the connection between national and clinical entities, and involve other academic faculty.

The NCCE academic-clinical pairing should complete a formalized review process during year 3 of the established partnership. This review process should take into consideration a variety of factors for both the academic and clinical member including but not limited to: current roles, stakeholder needs, time commitments, employment obligations, current partnerships, leadership roles, and national initiatives. The academic program, in collaboration with the clinical partner, may agree upon continuing the institutional pairing for a consecutive term or establishing a new NCCE institutional pair. The academic-clinical institutional pair serves as a conduit, seeking input from other clinical and academic entities, to ensure input provided is not just that of the institutional pair, but also the voices of others.

Process of Registering Your Institutional Pair

The academic member is responsible for registering the team by going to the following website and providing names, email addresses, and APTA membership number. It is the responsibility of the academic member to update this information as necessary.

https://www.acapt.org/about/our-leadership/consortium/national-consortium-of-clinical-educators

If changing an individual as part of your institutional pair email the NCCE secretary with the following information: individual’s name, affiliation name, APTA number, and email address.