University of Chicago Medicine

Pediatric Physical Therapy Residency Overview

Mission of Residency Program:

The mission of University of Chicago Medical Center Physical Therapy Pediatric Residency program is to provide a post graduate professional development opportunity for physical therapists to become a board certified pediatric clinical specialist through advanced education, research and professional interactions. Each interaction will emphasize the development of psychomotor skills, theoretical rationales and clinical reasoning to enhance the resident’s ability to evaluate and treat pediatric patients while taking into account diversity in their family units. The overall focus is to maintain, facilitate, restore, and improve movement to enable optimal performance, enhance health, well-being, and quality of life for all patients and clients we treat. The program will graduate a physical therapy clinical specialist who will be a resource for the University of Chicago Medical Center, the medical community, and the surrounding community.

Goals of the Pediatric Physical Therapy Residency Program at UChicago Medicine:

1. Prepare physical therapists who will:
   a. Practice with advanced clinical decision-making skills with emphasis on maintaining, restoring, facilitating and improving movement, activity, and function, thereby enabling optimal performance and enhancing health, well-being, and quality of life. Their services prevent, minimize, or eliminate impairments of body functions and structures, activity limitations, and participation restrictions.
   b. Utilize all the elements of PT patient client management model of examination, evaluation, diagnosis, prognosis, intervention and outcomes
   c. Use evidence based best practice to improve the outcomes for their patients and clients and their caregivers
   d. Provide superior, efficacious clinical care, manual therapy skills and age appropriate care.
   e. Be able to participate as part of multi-disciplinary team to optimize the management of impairments, activity limitations, and participation restrictions related to pediatric conditions.
f. Become a resource for the community in the rehabilitation of pediatric conditions.

g. Become ABPTS certified specialists within 2 years of graduation.

2. Enhance the skills, knowledge and incorporation of Evidenced Based Practice into the practice of physical therapists within the UChicago Medical Center.

3. Enhance the Physical Therapy profession by graduating residents who will contribute to the profession through mentoring of physical therapists and students, teaching at a postprofessional level, and contributing to evidence based practice in physical therapy.

Objectives:

1. Provide an advanced plan of study through a detailed and structured curriculum that is consistent with the Pediatric Description of Specialty Practice which will include didactic coursework, academic mentoring, specialty practice observation, journal review, research and clinical practice.

2. Provide a mentored clinical experience, with emphasis on medical conditions which affecting a pediatric population under the supervision of recognized experts to include: ABPTS-certified faculty, pediatricians, pediatric surgeons, pediatric neurologists, neonatologists, hematologists, oncologists, rheumatologists and radiologists.

3. The program faculty will update the program curriculum semi-annually to assure the content is consistent with current evidence.

4. Support the values of the American Physical Therapy Association (APTA) by creating practitioners who are committed to excellence in practice, education, research, advocacy, and professionalism.

5. The faculty will ensure that the residency program consistently exceeds all ABPTRFE credentialing requirements.

6. Faculty will provide residents with mentoring in the following areas:
   a. Clinical decision making and critical inquiry.
   b. Clinical excellence in all pediatric settings
   c. Professionalism, APTA core values, and leadership
   d. Scholarly and educational activities.

7. Faculty will prepare the residents to serve as:
   a. A resource in the health care community.
   b. Educators to colleagues and physical therapy students in the area of pediatric physical therapy.
c. Consumers of scientific literature and pursuers of research and lifelong learning.

d. Contributing and collaborating practitioners in the care of pediatric patients with impairments of the body functions and structure, activity limitations or participation restrictions. The focus will be conditions of the musculoskeletal, neurological, cardiopulmonary and integumentary systems or the negative affects attributable to personal environmental factors as they relate to human development and performance.

Curriculum:
Schedule for education curriculum
- 52 weeks/ residency year:
  - 4 weeks orientation
  - 2 weeks non education time at holidays
  - 46 weeks for didactic courses

Breakdown of teaching hours during the 46 education weeks:
Approximately: 14 hours education, 26 hours treating per week

- Mentoring: 4-5 hours a week (one on one with faculty) = 200 hours
- Clinical Investigations: 2.5 hours a week (functional measures, tracking of patient scores, research, journal clubs, case reviews) = 118 hours
- Course work Didactic learning: 3.0 hours a week (lectures and labs) = 138 hours
- Specialty Practice Observation: 4.34 hours a week (MD clinics) = 200 hours
- Clinical Practice:
  - 26 hours a week for the 46 weeks = 1196 hours
  - 40 hours a week for orientation (4 wks) and holiday weeks (2wks) = 240 hours
  - Total clinical practice hours = 1436 hours

Total hours for program: 2,092 scheduled

Outline of Pediatric Physical Therapy Education Courses:

- Cardiac: 2 weeks
- NICU: 6 weeks
- Ortho: 12 weeks
- Heme/Onc: 2 weeks
- Neuro: 12 weeks
- Burn/Wound: 1 week
- EI/School/Rehabilitation: 8 weeks
- Evidenced Based Practice: 2 weeks

Hours:
The majority of on-site residency activities occur Monday through Friday between the hours of 7AM and 6 PM. Residents are considered to be exempt employees who are salaried. Their work schedule will be flexible and allow for patient care, training, mentoring, and study time and preparation. Schedules are coordinated by the residency program coordinator and shall not exceed expectation of more than 50 hours/week of direct program participation. There will be additional personal study time required.
**Weekend Coverage:**
Physical Therapy Resident will be scheduled to work weekends on a rotating basis, approximately one weekend/4 weeks. This time will be tracked as patient care hours.

**Professional Liability Insurance:**
As an employee of UChicago Medicine, a resident is covered by the organization’s professional liability policy. This coverage extends only to those activities that are required by their participation in the program.

**Salary:**
As a resident in the program, your salary for the year of the residency program is set according to the cost of maintaining the program. Currently the salary is $54,000 (as of 2022 class).

Other than the $300 continuing education benefit from the institution (available after probationary period), there are no additional monies allocated for outside continuing education, tuition reimbursement, travel or parking fees to any observations/ outside facilities, living expenses, licensure fees, or professional dues. Supplemental work opportunities, covering inpatient weekends are available with additional pay for any resident whose residency expectations are being met. This opportunity is voluntary.
Paid Time Off (PTO) Guidelines

Physical Therapy Residents are full time employees of the University of Chicago Medical Center. They will be eligible to take 5 days of paid time off, with the approval of the residency program coordinator and the assistant director. 7 organizational holidays will also be paid; New Year’s Day, Martin Luther King Day, Memorial Day, 4th of July, Labor Day, Thanksgiving Day, and Christmas Day. Because of the extensive education and curriculum pieces of the residency positions it is very challenging to provide the residents with extended time (more than 1-2 consecutive work days) off throughout their program.

Paid Time off:
- Paid days off will be scheduled with the approval of the resident’s manager and the Pediatric Therapy Residency Program Coordinator. Unscheduled days off (such as sick, emergency, etc.) must also be approved by the residency program coordinator and will be deducted from the PTO bank.
- Any unpaid time (beyond the 5 days) will be granted only for an approved emergency leave, by the Therapy Services Director.
- New employees of the Therapy Services Department are encouraged not to take paid days off during their first 6 months of employment. This is considered probationary time.
- All paid time off must be taken within the time frame of the residency program commitment.
- Time off from the residency may be allowed if:
  - Staffing allows adequate patient care coverage
  - Time is requested a minimum of 4 weeks ahead of scheduled day off
  - The resident may need to work additional hours before and after a scheduled day off to assure that all educational pieces and patient care obligations are achieved.

Sick Days:
- All employees are asked to not put patients and co-workers at risk by attending work if they are ill.
- If a resident is sick, they need to call the department 773-702-6891 and leave a voicemail message on the main number prior to 7AM of their scheduled day of work. If possible therapists are also asked to provide information to assist rescheduling their patients.
- If sick time taken exceeds amount of PTO days (5) or if a pattern is noticed, time off will be discussed with the resident. A doctors’ note may be required any time abuse of sick time is suspected.
To successfully complete the residency, the resident needs to complete the following:

Attendance:

General

Residents are required to attend all components of the training program for which they are enrolled. Individuals should notify the Residency Program Coordinator immediately when the individual’s attendance for an activity will be interrupted.

Lecture/Lab Class

Residents are expected to attend all classes. An individual can miss up to three classes with an excused absence. Individuals are required and responsible to make-up any missed work. If an individual misses more than three classes or has one unexcused absence they will be required to perform additional independent study work to demonstrate competency within the area that was missed. If an individual misses more than three classes, they will be placed on academic probation with a remediation program developed. If an individual misses five or more classes, they may be dismissed from the residency program.

Excused absence is defined as one that is related to illness, death, birth, accidents, and extraordinary circumstances. An unexcused absence is defined as anything other than an excused absence.

Exams

Individuals are required to attend all scheduled exams. Failure to do so will result in a grade of zero for that specific exam. Individuals may be able to demonstrate an extenuating circumstance, in which case, they will be offered an opportunity to sit for a retake exam. The exam may be the same as the exam taken by the other residents or it may follow a different format. That decision will be made by the Residency Program Coordinator and provided to the individual a minimum of three days prior to the date of the scheduled retake.

Other Activities

Individuals are expected to attend all scheduled activities including, but not limited to, clinical practice, didactic sessions, clinical investigations, case study and journal club presentations, 90% of specialty observation experiences, etc. Failure to attend these learning experiences may result in dismissal from the residency program.

Makeup Work

Work missed due to any type of absence will be the responsibility of the resident to complete and must be completed within 14 days of the absence unless other arrangements are made with the Residency Program Coordinator.
Lateness

Individuals are expected to be on time for all activities related to the training program. Lateness on three occasions, in the absence of an acceptable reason, will be treated in the same manner as an unexcused absence.

Examinations

Written and practical exams will be an integral component of the training for residents to demonstrate accountability for the requirements of the program. Therefore, there will be continuous assessment of the resident’s abilities throughout the course of the 1-year training. The grading of the program will be composed of the following elements:

*Final Comprehensive Written Exam*

One comprehensive written exam will be administered at the end of the program (weighting for this relative to the final grade may vary per program). Individuals must achieve a grade of 80% or higher on this exam in order to complete the program. If a grade of less than 80% is achieved then the individual will be offered an opportunity to sit for a second exam. If the grade achieved on the second exam is less than 80% they will be placed on probation and a formal remediation plan will be established. Individuals will not be eligible to complete the program with a score of less than 80% on this exam. Individuals will be offered a maximum of three opportunities to pass the final written exam. If it is not passed by the third time the individual will be dismissed from the program.

*Patient Practical Exams*

Each resident will perform at least two practical exams either involving patients, or patient models at the discretion of each program’s Coordinator (weighting for this relative to the final grade may vary per program). Individuals must achieve a grade of 85% or higher for each practical exam in order to complete the program. If a grade of less than 85% is achieved, then the individual will be offered an opportunity to perform a second practical exam. If the grade achieved on the second exam is less than 85% they will be placed on probation and a formal remediation plan will be established. Individuals will not be eligible to complete the program with a score of less than 85%. Individuals will be offered a maximum of three opportunities to pass each of the practical exams. If each of the exams is not passed by the third time the individual will be dismissed from the program.

Patient practicals will follow the following format: The resident will be evaluated by the clinical mentor across a predetermined set of criteria during a live new patient examination and/or a follow-up visit of an established encounter of one of the clinician’s current patients within the clinical practice setting.
**Additional requirements:**

- Achieve all 3’s or higher for Performance Appraisal at 6 and 12-month review
- Present Case Study to the Therapy Services Department by the end of the residency
- Mentor 2 PT students for ½ day field trips
- Volunteer 10 hours in the community during the residency year
- Participate in peer review sessions and pass with a score of 90% or higher on Therapy Services Peer Review (minimum of 1)
- 2 professional presentations within or outside of UCM
- Completion of all documentation including tracking and grading forms:
  - Tracking of hours
  - Tracking of patients
  - Feedback forms for all faculty, lecturers, and modules
How to Apply

Eligibility:
Physical Therapists licensed or eligible for licensure, in the state of Illinois, are encouraged to apply. Only physical therapists licensed in the state of Illinois will be hired.

How to Apply:
We are a part of the centralized application process with the APTA RFPTCAS. Please complete the application on the following website:
http://www.abpptrfe.org/RFPTCAS/ApplicantWebsite/

The application must include a letter of intent, curriculum vitae, 2 letters of recommendation, and an online UChicago Medicine application.

- The letter of intent must include the following: 1) goals/objectives for the residency program, 2) a summary of prior clinical and educational experience and 3) short and long term goals for an orthopedic subspecialty.
- Please include a current curriculum vitae or resume.
- The 2 letters of recommendation must include two of the following:
  1) Current or former supervisor, (if a recent graduate; from a current or former clinical instructor)
  2) Instructor/faculty member from an accredited physical therapy program
  3) A physician with whom the physical therapist has worked in the past year (not required, an option).

Interviews:
Top candidates will be interviewed initially via phone by February, second interviews will be completed in March of the application year. All interviews will include behavioral, clinical questions, and patient scenarios. Please be prepared to discuss research ideas and to demonstrate patient interactions and treatment plans.

The completed application should be forwarded no later than first week of January of the corresponding year. Please contact the program director for any other questions/concerns.

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Frequently Asked Questions:

1. **As a full time employee at the hospital, how is the resident compensated? Is there a separate resident rate during residency hours? Or is the resident on a "normal" salary with additional years of commitment after the residency ends? Is there tuition involved or is it waived by being a full time employee?**

   The residency position is a full time salaried position. The level of compensation is less than a full time treating therapist and the difference in pay is what it costs UCMC to educate the resident. There are not additional years of commitment from the resident or the organization upon completion of the program.

2. **How many people are usually accepted into the program each year?**

   1 pediatric resident

3. **Are the 3 hours of didactic coursework each week in a classroom format? If so, is that during the working week or on the weekend?**

   This is generally presented during the work week, occasionally on a weekend if faculty schedule requires.

4. **How well prepared did the previous residents feel about taking the PCS?**

   We currently have a 100% pass rate for residents who have taken the PCS examination.

5. **Do residents work weekends?**

   Yes, residents work weekends which is usually one weekend a month. Comp days are given for the weekend time and residents are encouraged to take their comp time within the month to avoid burn out.

6. **Does the University of Chicago affiliate with a Physical Therapy School and require teaching in the University setting?**

   The University of Chicago does not have a PT program which it is affiliated with for teaching. We do have a medical school at the University of Chicago and the physical therapy residents can be involved in teaching Medical residents from the primary care and pediatric departments as well as nurses and other health professionals.
Pediatric Physical Therapy Residency Program Outcomes

• 12 graduates since January 2011
• 100% of graduates have taken PCS
• 100% pass rate for PCS examination (12/12)

Graduate Outcomes:

• 1 past graduate is currently teaching in UCM’s Pediatric PT Residency Program
• 1 past graduate recently working towards becoming faculty for pediatric PT residency
• 1 past graduate working towards developing a pediatric residency
• 2 past graduates of the residency program have been retained and currently working as staff PT’s in UCM’s Therapy services department
• All past graduates are working in a pediatric setting
• Program is accredited through June of 2026