

The CPT Recruiter

Why is CPT different?

*Our mission:
CPT will be the leader in rehabilitation services by focusing on learning, teaching, research, outcome studies and patient focused care involving employees at all levels. We will foster a professional, ethical and legal environment for the practice of physical, occupational, speech and respiratory therapies, while promoting these professions as an essential component of health care.*



By Bob Tripicchio, MS, PT
President
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& Associates

On June 17-18, 2005, the committee on Health Professions Education Summit was convened to discuss and develop strategies for restructuring clinical education across the full continuum of education. The committee was multidisciplinary in its make up, involving allied health, nursing, medical, and pharmacological educators and students. Representatives from Industry associations and regulatory bodies and policy makers were also invited to attend. Participants were asked to develop proposed strategies and actions in order to address five competency areas: patient-centered care, interdisciplinary teams, evidence-based practice, quality improvement, and informatics.

So why is this important? Because the management team of Community Physical Therapy

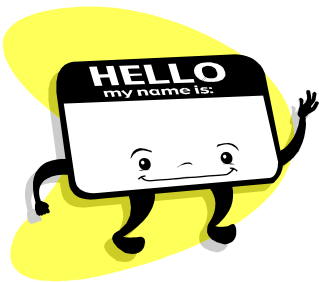
uses these types of recommendations in order to conduct ourselves on a day to day basis as well as for a guide to future planning. What follows is a brief explanation of the five competencies and the resulting company initiatives for 2005.



What are the six CPT corporate initiatives for 2005?

1. **PROVIDE PATIENT-CENTERED CARE**
Identify, respect and care about patients' differences, values, preferences and expressed needs; relieve pain and suffering; coordinate continuous care; listen to, clearly inform, communicate with and educate patients; share decision making and care management; and continuously advocate disease prevention, wellness, and promotion of healthy lifestyles, including a focus on population health.
2. **WORK IN INTERDISCIPLINARY TEAMS**
Cooperate, collaborate, communicate and integrate care into teams to ensure that care is continuous and reliable.
3. **EMPLOY EVIDENCE-BASED PRACTICE**
Integrate the best research and clinical expertise and patient values for optimum care; participate in learn-
4. **APPLY QUALITY IMPROVEMENT**
Identify errors and hazards in care; understand and implement basic safety design principles, such as standardization and simplification; continually understand and measure quality of care in terms of structure, process and outcomes in relation to patient and community needs; and design and test interventions to change processes and systems of care, with the objective of improving quality.
5. **UTILIZE INFORMATIONICS**-----communicate, manage knowledge, mitigate error, and support decision making using

ing and research activities to the extent feasible.



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Interviewing 101



There are many ways an interview can go well, and, unfortunately many ways it can go wrong. Here are some pointers to make the process go smoothly, no matter where you interview.

Preparing for the interview

Make sure you know the exact place and time of the interview, as well as the interviewer's full name and title and the correct pronunciation. Learn some pertinent facts about the company you are seeking employment with; talk to others, go to their website or ask for information prior to your interview. Make sure that you dress the part - dress professionally and pick an outfit that gives you confidence. If you feel good about yourself, others will respond accordingly.

Interviewing "Do's"

Be on time. NEVER arrive late for an interview. Plan ahead to make sure you arrive early enough to enter the building 10-15 minutes before the interview is scheduled. If for some reason you will be late, call and let the interviewer know.

Be prepared. Bring along extra copies of your resume, a copy of your references and credentials, and paper and pen to take notes. It also helps to have a couple of questions ready to ask at the end of the interview.

Show enthusiasm. A nice firm handshake and lots of eye contact make a very good first impression.

Speak distinctly with a confident voice, even though you may feel shaky.

Be prepared to answer questions. Employers often ask questions such as, "Tell me about yourself?" "What are your strengths, weaknesses?" "How do you stay professionally current?" "What are you looking for in this position?" "What are your career goals?" Make sure you have answers ready for these types of questions, and never answer a question with a simple "yes" or "no." Explain your answer whenever possible.

Answer the questions asked. Many candidates often don't think about whether or not they are actually answering the questions asked by their interviewers. Make sure you understand what is being asked, and get further clarification if you are unsure.

Sell yourself. You are your own best advocate! Make sure that your good points come across to the interviewer in a factual, sincere manner. Stress your achievements and give specific examples. Be careful not to go overboard, though. Too much boasting may tell your interviewer that you have the tendency to be overbearing or egotistical.

Listen. This is one of the most neglected interviewing skills, yet it is essential for a good therapist. Since most positions require good communication with superiors, co-workers and patients, listening intently can be a tip to your interviewer that you are a team player and are willing to listen to others' ideas.

Ask Questions. Well thought-out

questions indicate your interest in the company and position. Some examples are, "What would I be expected to accomplish in this position?" "What are the greatest challenges to this position?" "What are the requirements of the position?" "What resources are available to assist me in this position?"

Closing the interview

If you are interested in the position, let the interviewer know. A great way to close an interview would be to say something like, "I'm very impressed with what I've seen here today; your company and the people I've met. I am confident I could do an excellent job in the position you've described to me."

Don't be too discouraged if no immediate commitment is made. The interviewer may need to consult other people in the company before agreeing to hire you, or there may be many more applicants that he or she may need to meet with before making a decision.

If you get the impression that the interview is not going well, don't let your discouragement show. This shows your professionalism, and once in a while an interviewer may seem to discourage you just to test your reaction.



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Interviewing 101

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Make sure to thank the interviewer for his or her time and consideration, then follow up via email or regular mail in a few days. This is one more chance to remind the interviewer of all the valuable traits you bring to the job and company. You don't want to miss this last chance to market yourself, and if you are one in many applicants, this can help to refresh the memory of who you are to the interviewer.



We hope that no matter where you choose to work, you are able to incor-

porate some of these suggestions into the interview process to help you get the job you want. Remember to be prepared!

Our Company Initiatives

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information technology.

So how is CPT incorporating these competencies into practice? We have committed resources and time to the following initiatives in 2005:

1. **EVIDENCED-BASED INTERVENTIONS: THE CONNECTION BETWEEN FUNCTION AND IMPAIRMENT.** This training in functional assessments for the geriatric patient consists of two all day seminars, free to full time employees, featuring Dale Avers, PT, PhD. The first seminar was held on Feb 12th; the follow-up is scheduled for August, 2005.
2. **HYPOTHESIS ORIENTED ALGORITHM for CLINICIANS** as published by Jules Rothstein PT PhD. An all day seminar, featuring experts in this area, is in the planning stages for September of this year.
3. **PATIENT-CENTERED COMMUNICATIONS: THE OZER, PAYTON, NELSON MODEL.** A model to improve patient satisfaction and outcomes via involving

patients to the maximum extent possible during the evaluation and treatment planning process. This company wide initiative has been initiated with approximately 100 therapists completing the initial phases of training. CE's are available for all of the above

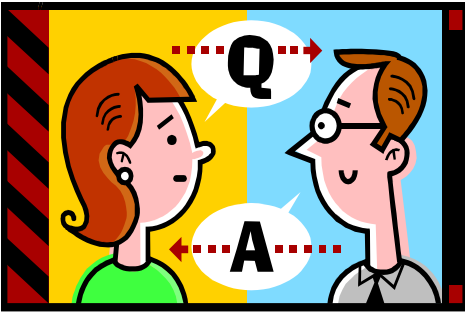
4. **POINT OF SERVICE DEVICES** (tablet size computers) for referral management and paperless documentation. The beta test phase with a small group of therapists is currently underway. Company wide roll-out is anticipated this summer.
5. **TEAM FUNCTION MODEL FOR PATIENT-CENTERED INTER-DISCIPLINARY CARE** Initiated in December with skilled nursing facility supervisors and soon to involve home care therapists. The purpose is to identify the best method or process to collaborate with the patient and other members of the health care team in order to achieve consensus and synergies of goal identification, treatment planning and discharge planning.

6. DEMENTIA CARE PROGRAM

This a follow up of the 2 day dementia course sponsored by CPT last year. It also includes therapists who have completed training certification in the last year.

I hope that you would be as excited as I am to take part in these initiatives. In addition to making you a more valued asset in the field, programs such as these help to define CPT as the leader in rehabilitation services.





We would love to talk to you! To find out what we can do for you, please contact us at:

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Who is CPT?

Community Physical Therapy & Associates is a therapist owned practice, founded in 1986 by Bob Tripicchio, PT, MS. CPT was devoted exclusively to the delivery of home care services until 1996 when we expanded to include an on-site, Medicare certified out patient clinic and a skilled nursing facility division. CPT has remained a practice which creates value for patients, payers and employees by creating new approaches to healthcare delivery which are based upon current knowledge and past experience. Currently, we employ a staff of over 350 therapists and 20 office support personnel to over 30 different home care agencies and 20 different SNF's.