



*state of Louisiana*

*Department of Health and Hospitals  
Louisiana Physical Therapy Board  
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## AGENDA

### **January 26, 2011**

- 1:00 Call Meeting to order
- 2:00 Rules Public Hearing

### **January 27, 2011**

- 7:30 Breakfast at 5 Fifty 5
- 8:30 Minutes of December 2010 meeting
  - Reports
  - Chairman's Report
  - Treasurer's Report
    - Nov 2010 financial report - actual vs budget
    - Dec 2010 financial report - actual vs. budget
  - Securities
  - Executive Director's Report
    - DSCS Performance Planning and review
    - PT Shortage
- 9:30 Monitoring Disciplined Therapists Report
- 10:00 review comments received during Rules Public Hearing
- 12:00 Lunch
- 1:00 Unfinished Business
  - Task Tracker
    - Use of Electrocautery in Physical Therapy
  - Correspondence
    - OASIS - Reconciling Medication
    - PT with APE teacher in school system
    - Questions about article 139
    - Wellness questions P Page
    - Course denial appeal
    - advice on proper communication when handing off patients
    - Practice issue question McCulloch
    - NPTE comments
    - RE PTA supervision.msg
    - PTA supervision E Leblanc
- 2:00 New Business
  - Election of Officers
- 2:15 Legal
- 2:30 Board monthly call discussion
- 2:45 Investigation Summary Reports (one-on-one meetings)
- 3:30 Adjournment

Proceedings for the Louisiana Physical Therapy Board, taken in regular session on Wednesday, January 26, 2011, at the Marriott Hotel, 555 Canal Street, New Orleans, LA in the Mardi Gras Ballroom D. Dan Wood, Chairman called the meeting to order at 2:00 p.m. A quorum of members was present. Board members present were: Dan Wood, Jerry Jones, Jr., Teresa Maize, Donna "Dee" Cochran, Al Moreau, III, and Danny Landry. Cheryl Gaudin, Executive Director, Glenn Ducote, General Counsel, and George Papale, attorney were present. Advisory Committee Members present were Allison Roux, Tina Gualdo, Dionne Francois, Peggy Wilson and B. Craig Lowery.

The Rules Public Hearing began at 2:05 p.m. Cheryl Gaudin acted as moderator for the Hearing. Attendees who signed in prior to the public hearing were: Jerry Allgood, Mike Conlin, Allison Daly, Chris Davis, Scott Delahoussaye, Sharon Dunn, Jane Eason, Amelia Embley, Lisa K. George, Gus Gutierrez, Judith Halverson, David Hendricks, Paul Hildreth, Erica Kinler, Ricky Lane, Oday Lavergne, Greg LeBlanc, Amelia Leonardi, Kimberly Mathis, Lisanne Meiners, Tyra Mitchell, Lyn Savoie, Lisa Schuler, Joe Shine Julie L. Thomas, and Susan Welsh.

Written comments were received from Leslie Adrian, PT Director of Professional Standards FSBPT; Debbie Banks, PT; Andrea Billen, Sr. VP of Operations for Synergy Care, Inc.; Laura Bryant, PT; Jill Bugner, PT; Tina Gualdo, PT; Paul Hildreth, PT; Derrick Hines, student at LSUHSC New Orleans; Oday Lavergne, PT; Greg LeBlanc, PT; Marcy Linxwiler, PT; Phil Page, PT; and David Sale, Executive Director of the Council of Colleges of Acupuncture and Oriental Medicine.

The meeting was recessed at 6:00 pm.

The board meeting reconvened on January 27, 2011 at the Marriott Hotel located at 555 Canal Street, New Orleans, LA in the Bacchus Conference Room at 8:30 a.m. A quorum of members was present. Board members present were: Dan Wood, Jerry Jones, Jr., Teresa Maize, Donna "Dee" Cochran, Al Moreau, III, and Danny Landry. Cheryl Gaudin, Executive Director, Glenn Ducote, General Counsel, and George Papale, attorney were present. Advisory Committee Members present were Allison Roux, Tina Gualdo, Dionne Francois, Peggy Wilson and Craig Lowery.

#### ***ADOPTION OF MINUTES OF PREVIOUS MEETING***

Minutes of the December 2010 board meeting were accepted as written.

#### ***CHAIRMAN'S REPORT***

#### ***TREASURER'S REPORT***

Cash on hand for the month of November 2010 was \$942,802.46. Receipts for November 2010 totaled \$84,824.94 and expenses totaled \$27,202.55.

Cash on hand for the month of December 2010 was \$1,166,921.89. Receipts for December 2010 totaled \$258,546.06 and expenses totaled \$36,394.87.

Discussion was held to determine if the board wanted to invest funds from the checking account into a new security or to leave the funds in the account for a possibly purchase of the property and building the board is currently renting for office space. The board decided to leave the funds in the account until negotiations with the owner of the property/building Patrick Trappey have occurred.

Motion was made by Teresa Maize, seconded by Danny Landry, "To increase the meal allowances to \$15 for breakfast, \$25 for lunch, and \$40 for dinner to accommodate the high

cost market of New Orleans.” All in favor were Teresa Maize, Danny Landry, Donna “Dee” Cochran, Jerry Jones, Jr., Dan Wood, and Al Moreau, III. No one opposed the motion. Motion was made by Al Moreau, III, seconded by Danny Landry, to accept the Treasurers Report.

### **EXECUTIVE DIRECTOR REPORT**

The La Department of State Civil Service began a Performance Planning and Review for all agencies to determine compliance with Annual Reporting. The statewide un-rated rate was 2.48% for the past year. The La Physical Therapy Board’s un-rated rate was less than .01%. The board was commended for making performance management a priority which contributes to an agency’s effectiveness and helps it successfully meet its operational goals and objectives.

Staff suggested using Survey Monkey to survey all licensees for input to be included in the statutorily required Annual Report to the Governor regarding the condition of the practice of physical therapy in the state. The report must also include recommendations for improvement of the practice of physical therapy. The board decided to establish the survey and forward an email notice to all licensees requesting participation with the survey. Questions will be reviewed by the board at its February meeting.

### **PROPOSED RULES AND REGULATIONS/LEGISLATION**

Comments from the Rules Public Hearing were reviewed and suggested language changes/edits were discussed. Teresa Maize will draft language for continuing education based on comments from the Rules Public Hearing. The board will review the proposed rules with suggested edits on a conference call prior to the February board meeting to determine if additional edits are necessary. All edits or changes in language will be reviewed at the February board meeting for board decision and motion of acceptance.

### **NEW BUSINESS**

As required by statute, an election of officers took place at this meeting. Jerry Jones, Jr. was elected Chairman and Teresa Maize was elected Secretary-Treasurer.

The Board discussed sponsoring an Ethics course free of charge for licensees to be used for continuing education credit toward renewal of license. Further discussion for decision will be held at the February board meeting.

During discussion and planning for a traveling jurisprudence course offering after adoption of the current proposed rules, it was noted that the jurisprudence course is not well attended. The jurisprudence offers licensees the opportunity to obtain free continuing education credit while educating its licensees about sections of the rules that are often questioned. The board discussed the possibility of producing more than two newsletters per year. The purpose of producing additional newsletters will be to address one issue in depth per newsletter in hopes of reaching more licensees. Copies of these newsletters could then be posted on the board’s website for future access by the public and licensees.

### **CORRESPONDENCE**

Heidi Goldman, LOTR Home Health Therapy Supervisor at Touro Infirmary, requested clarification and scope of practice for a physical therapist in the use of the OASIS form for Home Health. OASIS question M2000 states “Drug regimen review: does a complete drug regimen review indicate potential critically significant medication issues, e.g. drug reactions, ineffective drug therapy, side effects, drug interactions, duplicate therapy, omissions, dosage error, or non compliance?” The practice of their agency is the PT collects the medication list and reviews it to the best of her ability; then a RN supervisor reviews the meds and signs off on them. Declaratory Statement 04.10.03 posted on the board’s website was reviewed by a staff PT at Touro causing the PT to question physical therapy scope of practice in this area. Ms. Goldman asked if a PT answers question M2000 on the OASIS as “1- no problems found during review will this be a problem.” Staff will request a

copy of the OASIS form from Ms Goldman. Upon receipt of the form, Jerry Jones, Jr. will draft a response to Ms Goldman.

Tonya Tabor, PT working in the school system, indicated she provides consultative services with a medical referral from a physician. Ms. Tabor consults with the adaptive physical education teacher (APE teacher) on the special needs children's program who qualifies for these services. Tabor is inquiring if she is liable for the APE teachers when they are performing stretching, ROM and developmental skills. Dan Wood will draft a response to Tabor indicating she is not liable for care provided by the APE teacher.

Amelia Embley, PT Outpatient Rehab Supervisor posed two scenarios for board clarification; 1) In the scenario that a PTA who only works weekends sees a patient and the evaluating/supervising PT is not working that day, does the face to face visit occur: a) with the lead therapist or therapist in charge on that particular weekend day (PT) who has never treated the patient before, b) No face to face visit should occur, c) try to meet with any PT that has ever seen the patient before but if no one who has seen the patient is working no face to face is conducted, and d) the PTA should not perform the treatment.

2) Do the face to face meetings have to occur on the same day as the treatment was conducted? Example) I am off and my board is covered by a PTA. We cannot meet the day of the treatments but meet the next day regarding the care from the day before and document on that day. Teresa Maize will draft a response to Ms Embley.

Phil Page PhD, PT, ATC, CSCS, FACSM posed two questions regarding wellness services for response from the board: 1. Can a PT provide a fitness program for management of chronic diseases such as diabetes under the 'wellness' provision, or other conditions such as osteoporosis that may have musculoskeletal impairments? Can 'wellness' services that are cash-based be performed with a physician referral that specifies "fitness" or "wellness" programs?

2. Cold, low-power lasers are now "over the counter" and rented for home use. Some physical therapy clinics are promoting 'weight loss' using cold lasers under the wellness umbrella. Page requested the position of the board regarding the use of low power laser for wellness services? Al Moreau, III will draft a response to Mr. Page.

Kim Lewis, PT Director of the Department of Outcomes and Program Development- a division of the Education Department for Therapy Management Corporation requested further information for the decisions rendered regarding Continuing Education Courses submitted for approval that appear as denied on the website. The courses are: 1. Cardiopulmonary, 2. Contracture Management for the Elderly Population, and 3. Incontinence Management. Ms. Lewis indicated previous continuing education course denial letters included a reason for denial. According to Ms. Lewis, denial letters received regarding the above listed courses did not contain the reason for denial. Ms Lewis indicated she is confident that all these course surpass the standards set forth for clinical crediting for continuing education units based on content- all are relevant and include a diverse level of information on physiology, pathologies related, implications of conditions as well as in depth assessment and treatment parameters. These courses also include clinician education for proper coding and documentation. Ms Lewis requested the board again review these courses for approval and attached each of the full course power points for reference to clear up any misunderstanding related to lack of therapeutic focus in course naming. Staff will forward the email to Teresa Maize and Donna "Dee" Cochran for review and response.

Jason Ledet, Program Director at the Rehabilitation Center of Thibodaux Regional forwarded additional questions regarding the Clarification of Act 139 PTA supervision and Declaratory Statement 2010.08.19. Two scenarios were posed:

1. We have a PT and PTA primary working together in the IP rehab facility. We have 1 PT stationed on acute care. When acute care's census increases, the PTA may flex to acute care to assist the PT with the caseload. What type of communication is required to be in compliance with the new ruling? Can the acute PT have a verbal/and or written discussion on which patients the PT wants the PTA to treat?

2. Same situation as above, but now the weekend is approaching. Our IP rehab PT and acute care PT leave notes on each patient to the weekend PT and PTA to hand off the patient to continue their treatment on Saturday and Sunday. These therapists are not familiar with the patients, but have the notes available to assist with their treatment plan. Is this enough communication to meet the standard? The report states "the PT shall communicate to the PT or PTA assuming treatment information on the patients essential for administering the plan of care."

Mr. Ledet indicated he wants to be efficient with patient care, however, at the same time compliant with the appropriate communication. Teresa Maize will draft a response to Mr. Ledet.

Joseph McCulloch, PhD Dean of the School of Allied Health Professions at LSU HSC posed a question to the Board for clarification. A treatment that has been used for many years, and has FDA approval, is the application of Platelet Rich Plasma (PRP) to wounds in order to stimulate healing. This is a patented process where a patient's blood is drawn, spun down and the plasma used to treat the wound bed to stimulate growth factor expression in chronic wounds. There has been an increased interest in this treatment in our area and physicians are requesting we use it on some of their patients. The problem comes in when we don't always have a phlebotomist available to draw the blood. Phlebotomists over in the hospital are individuals hired off the street with no training. They go through in house training by Medical Technologists to learn how to draw blood. The question is, if we go through such training by our Clinical Laboratory Science program and receive certification as phlebotomists can, we then draw the patient's blood when ordered by the physician for this procedure? I guess this really isn't a PT practice act issue, but just didn't want anything to crop up should a question arise. Donna "Dee" Cochran will draft a response to Dr. McCulloch.

The FSBPT Administrative Team forwarded a CBT Comment Summary and a Candidate Satisfaction Survey for candidates who sat for the NPTE in Louisiana during the fourth quarter of 2010. The comments summary included all comments for licensure candidates who tested during those months. The Satisfaction with application processing by State indicated a satisfaction rate in Q3 was 88.42%, but dropped in Q4 to 82.98%. The report indicated low candidate volumes may have a large impact on changes in ratings from one quarter to the next.

Errol LeBlanc, PT Rehab Director at Opelousas General Health System Rehabilitation Unit expressed questions regarding supervision of a PTA for weekend therapists. Scenario: A weekend PT who comes in only for contract work and sees weekend patients. An evaluation is performed as well as regular treatments. Patients seen by the weekend contract therapist are then seen again by one of the regular staff PTs prior to a PTA seeing that patient for treatment. Does the initial therapist who performed the evaluation need to have a face to face with the PTA, or can a staff therapist, who is on premises at all times see this patient prior to PTA treatment and then perform the face to face? Does the documentation of the face to face need to be part of the patient's chart?

Second scenario forwarded by Kelly Morel, PT: After the contract PT completes the evaluation and treatments on the weekend, what if the next treatment is completed by the PTA, without the regular staff PT treating that patient first? Teresa Maize will draft a response to Mr. Leblanc and Ms Morel.

## **UNFINISHED BUSINESS**

In the initial phase of designing the board's website, staff requested an option for licensees to have secure access to document completion of continuing education courses. This access could also be utilized by the licensee to download the history of their continuing education when updating a CV. Staff will continue to work with website programmers to develop this secure access for licensees.

## **TASK TRACKER**

Glenn Ducote responded to Janet L. Crawford, PT, DPT, indicating the setting in which a PT who has earned a DPT, may properly use the title of Doctor. A recent Declaratory Statement was included for Ms. Crawford to review.

Glenn Ducote responded to Gail Pearce, PT to address questions regarding a PT being a paid "wellness consultant".

Danny Landry drafted a response to Heather addressing her question regarding a PTA providing "Educational Consultations". Staff forwarded the response on board letterhead.

## **MONITORING DISCIPLINED THERAPISTS**

Schedule Lani Griffin for February meeting.

Glenn Ducote reported DHH findings after investigation of home health services provided by Dwayne Hogan. DHH's reported indicated no problems noted.

Amy Stewart forwarded documentation that she is working in Arkansas part time. Her new employer forwarded documentation indicating he is aware of Stewart's consent order with the board. Ms. Stewart's probation will be adjusted as per her consent with the board.

Teresa Maize will schedule a monitor visit with Catherine Nelson.

Robyn Alleman reported an injection received from her physician as required by her consent with the board.

Sarah Saenger-Ormand reported she will be on maternity leave for 12 weeks beginning December 13, 2010 and anticipates returning to work on March 7, 2011. This report is required under the terms of her consent agreement with the board.

Dionne Francois will schedule a monitor visit during the spring with Adam Lafleur. Probation for Lafleur terminates on June 2011. The board instructed staff to schedule Adam Lafleur to meet with the board in June.

Tina Gualdo will schedule a monitor visit with Michael Johnston.

Dion Lirette entered into a consent agreement with the board. Lirette will continue to work for the same employer who forwarded documentation indicating receipt and acknowledgment of Lirette's consent with the board. The employer is in the process of refunding charges for patient treatment provided when Lirette did not have an active, valid license.

## **OTHER BUSINESS**

### **BOARD MEMBER MONTHLY CALLS**

### **LEGAL**

The meeting was adjourned at 5:30 p.m.

Submitted by  
Cheryl Gaudin