

**Louisiana Physical Therapy Board  
Minutes**

Wednesday October 28, 2015

FINAL

Proceedings for the Louisiana Physical Therapy Board, taken in regular session on Wednesday October 28, 2015 at 104 Fairlane Drive, Lafayette, LA 70507. A quorum of members were present. Board members present were: Chairman Al Moreau, III, Secretary/Treasurer Danny P. Landry, Don Cassano, Kristina Lounsberry, Elizabeth “Beth” Austin, and Patrick Cook. Advisory committee members present were Chris Franks, Jon Jeremy Dye, and Wayne Campbell. Charlotte Martin, Executive Director; Amanda Lafleur, Assistant Executive Director; Stephanie Boudreaux, Program Specialist A; Board Attorneys, Courtney P. Newton and George Papale were also present.

Board member, Dr. Gerald Leglue was not present at the meeting.

Chairman Al Moreau, III called the meeting to order at 5:00pm.

The board members reviewed and approved the agenda. Chairman Al Moreau, III motioned to move into Executive Session pursuant to La R.S. 42:16 for the purposes of discussing investigating proceedings regarding allegations of misconduct. The Board voted and all were in favor to move into Executive Session.

The Board exited Executive Session.

The Board unanimously accepted the Second Amending Consent Order for Adam Lafleur. Mr. Lafleur will be asked to appear at the December Board Meeting to discuss the agreement.

The Board unanimously accepted the Consent Order from Emily Hymel. Miss Hymel will be asked to appear at the January Board Meeting to discuss the agreement.

The Board unanimously accepted the RPTP Participation Agreement for Pam Hoffman.

The Board unanimously accepted the RPTP Participation Agreement for Robyn Alleman.

The Board voted to deny the reinstatement application of David Conerly. The board members voted unanimously in favor of denying the reinstatement application.

The Board voted to deny the 750 word essay submitted by Ayodeji Famuyide. The board members voted unanimously in favor of denying the essay.

The board members reviewed the minutes and approved the minutes as amended.

**Special Programs – Q&A with Evaluator: Rick Proffitt, LAC**

The Board interviewed Licensed Addiction Counselor, Rick Proffitt, President and CEO of Stages of Recovery. Stages of Recovery is an outpatient clinic in Lake Charles for individuals with addictive disorders. Mr. Proffitt currently provides initial evaluation services to licensees referred by the Board.

### **Ayodeji Famuyide – Interview with the Board**

Ayodeji Famuyide appeared before the Board to discuss the terms he agreed to in his Consent Order and to review his 750 word essay. The Board informed Mr. Famuyide that his essay has been denied and he must submit a revised essay no later than Wednesday, November 25, 2015.

### **Legal Report**

Board Attorney, Courtney Newton reported on the status of complaints since the last board meeting:

Dismissed Cases:	1
Submitted Complaints:	1
Open Investigations:	16

### **Chairman’s Report**

Chairman Al Moreau noted that there is a vacancy on the Advisory Committee because Patrick Cook has been appointed to the Board. Moreau requested that the Executive Director provide geographical information indicating where the concentration of licensees are in the state. In December, Wayne Campbell (Lafayette), Gene Noel (Alexandria) and Nick Butler (Monroe) will be ending their second term as Advisory Committee Members, leaving the committee with three additional vacancies for the Board to appoint new members in January. Board members are requested to send in nominations of candidates for appointment to be considered at the December Board Meeting.

Chairman Moreau reported that Dr. Suzanne Tinsley from LSU HSC Shreveport is tentatively scheduled to speak at the December Board Meeting to discuss medication management and what is currently being taught in the DPT and PA curriculums.

An update was given by Moreau on the annual Federation of State Boards of Physical Therapy (FSBPT) meeting, which was held in October in Orlando, Florida. In attendance at the meeting was Executive Director, Charlotte Martin; Board Chairman, Al Moreau; Board Member, Kristina Lounsberry; and Board Attorney, Courtney Newton.

Moreau reported that there was a Jurisprudence Seminar held in October at the Sheraton Metairie Hotel. There were 88 licensees in attendance at the seminar. On November 5, 2015, Jurisprudence Seminar will be held at the Louisiana College in Pineville. Board member, Donald Cassano will present at the Seminar.

### **Secretary/Treasurer’s Report**

Secretary/Treasurer Landry reported the finances for the end of the month of September 2015. Cash in the bank totaled \$81,424.54. Income for September totaled \$13,020.16 and expenses totaled \$67,094.39. The two Certificates of Deposit at Lakeside Bank total \$717,488.68. One CD earned \$317.03 in interest between 9/01/2015-9/30/2015. The ending balance as of 9/30/2015 was

\$515,083.56. The CD matures on January 15, 2016. The other CD earned \$99.05 in interest between 9/01/2015-9/30/2015. The ending balance as of 9/30/2015 was \$201,405.12. The CD matures on April 15, 2016. The Business Savings account at Chase Bank is \$52,589.72 and earned \$4.08 in interest.

The board members reviewed the Balance Sheet and Profit and Loss Statement ending September 30, 2015.

Patrick Cook motioned to allow for the transfer of funds from the Board's Certificate of Deposit to allow for Board expenditures. The amount and date of the transfer will be determined by Executive Director based on balances and current operations expenses from 12/1/15 – 3/1/16 with approval of Board officer. The motion was seconded by Al Moreau. The Board voted and all approved.

### **Executive Director's Report**

Executive Director, Charlotte Martin reported that there were 63 individuals licensed since the last board meeting. The board members ratified the list and signed the wall licenses for each licensee.

#### PTA: New Graduates

Elizabeth Andress, Emanuel Antunez, Amber Buckel, Aaron Burton, Emily Buttery, Andrew Cardin, Chase Cheramie, Richard Clasen, Jenna Coco, Jene' Cormier, Jena Courville, Logan Crow, Michael Daigrepoint, Gerren Davis, Matthew Davis, Martha Diaz, Emmalea Dugas, Jill Ganey, Tabitha Gardner, Brittany Grabert, Misty Graning, Chong Han, Bradley Holstein, Lakeisha Houston, Kelsey Jones, Shane Kenney, Jennifer King, Sarah Ladner, Drew Lapoint, Erika Loucks, Scott Lucas, Dana Martin, Queenie Mccartney, Jebрил Nassar, Jayme Perkins, Kimberly Rea, Kerner Schaubhut, Taylor Stewart, Melanie Strecker, Logan Sullivan, Davani Tassin, Samantha Voinche, David Vroom, Chad Walker, Brandon Wallace, Carlissa Williams, Elizabeth Wood, Christopher Worthington, Erin Worthington, Frank Yarbrough, Samantha Young

**Total: 51**

#### PTA: Reciprocity

Nicholas Kostovich, Dusty Santman, Francis Smith

**Total: 3**

#### PT: Reciprocity

Ryan Carew, Sarah Gibson, Meghan Gill, Todd Hooks, David Kline, Patrick Ogg, Brittany McJunkins, Meghan Mieczkowski, Lisa Plackowski

**Total: 9**

Mrs. Martin requested clarification regarding foreign trained applicants and the process that the Board office will follow when the applicant does not fulfill the supervised clinical practice requirement within an 18 month period. It is agreed that a foreign-trained provisional licensee who does not complete clinical supervision practice within eighteen months will move into expired status at the end of the eighteen months. If the same foreign-trained individual applies for initial

licensure in Louisiana at a later date, his/her application will be reviewed by the Board at the time of applying to determine if a second provisional license will be issued to complete the requirement for clinical supervised practice..

Mrs. Martin updated the Board on the status of the website and database project.

Mrs. Martin introduced revisions to the internal board office policy and procedure regarding the notification of NPTE and NPTAE scores to initial applicants for Louisiana licensure. The proposed change allows the board staff member to notify applicants of a passing score and refer the applicant to the FSBPT for their score report. The purpose of the revision is to improve efficiencies in the board office and since FSBPT provides a score report to all test takers, notification by the board office is duplicative. However, in the Policy, the board office will continue to notify the applicant of their score for a failing score along with a letter referencing Rule §171 regarding the limitations of number of failed attempts for the NPTE and the requirements. The Board voted and unanimously approved the policy revisions.

Minor revisions to the internal board office policy and procedure regarding the annual continuing education audit were reviewed by the Board. The board members voted and unanimously approved.

## **Reports of Committees**

### Continuing Education Committee

The Continuing Education Committee provided a monthly report of approved, denied and pending courses to the Board, as well as an average approval time.

54 courses approved

3 denied

0 courses pending

Average approval time is 6 days

The Continuing Education Committee gave an update on the recent audit and the non-complaint licensees. The board members agreed on a course of action for each non-compliant licensee.

### Legislative Task Force

#### *Patient Access Review Committee, SCR 19*

Chairman Moreau reported on the fourth Patient Access Review Committee meeting that was held in Baton Rouge on October 22. A request was made to the Committee by the representative from the Athletic Trainers Association for a list of all declaratory statements created and/or in the past ten years, along with board minutes associated with each.

The Legislative Task Force discussed the upcoming 2016 Regular Legislative Session with the Board.

## **New Business**

### Correspondences

*A licensee asked if a PTA can see a patient after they have been hospitalized if there is no change in diagnosis. If they are diagnosed with something new (AFib), but the PT says it is fine and the plan of care will not change.*

The Board referenced Rule 333.B.1, which states the level of responsibility assigned to a PTA pursuant to §333 is at the discretion of the Supervising PT of Record who is ultimately responsible for the care provided by this PTA.

*Chad Asher asked how a PT goes about ending services/providing a warning to an agency if they are not paying the PTs for service. What if the PT performed an evaluation and the company did not like the results, so they asked another PT to do the evaluation and received the same results. Is it legal for the agency to delete the original record from the file?*

The Board agreed that clear documentation regarding the purpose of discharge in the patient file and documentation of a warning to the agency would be appropriate and not considered patient abandonment. The board advised that it is illegal to destroy patient records and referred the question to the Department of Health and Hospitals.

*Rebecca Richardson, PT asked the Board for clarification regarding skin assessments and asked if PTs should do a complete skin assessment regardless of complaints of pain, discomfort or skin breakdown. She is also being asked to assess breath sounds with the stethoscope like the lung sounds – but she does not feel competent in doing this. She asked the board if a PTA should handle medication reconciliation.*

The Board referenced Rule 303.C. and suggested that if the treatment is outside the scope of her knowledge, experience, or expertise, that she shall notify the patient or client and provide a referral to an appropriate healthcare practitioner.

*Michael DiCarlo, PTA asked about the therapeutic modality called “cupping” and if this can be considered within the scope of practice as a licensed PTA in the state of Louisiana. DiCarlo asked if he needs to be certified to perform this modality.*

The Board stated that the treatment can be done if the PTA has the proper training to do so and referenced §2407.A.3, which defines “Physical Therapist” and Rule 333.B.1, which states the level of responsibility assigned to a PTA pursuant to §333 is at the discretion of the Supervising PT of Record who is ultimately responsible for the care provided by this PTA. The supervisor can reference Rule 303.C

*Jennifer Smith wrote, “could you present to the board to make changes to PT supervision of a PTA to extend longer than every 6th visit and eliminate the face to face with both PT and PTA especially in the Home Health setting. It is not cost effective and eliminates jobs for PTA's with the frequent supervision. A PT is always available and can re-evaluate when necessary either by a face to face with the patient or activity change to POC after conference with PTA. In other states, supervision in home health is every 30 days. No face to face with PTA is required at beginning of service or during service. In a clinic setting, the PT is usually in the building or room during treatment anyway so a face to face every 6th visit does not seem necessary and is not cost effective for the clinic using PTA's.”*

The board took this under advisement at the time of the future Rule Change.

*Heather Record: Our Company received an update that PT's are now required to do Progress Notes every 7 days on every patient for each payer source. Prior to this ruling we were following CMS guidelines for all our disciplines which state every 10 treatment days a progress note needs to be done. We did notice that this is stated under PTA supervision on the LAPT board. We are wondering being that our company does not utilize PTA's would the PT Board consider putting that exception to the rule and allow our PT's to follow CMS guidelines. Your response in this matter would be greatly appreciated.*

The Board made note of the recommendation, but determined that this is a Department of Health and Hospitals regulation that must be followed separate and apart from the Board regulation.

*Lloyd Vale: Does the PT need to visit a patient after patient has been hospitalized, even just for observations reasons instead of a PTA? In a snf setting, does the PT need to see the patient after a doctor's appointment especially if it's related to the current patient's plan of care?*

The board referenced Rule §333 and determined that a PT must see a patient if there are changes with the patient's status. If the physician has changed anything in the plan of care, then the PTA shall speak to the supervising PT immediately. The PT shall be readily accessible by beeper or telephone and available to the patient by the next scheduled treatment session upon request of the patient or PTA.

### **Old Business**

*Kelly Rodriguez, PT, MPT, NCS asked at the last board meeting: I am a physical therapist in an outpatient neurologic facility. I have recently in the last few months taken on a new patient who is very involved neurologically, at the request of the family. This patient has been under the care of the Neurorehab center for ~ 2 years. His original treating therapist differed in opinion with the wife of the patient in question when it came to numbers of hours in therapy per week. The PT felt he only needed 3, the wife felt 4 was necessary. So she requested another therapist, to which our management complied, placing him on my schedule. I currently share him with another therapist. We are currently seeing him in a maintenance capacity, mainly because she has threatened to 'sue' Touro if we do not continue to see him. Management has not set boundaries for this family, although the therapy team was working towards reducing his hours further. Which brings me to the current situation. The patient was admitted to the hospital one week ago, for a syncopal episode, suspected pneumonia. From the get go, the wife demanded his hours and times be saved. We have a two week policy to hold patient appointments (even in the event they are admitted to the hospital) as well as the required new prescription to return to therapy. In a conversation with our office secretary, when the wife learned of this new prescription requirement, she stated 'Well, next time I won't tell your office he was admitted to the hospital, I'll just say that he is sick and bring him in to the clinic without one.' This was brought to the attention of our management team, however they have not addressed it with the family and do not appear to be willing to have this discussion. Again, missing an opportunity to set a boundary. I plan on explaining to the family the requirements set forth by our licensure for a new prescription after an admit to the hospital or a decline in status (or at least that what I understand it to be), but I just needed advice on any other*

*legal piece of information I can convey to this family and our management team. If they violate this requirement in the future, what is my legal recourse? I am concerned for my license!*

The following response was drafted by Board Member, Kristina Lounsberry and will be sent to Ms. Rodriguez.

After review of your scenario, we refer you to the following sections of the Practice Act and Rules:

Rule 303 (B) - A PT is responsible for managing all aspects of the physical therapy care of each patient

Rule 303 (C) - A PT shall exercise sound professional judgment based upon his knowledge, skill, education, training, and experience, and shall perform only those procedures for which he is competent. If, during evaluation, reassessment or screening, the PT finds that treatment which is outside the scope of his knowledge, experience, or expertise is needed, the PT shall notify the patient or client and provide a referral to an appropriate healthcare practitioner.

Rule 313 (A) A PT shall document the transfer of care of the patient, as appropriate, to another health care provider in the event of elective termination of physical therapy services by the PT.

Rule 345 (B) 4. Exercising undue influence - a PT shall exercise his professional judgment in the best interest of his patients. A licensee shall not:

- a. place his or her own financial gain over the interest and welfare of a patient in initiation or continuation of physical therapy services that are contraindicated or cannot reasonably result in a beneficial outcome

In conclusion, the licensed physical therapist is responsible for all care provided to a patient. Referrals, new orders, releases, etc. are obtained at the discretion of the treating therapist. Termination of services and transfer of care is also at the discretion of the treating therapist. The LA Board of Physical Therapy does not provide legal advice to licensees. Please access the Practice Act and Rules via the Board's website at [www.laptboard.org](http://www.laptboard.org) or a paper copy may be requested.

Chairman Moreau motioned to adjourn the meeting. Kristina Lounsberry seconded the motion. The board voted and unanimously approved. The board meeting was adjourned at 11:30pm.