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Schulder, Judith

From: Russell, Laverne [Laverne.Russell@GenesisHCC.com]
Sent: Wednesday, April 13, 2011 5:07 PM
To: Schulder, Judith
Subject: Continuing Competence Regulations for Occupational Therapists
Attachments: MEMO MASTER. OT Cont. Ed Competency 11-10.doc; CEU section of Proposed PA PT Practice Act.doc; MEMO MASTER OT Cont Ed Competency 4 - 11.doc

Importance: High

As a licensed occupational therapist in Pennsylvania, I am submitting the attached information as my comments in reference to the proposed continuing competence regulations for Occupational Therapist. Included are my original memo from Nov. 2010 discussing this issue, my current memo for April 2011, and excerpts on CEU requirements from the proposed PA PT Practice Act.

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Memorandum

To: *Judith Pachter Schulder
Board Counsel
State Board of Occupational Therapy Education and Licensure*

From: *LaVerne Russell, PT, OTR/A
PA License #: OC000834L*

Date: *April 13, 2011*

Subject: *Proposed Continuing Competency Regulations for Occupational Therapist*

In November, 2010, I submitted a memo voicing my concerns regarding the proposed continuing competency regulations for occupational therapists in Pennsylvania. I have attached that letter to this email. I still have the same concerns regarding these regulations that I noted in that memo.

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In addition to those points I would like to suggest that the Board considers the current proposal that is on the table for the Physical Therapy Board with the updates to their Practice Act that covers the issues of continuing education and continuing competence. The physical therapy regulations requires 30 continuing education hours per renewal period and allows, but does not mandate, that 15 of those hours can be done as continuing competence activities. As specifically stated: "A licensed physical therapist may satisfy in part the requirements of Section 40.67 (relating to continuing education for licensed physical therapist) by completing continuing competence activities approved by the Board." I have also included the section on continuing education from the proposed physical therapy regulations. Adopting this policy would make the continuing education and continuing competence requirements similar for both professions in Pennsylvania.

As I indicated in my previous correspondence, I wholeheartedly agree and would support a requirement of 24 contact hours of professional development activities for every licensure renewal period for both the occupational therapist and the assistant. I also think that having the option to utilize other professional development activities besides continuing education course should be available to the clinician but not mandated.

In our desire to raise the level of competency and professionalism of our occupational therapy clinician, let us not put undue burden on them to maintain their license and potentially decrease the occupational therapists within the state and the availability of our services to the patients who might need it.

Thank you for considering my recommendations.

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2011 APR 25 A 9:44

Memorandum

To: *Judith Pachter Schulder
Board Counsel
State Board of Occupational Therapy Education and Licensure*

From: *LaVerne Russell, PT, OTR/
PA License #: OC000834L*

Date: *November 26, 2010*

Subject: *Proposed Continuing Competency Regulations for Occupational Therapist*

I was very pleased to see a proposal from the Pennsylvania State Board of Occupational Therapy regarding professional and educational requirements for occupational therapists to insure that they remain current in their profession. I applaud the Board for proceeding with this effort as many other states and also professional groups within our states have already enacted these requirements as part of their licensure process.

As I reviewed the proposed document I did have some concerns regarding the requirements. I do agree that we should require 24 contact hours per licensure renewal period and that these should be in activities and educational opportunities approved by the Board. Where I differ in my opinion is how those contact hours must be acquired.

As the proposed legislation is written only 18 of those contact hours can be obtained by continuing education courses, the other 6 contact hours must be obtained through one or a combination of the following:

1. Mentorship
2. Fieldwork supervision
3. Professional Writing
4. Presentation and Instruction

For each of these methods there are very strict guidelines as to how these hours may be accomplished in each of these areas.

These proposed regulations mimic the NBCOT regulations for obtaining the 36 contact hours within the 3 year renewal cycle. The big difference between the Pennsylvania regulations and that of NBCOT is that NBCOT give the professional the **option** of utilizing their activities in these areas to put towards their 36 hours for recertification. The Pennsylvania regulations would **mandate** each clinician to do 6 hours in one of more of these areas or they would not be able to renew their license.

I understand the goal of getting the clinician more actively involved in the development and promotion of the profession. Unfortunately we have to acknowledge that for some clinician, for various reasons, participation in these activities may not be a strength or a desire of the clinician. I do not think that makes them less competent as a clinician and not qualified to obtain/renew their license.

What about the clinician who may want to work part-time or per diem work? They may have a family or are at a stage in their lives where full-time employment and involvement is not an option or desire. They would have a difficult time obtaining the 6 extra contact hours. Are they less qualified? Would they not be able to provide excellent service to patients, especially if they continued to be current with 24 hours of appropriate continuing education courses?

We are concerned about the competency of our clinicians but I would ask the question, how do these activities insure competency? Because a therapist has more opportunities to partake in these types of activities does that make them more competent than the clinician that may attend more than 24 hours of continuing education to remain current in their field and is actively treating and incorporating that new knowledge into their treatment intervention?

We also need to analyze whether this could potentially pose undue burden to many very competent clinicians and may eventually result in some of them saying that it is not worth maintaining their license. For a profession that is already limited in the availability of clinicians in many areas do we want to have that occur?

What about our patients, with less clinicians available this could ultimately affect the access to occupational therapy especially in rural areas where these services are already limited.

Occupational Therapy Assistants are also a vital part of our profession and a member of the our rehab team that is responsible for providing occupational therapy services. We should also look at the need for professional development and continuing education activities for our assistants. We also want to insure that they are remaining current with the many changes within the practice and profession of occupational therapy. This will assist them being able to safely and effectively carry out the therapy programs delegated by the occupational therapist.

I wholeheartedly agree and would support a requirement of 24 contact hours of professional development activities for every licensure renewal period for both the occupational therapist and the assistant. I also think that having the option to utilize other professional development activities besides continuing education course should be available to the clinician but not mandated.

In our desire to raise the level of competency and professionalism of our occupational therapy clinician, let us not put undue burden on them to maintain their license and potentially decrease the occupational therapists within the state and the availability of our services to the patients who might need it.

ANNEX A

TITLE 49. PROFESSIONAL AND VOCATIONAL STANDARDS

PART I. DEPARTMENT OF STATE

Subpart A. PROFESSIONAL AND OCCUPATIONAL AFFAIRS

CHAPTER 40. STATE BOARD OF PHYSICAL THERAPY

Subchapter A. PHYSICAL THERAPISTS

GENERAL PROVISIONS

16A-6514

Act 38 of 2008 amendments - proposed

* * * * *

CONTINUING EDUCATION

§ 40.67. Continuing education for licensed physical therapist.

(a) Contact hour requirements. Beginning with the biennial renewal period beginning January 1, 2011, a licensed physical therapist shall satisfy the following continuing education requirements.

(1) During each biennial renewal period, a licensee shall complete qualifying continuing education equal to at least 30 contact hours of continuing physical therapy education.

(2) Except as permitted in § 40.20(c)(1) (relating to reactivation of license), paragraph (4) or as directed by the Board, continuing education may satisfy the requirement of paragraph (1) only for the biennium during which it was completed. No contact hour of continuing education may be used to satisfy the requirement of paragraph (1) for more than one biennium.

(3) Unless otherwise excused by the act or this subchapter, failure to complete the minimum required amount of continuing education during the applicable renewal period as required by section 7.2 of the act (63 P.S. § 1307.2) and this section will subject the licensee to disciplinary action under section 11(a)(6) of the act (63 P.S. § 1311(a)(6)) as provided in § 40.52(11) (relating to unprofessional conduct, physical therapists).

(4) The Board may, in individual cases involving physical disability or illness, or undue hardship, grant a waiver of the continuing education requirements or grant an extension of time to complete the requirements. No waiver or extension of time will be granted unless a written request is submitted by the licensee; or in case of physical disability or illness, by a physician licensed in this state or another state or territory of the United States or the District of Columbia and whose license is in good standing, or both. All necessary documentation must be received by the Board no later than 90 days preceding the biennial renewal. If the physical disability or illness or undue hardship for which the waiver has been granted continues beyond the period of the waiver, the licensee shall reapply for an extension of the waiver. The Board may, as a condition of any waiver granted, require the licensee to make up all or part of the continuing education involved.

(b) Reporting completion of continuing education. Continuing education must be reported and documented in the following manner.

(1) In general, proof of completion of a course or program of continuing education shall consist of a certificate of completion issued by the

course or program provider, including:

- (i) The name of the participant.
- (ii) The name of the provider.
- (iii) The date or dates of the course or program.
- (iv) The name of the course and any Board issued approval

number of the course or program.

(v) The number of contact hours of continuing education or academic credit.

(2) A licensee shall retain proof of completion of continuing education for 5 years after completion of the continuing education or after the completion of the renewal period during which the continuing education was required or applied, whichever is latest.

(3) The Board will audit licensees to verify compliance with continuing education requirements. A licensee shall fully respond to any audit notice within 30 days or other time period allowed in the notice.

(c) Credit for approved continuing education. Credit for continuing education will be determined in accordance with the following.

(1) Credit for continuing education will be granted only for courses or programs offered by providers preapproved under subsection (d)(1) or approved by the Board pursuant to subsection (d)(2).

(2) Unless limited by this section, continuing education credit may be earned in a course or program relating to any of the following:

- (i) Subject matter falling within the definition of physical

therapy in section 2 of the act (63 P.S. § 1302).

(ii) Subject matter that is part of training necessary to qualify one for licensure as a physical therapist or certification of authority to practice physical therapy without a referral.

(iii) Law or ethics applicable to the practice of physical therapy.

(iv) Subject matter that otherwise keeps the licensee apprised of advancements and new developments in the practice of the profession of physical therapy.

(3) Continuing education credit may not be earned in any course in office management or practice building.

(4) A licensee may not receive credit more than once in a given renewal period for repetition of courses or programs with substantially similar content and objectives.

(5) A licensee teaching a course or program of continuing education may receive the same credit that a licensee attending the course or program would receive and may also receive credit for time spent in preparation. Credit for time spent in preparation may not exceed the credit available for a licensee attending the course or program.

(d) *Approval of continuing education courses and programs.* Continuing education courses and programs may be approved in accordance with this subsection.

(1) Provided that the course or program otherwise meets the requirements of subsection (c)(2) and the provider issues to each attending licensee a certificate of completion record in accordance with subsection (b)(1), a

course or program of continuing education from a provider preapproved under this paragraph is approved by the Board.

(i) The following providers are preapproved:

(A) APTA or its components.

(B) FSBPT and its jurisdictions.

(C) A physical therapy program accredited by CAPTE.

(ii) Any other provider seeking preapproved provider status must apply to the Board on forms supplied by the Board, pay the required fee, and demonstrate that the provider is competent to provide continuing education to physical therapists without direct review by the Board.

(iii) The Board may terminate preapproved provider status if the provider, including those providers identified in subparagraph (i), is no longer able to demonstrate that it is competent to provide continuing education to physical therapists without direct review by the Board. The Board will audit preapproved providers to assure that the provider complies with the requirements of this paragraph and of paragraph (3).

(iv) The Board will maintain a list of preapproved providers and make the list publicly available.

(2) A continuing education course or program offered by a provider not preapproved under paragraph (1) may be approved as provided in this paragraph.

(i) The provider shall apply at least 60 days in prior to the date the continuing education course or program is scheduled to take place on

forms provided by the Board and shall fully provide all information required by those application forms for the Board to fulfill its duties under this section. The application shall be submitted to the Board with payment of the fee as required in § 40.5 (relating to fees). A provider who is unable to submit the application at least 60 days prior to the date the course or program is given may request a waiver in writing setting forth the reasons why the 60-day requirement could not be met.

(ii) The provider shall apply for approval of each course or program of continuing education, which may include multiple presentations of the course or program at various locations and multiple offerings of the course or program. Unless approved by the Board, any significant change in content or use of an instructor or instructors other than those described in the application for approval is a separate course or program for which Board approval is required.

(iii) The Board may deny approval of a course or program of continuing education when the provider has previously failed or is not currently able to comply with the provider responsibilities of paragraph (3) or the course or program does not qualify under subsection (c)(1). The Board may approve in part and deny in part an application for approval of a course or program. The Board may deny an application for approval that does not comply with the act or this chapter.

(iv) The Board may terminate its prior approval of a course or program of continuing education when the applicant made one or more

false or misleading material statements on the application. The Board may also terminate in part or in whole its prior approval of a course or program when it is later determined that the Board has grounds to deny approval in accordance with this section. Termination of approval will not forfeit credit for a course or program completed prior to termination of approval.

(v) The Board will maintain a list of approved courses and programs in a form accessible to licensees and the public.

(vi) If the provider has not separately sought approval under this paragraph, a licensee attending the course or program may apply for approval of a course or program of continuing education in accordance with this paragraph. The licensee shall apply for approval prior to attending the course or program. The Board may waive the requirements of the following paragraph (3) where a licensee attending a course or program applies for approval.

(3) For each course or program of continuing education, the provider shall:

(i) Disclose in advance to prospective attendees the objectives, content, teaching method and the number of hours of continuing education credit approved by the Board.

(ii) Provide physical facilities adequate for the number of anticipated participants and the teaching methods to be used.

(iii) Provide accurate instructional materials.

(iv) Utilize qualified instructors who are knowledgeable in the

subject matter.

(v) Evaluate the course or program through the use of questionnaires of the participants and instructors.

(vi) Issue a certificate of completion to each participant.

(vii) Retain attendance records, written outlines, and a summary of evaluations for 5 years.

(e) Continuing competence. Continuing education is a structured process of education beyond professional entry-level education that is applicable to the practice of physical therapy and is designed or intended to support the continuous development of physical therapists and to maintain and enhance their professional competence. Accordingly, a licensed physical therapist may earn up to 15 contact hours of required continuing education in each biennial renewal period through continuing competence activities that do not otherwise qualify under this section if the activity is approved by the Board under § 40.68 (relating to continuing competence for licensed physical therapist).

§ 40.68. Continuing competence for licensed physical therapist.

(a) Requirements. A licensed physical therapist may satisfy in part the requirements of § 40.67 (relating to continuing education for licensed physical therapist) by completing continued competence activities approved by the Board as provided in this section. The Board will be guided by the following principles in applying this section.

(1) Continuing competence should be self-directed by the physical therapist.

(2) Evaluation or assessment of current competence is critical for the physical therapist. The results of an evaluation or assessment should be used by

the physical therapist to then select appropriate development activities.

(3) Physical therapists should have a wide variety of activities available to demonstrate their competence. There is no single right way to demonstrate competence.

(b) *Approval process.* A licensee shall apply to the Board on forms provided by the Board and receive approval from the Board in order to earn continuing education credit for continuing competence activities. The continuing competence activity must be fully documented, including certification as appropriate. In determining whether to approve a continuing competence activity and how much credit to award, the Board will be guided by the following standards.

(1) Content within the continuing competence activity must be relevant to the physical therapy profession and the designated audience.

(2) The continuing competence activity must foster the participant's learning and professional engagement through reflection, interaction, participation and contribution.

(3) The continuing competence activity must incorporate, reflect and promote the use of evidence-based practice (patient values, available evidence, and clinician experience) or be based on the act or this chapter.

(4) Qualified individuals with appropriate subject matter expertise and credentials must develop and, when applicable, conduct the continuing competence activity.

(5) The continuing competence activity must include behavioral objectives that encompass the content of the activity. The objectives must

promote a high level of learning in one or more of the cognitive, psychomotor and affective domains.

(6) The design of the activity must support the achievement of the objectives.

(7) Each continuing competence activity must include objective methods to assess the participant's attainment of the specified activity outcomes.

(8) There must be mechanisms in place for ongoing review and evaluation of the quality and the effectiveness of the continuing competence activity. The activity must be modified based on information gained from review and evaluation.

(9) The continuing competence provider shall furnish clear, complete information to potential learners about continuing competence activities regarding administrative details, activity specifics and content, biography of the activity deliverer/presenter, and participant requirements.

(10) The continuing competence provider shall have established processes for developing, administering and documenting the continuing competence activity.

(c) *Credit.* Credit for continuing competence activities may be awarded in accordance with this subsection. Credit will not be awarded for any activity that duplicates other continuing competence activity or continuing education for which credit is also awarded.

(1) For completion of a fellowship conferred by an organization credentialed by APTA in a specialty area of the practice of physical therapy: 10

contact hours for each full 12-month period of fellowship to be credited in the renewal cycle of completion of the fellowship.

(2) For completion of a residency program in physical therapy offered by an APTA credentialed organization: 10 contact hours for each full 12-month period of clinical participation to be credited in the renewal cycle of completion of the residency program.

(3) For specialty certification or specialty recertification by the American Board of Physical Therapy Specialization or its successor organization: 15 contact hours upon receipt of certification or recertification to be credited in the renewal cycle of certification or recertification.

(4) Taking the practice review tool of the Federation of State Board of Physical Therapy (FSBPT): 5 contact hours; Passing the practice review tool of the FSBPT: an additional 5 contact hours.

(5) Other activities evaluated and approved by the FSBPT: the number of continuing education units set by FSBPT with each continuing education unit worth 10 contact hours of credit.

(6) Becoming a Credentialed Clinical Instructor or a Credentialed Clinical Instructor Trainer as recognized by APTA: 1 contact hour for each hour of coursework required in order to receive the credential, not to exceed 15 contact hours, to be credited in the renewal cycle during which the credential was issued.

(7) Submission of a request to a funding agency for a research grant as a principal or co-principal investigator: 10 contact hours; award of the grant: an additional 10 contact hours.

(8) Service as a grants reviewer: 1 contact hour for every 2 hours of review, up to a maximum of 5 contact hours in a single renewal cycle.

(9) Authoring or editing a book dealing with a subject related to the practice of physical therapy, as determined by the Board, not to exceed 15 contact hours, to be awarded in the renewal cycle in which the book was published.

(10) Authoring or editing a chapter of a book dealing with a subject related to the practice of physical therapy, as determined by the Board, not to exceed 10 contact hours, to be awarded in the renewal cycle in which the book was published.

(11) Authoring a published peer-reviewed article relating to the practice of physical therapy, as determined by the Board, not to exceed 10 contact hours, to be awarded in the renewal cycle in which the article was published.

(12) Authoring a published non peer-reviewed article relating to the practice of physical therapy, as determined by the Board, not to exceed 5 contact hours, to be awarded in the renewal cycle in which the article was published.

(13) Completing a professional self-assessment that is a process for the licensee to evaluate current professional practice ability, establish goals to improve those abilities, develop a plan to meet those goals, and document that the objectives are being accomplished, as determined by the Board, not to exceed a total of 5 contact hours in any single renewal cycle.

(14) Participating in a National physical therapy or interdisciplinary (including physical therapy) organization as an officer or chair of a physical therapy services committee or physical therapy services task force member for at

least one year: 5 contact hours for each full year of participation.

(15) Participation in a State physical therapy or interdisciplinary (including physical therapy) organization as an officer or chair of a physical therapy services committee for at least one year: 5 contact hours for each full year of participation.

(16) Participation in a local physical therapy or interdisciplinary (including physical therapy) organization as an officer or chair of a physical therapy services committee for at least 1 year: as determined by the Board not to exceed 5 contact hours in any single renewal cycle.

(17) Participation in a physical therapy professional organization committee involved with physical therapy services for at least 1 year: as determined by the Board not to exceed 5 contact hours in any single renewal cycle.

(18) Other continuing competence activities: as determined by the Board.