1. **Call to Order and Roll Call – Nancy Krueger, PT**

Ms. Krueger called the meeting of the Assistive Personnel Task Force to order at 9:32 a.m. Roll call was taken. Task force members Jim Dagostino, PT, Mitch Kaye, PT, Lorraine Kimura, PT, John Linberger, PTA, Katie Rath, PT, Deborah Seid, PT, and Jim Turner, Public Board Member were present and a quorum was established. Sara Takii was absent.

2. **Approval of August 1, 2008 Assistive Personnel Task Force Meeting Minutes**

There was an edit to the minutes on the second page, first paragraph, as follows: Mr. Dagostino indicated they concluded *from their review* that California had some of the strictest regulations regarding the use of aides in the nation but all states require direct supervision of the aide.

The minutes were approved as amended. Vote: 8-0. Motion carried.

3. **Possible Recommendations to the Physical Therapy Board of California Regarding Physical Therapy Aide Supervision Requirements**

The task force reviewed the proposed language drafted by legal counsel. Discussion initiated regarding demonstrating and documenting competencies of the aide and who documents in the case of registry physical therapists.

Ms. DeFoe of the CPTA recommended changing “the” to “a” in the first sentence of the modified text and the task force concurred.

The task force agreed with the concept of recording the competency of the aide in a personnel file and discussed how the supervising physical therapist know of the aides competencies without making an assumption. Section 1399(a)(3) requires the physical therapist to only assign those patient related tasks that can be safely and effectively performed by the aide.

The task force suggested there was confusion between a patient related and non patient related task and inquired about a physical therapist assistant’s ability to use an aide when doing a non patient related task vs. a patient related task. Mr. Hartzell replied he thought it would take a legislative change.
Discussion ensued about reported incidents of supervising physical therapists going to get coffee or run errands and leave the aide unsupervised while treating a patient. This led to conversation about how to clearly state the supervisor must be within steps of the aide at all times. Mr. Dagostino suggests adding, within the line of site to section (a)(4); however, privacy issues discounted the suggestion. The task force was concerned with developing language which leaves no question that the presence of the supervising physical therapist is required at all times.

Concepts agreed upon to the introductory paragraph of section 1399 of the proposed modified text were: Prior to the aide providing care a physical therapist shall evaluate and document in a record of competency the ability of the aide to provide each patient related task that the aide will provide in the setting. The record of competencies shall be made available to the board or any physical therapist utilizing the aide, upon request.

The concepts agreed upon for subsection 1399(a)(4) were: The physical therapist shall provide continuous and immediate supervision of the aide. The physical therapist shall be in the same facility as and in immediate proximity to the location where the aide is performing patient related tasks. The physical therapist shall be readily available at all times to provide immediate advice, instruction or intervention in the care of the patient.

Ms. Krueger requested Ms. Freedman mold their concepts into acceptable regulatory language. Language is to specify that there is no authority for a brief interruption in the supervision of the aide by the physical therapist.

Moved by Mr. Dagostino, seconded by Mr. Kaye to forward recommended modifications to the text in the main paragraph of section 1399 to the Board. Vote: 8-0 Motion carried.
Moved by Ms. Kimura, seconded by Ms. Seid to submit the recommended modified text to section 1399(a)(4) to the Board. Vote: 8-0. Motion carried.

4. Possible Recommendations to the Physical Therapy Board of California Regarding Physical Therapist Assistant Supervision Requirements

Ms. Krueger drew the attention of the task force to the draft language proposed by the appointed subcommittee charged with developing modifications to the physical therapist assistant supervision requirements. As a participant of the group responsible for the revisions, Ms. Erickson assisted in responding to the comments by the task force.

Ms. Seid recommended deleting the second sentence in the introductory paragraph of 1398.44 suggesting that it was redundant of the first sentence. After a lengthy discussion the task force recommended the following language for the introductory paragraph:

A physical therapist has continuing responsibility to follow the progress of each patient and shall at all times be responsible for all physical therapy services provided by the physical therapist assistant to assure that the physical therapist assistant does not function autonomously.

The task force then addressed each subsection.

(a). The system of transferring care to an alternate physical therapist was an issue of concern. The question presented was, should there be a supervising physical therapist of record that is solely responsible for each patient’s care? All agreed that the initial evaluator is dubbed the
physical therapist of record. There were no changes to subsection (a) of the proposed changes.

(b) The therapist of record remained the topic of discussion as well as telecommunications. Mr. Hartzell suggested that telecommunication be defined to exclude leaving a voice mail or email where a response from the supervising physical therapist may not be immediate.

(c) Ms. Freedman will verify whether the use of the word “licensed” is necessary and consistent with the other regulations. Ms. Seid suggested adding a comma after “skill level”. The word test was made plural.

(d) Ms. Seid then commented on section (d) and the obstacles it presents in home health, resulting in Mr. Hartzell questioning the rationale of requiring the supervising physical therapist to observe the physical therapist assistant providing patient care every sixth visit or 30 days. Ms. Rath indicated it was required by Medicare and Mr. Dagostino said it was in the APTA’s Guide to Practice, Ms. Erickson stated it was common practice. The task force concurred that it wasn’t necessary since there was other language in the text that provided for the adequate supervision.

Ms. Seid requested specifying that the alternate physical therapist is the alternate “supervising” physical therapist.

Ms. Freedman suggested that a statement be included in the language indicating that the therapist of record as used in this section also includes an assigned alternate. There was no objection to her suggestion.

Ms. Seid indicated that to be grammatically correct, review should be reviewing, and to add the words and performing before periodic patient re-evaluations in the first sentence of the proposed language.

The task force concurred with striking periodic supervision and observation of the assigned patient care and interventions rendered by the physical therapist assistant no less than every sixth visit or 30 days of episodes of care by the physical therapist assistant, which ever occurs sooner.

Mr. Hartzell suggested placing a period at the end of the sentence ending with policy, deleting the next sentence in its entirety and beginning the subsequent sentence with Oversight.

(e) Mr. Hartzell and Ms. Seid questioned why “not consistent” was stricken from the text. Mr. Hartzell suggested adding the word “not” in front of the word within to indicate that the physical therapist assistant shall notify the supervising physical therapist if the patient is not within the planned progress or treatment goals.

Mr. Hartzell stated that the significant difference between current regulatory language and the proposed is that existing language requires the physical therapist assistant to stop treatment and the physical therapist to do a reevaluation, if there isn’t a change in the patient’s condition, the proposed language isn’t addressing that. The consensus of the task force is that they don’t want treatment to stop and what they want is the physical therapist assistant to communicate with the therapist. Mr. Kaye raised the concern that if the physical therapist assistant is going to change the treatment plan based on a verbal order by the physical therapist, it should be
cosigned by the physical therapist in the patient record. Ms. Seid realized there was no requirement of the physical therapist assistant to document in the record that they notified the physical therapist of the change in the patient’s condition and the conclusion or result of the communication. Ms. Freedman suggested including language that states, the decision shall be recorded in the patient’s record. Co signature is required within 7 days was agreed upon by the task force.

Ms. Krueger questioned why the subcommittee deleted the requirement to have regularly scheduled case conferencing currently required in subsection (g) of existing text. Mr. Linberger replied that it was covered in subsection (d) of the proposed text.

The task force proposed to specify that “any report advising of the patient’s progress within the plan of care, other than to the physical therapist of record, may not be done by a physical therapist assistant.

Mr. Hartzell raised a concern with physical therapists allowing physical therapist assistants to identify themselves as the “therapist”. He suggested a prohibition be included in the regulation. Ms. Krueger suggested Mr. Hartzell and Ms. Freedman consider the concept and develop text for consideration by the board.

Motion by Mr. Kaye, second by Mr. Turner to present the board with the proposed revisions to the physical therapist assistant supervision regulations. as amended by the task force. Vote: 8-0. Motion carried.

5. Discussion Regarding Patient Record Requirements

Mr. Hartzell explained that this was a task which was suggested be assigned to this task force at the conclusion of its initial charge. He commended the task force for completing its charge so timely and that he was going to recommend the board conduct open forums to solicit comments from the public on the language proposed by the task force. He further advised that he was uncertain whether the board would elect to modify the text based on comments received or to send the comments back to the task force which would indicate that the task force would not have completed its task.

6. Agenda Items for Next Meeting

Ms. Freedman will determine if current statute authorizes a physical therapist assistant to supervise a physical therapy aide.

Ms. Krueger identified the need for regulations to define wellness as included in the physical therapy scope of practice.

Ms. Krueger assigned a subcommittee of herself, Mr. Dagostino, Mr. Kaye and Ms. Erickson to view the statute and determine if wellness regulations are necessary. She appointed Ms. Seid, Mr. Lingberger, Ms. Kimura, Ms. Rath and Mr. Turner to define signature requirements in regulation. Ms. Krueger explained the regulations do not define how a signature is to be recorded in the patient record and whether initials can be used to define license status.

Ms. Krueger announced that the task force is not yet disbanded and that the task force members can expect to meet at least once more sometime in February or March of 2009.
7. **Public Comment**

There was no public comment.

8. **Adjournment**

Ms. Krueger adjourned the meeting at 2:52 p.m.