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BOARD OF PHYSICAL THERAPY

7570 Norman Rockwell Lane, Suite 230
Las Vegas, NV 89143

BOARD MEETING MINUTES

January 27, 2018

Item 1 - Call to Order/Roll call to determine the presence of a quorum. The meeting was called to order at 9:40 a.m. by Chairman Smith.

Board Members in attendance: Sherise R. Smith, PT, MSPT, CBIS, Chairman; Tina Baum, PT, DPT, WCS, ATC, CLT; Brian Fearnley, PT, MPT, Vice Chairman; Jim McKivigan, DC, PT, MPA, MA, Secretary/Treasurer.

Staff in attendance: Charles Harvey, Executive Director; Muriel Morin-Mendes, Licensing Coordinator; Chelsea Venturino, Administrative Assistant; Chelsea Wilson, Administrative Assistant; Sarah Bradley, Senior Deputy Attorney General; Neena Laxalt, Lobbyist.

Item 2 - Pledge of Allegiance

Item 3 - Public Comment

A. Rae-Anne Daimaoji

Comment and questions on the utilization of an unlicensed person to assist with the treatment of a patient. Does the regulation allow technicians to be utilized as an extra set of hands for the safety of a patient? Can a technician assist a physical therapy assistant with tasks such as the heavy lifting of a patient from a wheelchair when the physical therapist is not in the room? Would this constitute supervision of a technician by the physical therapy assistant? My opinion is that the technician should not be the sole provider of treatment for the patient. It would be helpful to make a distinction about whether they are an extra set of hands or if they require supervision, because they are performing the treatment as the sole provider.

B. Ellen Ferrara, PTA

Comment and questions on NRS 640.016 and the definition of "immediate supervision." Does a PT need to be available in the same room or in the same building? Will there be clarification on exactly what a tech can do?

Item 4 - Review, Discuss, Amend and Approve Board Meeting Minutes (For Discussion and Possible Action)

A. December 11, 2017

Motion: Motion to approve the minutes from December 11, 2017: James McKivigan

Second: Sherise Smith

Motion Passes Unanimously

Item 5 - Investigation Department (For Discussion and Possible Action)

A. Status of outstanding cases

B. Dismissed Cases

Discussion on active/dismissed cases, cases being planned for hearings at upcoming board meetings, and the need for training PT investigators. AG Bradley will discuss the hearing process at the February board meeting.

Motion: Motion to approve the dismissed cases outlined in Item B: Tina Baum

Second: James McKivigan

Motion Passes Unanimously

Item 6 - Ratification of New Licensees (For Discussion and Possible Action)

Motion: Motion to ratify the new licensees as presented

Second: Brian Fearnley

Motion Passes Unanimously

Item 7 - Advisory Committee on Dry Needling Update (For Discussion and Possible Action)

A. Discuss Advisory Committee, mandate and focus

B. Discuss and possibly appoint members to the Advisory Committee on Dry Needling. The following members have been suggested: Sherise Smith, PT, MSPT, CBIS; Tina Baum, PT, DPT, MSPT, WCS, ATC, CLT; Jenelle Lauchman, PT; Mary-Ann Brown, MSNRN; Three Licensed OMD, to be designated by Oriental Medicine Board.

Discussion on Advisory Committee on Dry Needling membership, meeting location, date & time, mission and purpose.

Motion: Motion by Sherise Smith to adopt the purpose of the advisory committee as “The Board’s objective is that the committee further identify the parameters and requirements so that dry needling can be done by physical therapists in a competent and safe manner within their scope of practice”, and that we appoint the following members to the Advisory Committee on Dry Needling: Sherise Smith as Chairman of the Nevada Physical Therapy Board; Tina Baum as a representative of the Board; Jenelle Lauchman, Physical Therapist; Mary-Anne Brown, RN; Dr. Katania Taylor, OMD; Dr. Sharon Roth, OMD; Dr. Maggie Tracey, OMD.

Second: James McKivigan
Motion Passes Unanimously

Item 8 - Advisory Committee on Continuing Competency (**For Discussion and Possible Action**)

- A. Open position recruitment for Advisory Committee on Continuing Competency
- B. Consideration of Applicants
 - i. Tiffany Barrett
 - ii. Beren M. Shah

Discussion on the Advisory Committee on Continuing Competency membership, terms, distribution of members based on geography and areas of practice, recruitment process and impact of PROCERT on the ACCC.

Motion: Motion to appoint Tiffany Barrett and Beren Shah to the Advisory Committee: Tina Baum

Second: James McKivigan
Motion Passes Unanimously

Item 9 - FSBPT Update (**For Discussion and Possible Action**)

- A. Election of FSBPT 2018 Delegates and Funded Administrator
- B. FSBPT Comment Summary and Candidate Satisfaction Survey Report

Discussion on the June 2018 regulatory training for new Board members and administrators, appointment of a 2018 delegate and alternate delegate for the July Leadership Issues Forum (LIF) meeting in July 2018, and voting member for the October 2018 Annual Meeting and Delegate Assembly.

Motion: Motion to approve Sherise Smith as the delegate, Brian Fearnley as the alternate delegate, and Charles Harvey to attend as Administrator.

Second: James McKivigan
Motion Passes Unanimously

Item 10 - Board Operations and Updates (**For Discussion and Possible Action**)

- A. Office Operations/Personnel Update (Office staff, Bookkeeping/Payroll, Inspectors, Outside Legal Services)
- B. InLumon—Software Database
- C. Sunset Committee
- D. Discussion on personnel and pending contracts for bookkeeping, outside legal and inspector/investigators, InLumon licensing software, Sunset Committee and the requirement for the Nevada Physical Therapy Board to appear in April 2018.
- E. **No Action Required**

Item 12 - Public Comment

- A. Susan Priestman, PT

Comment and questions on NAC 640.610b Records Confidentiality (draft). This regulation concerns the timeliness of documentation, and I support the fact that therapist should memorialize their document quickly because I think that adds to

the effectiveness and accuracy of the record, conveying what is true with patients. However, there are times when therapists actually have reason to extend that timeframe, and that's when we are doing a discontinuation. A therapist in outpatient might trial a patient on a home program and not close the medical record. They may rely on the patient to reschedule to come back and see them if they are having difficulty with that home program within two weeks. If the patient does not re-contact the therapist to say that they are doing fine or they are not doing fine and want to come back in for an appointment, then we should expect that the therapist is going to close the record. However, by doing so, and entering a discharge summary two weeks after the last time they have seen the patient, they are actually violating the current statute as I see it. If the Board considers adding discharge summary language, can we modify that language to call it a discontinuation of care? Chairman Smith stated that the Board will consider the following clarification of treatment intervention to number 6. "A licensee also shall document any material communication in a patient's record within the third business day. For the purpose of this section, material communication means communication with a patient regarding his/her care, including but not limited to telephone call, facsimile, text message, electronic mail or any form of communication with the patient."

A. Cheryl Koizumi, PTA

Comment and questions regarding case involving a PT tech documenting for a PT. Is it ok and acceptable for a physical therapist assistant to document a change in a plan of care per consult with PT? Is it ok for a PTA to document DC recommendations revised per consult with PT? For example, if you have an initial evaluation that has a recommendation for discharge of acute rehab and something changes along the way, and you want to change it to home with family assist. Member Fearnley stated that any change in plan of care has to be reviewed by the PT. The PTA can write the note and the PT has to review it, but doesn't have to cosign that day.

B. Ellen Ferrara

Comment regarding the definition of "on-sight". Seeking clarification on immediate supervision as defined in NRS 640.016. Therapy techs may assist physical therapy or physical therapy assistant under the immediate supervision of a physical therapist in performing a physical therapy service. Is the Board saying that a tech can work with a PT and a PTA if the PT is in the same room? This could be interpreted as a grey area, as it could be in acute care.

C. Nicole Lang, PT

Comment on question raised on association's listserv by a home health PT. NAC 640.595 says that any aide or other unlicensed person who performs treatments will be considered a PT tech. Medicare terms say that if the only service they are receiving is PT, then the PT should be able to supervise a CNA or home health aide. Ms. Lang raised the concern that it wasn't clear in the

nursing practice act who was supervising the CNA prior to this Medicare change, and why that person who was supervising them before, wouldn't be supervising them now. It was clarified that a PT is not able to supervise a CNA in the home health setting per statute.

Meeting recessed at 11:50 a.m.

Meeting reconvened at 12:15 a.m.

Item 11 - Review and Discussion of Nevada Administrative Code (NAC) changes in preparation for the March 2, 2018 NAC Workshop (**For Discussion and Possible Action**)

Review and discussion on various proposed changes to NAC 640, and scheduling of next board meeting for February 7, 2018.

Item 12 - Public Comment: None

Meeting adjourned at 5:26 pm

Meeting reconvened at 5:26 pm

Item 11 - Review and Discussion of Nevada Administrative Code (NAC) changes in preparation for the March 2, 2018 NAC Workshop (**For Discussion and Possible Action**)

Motion: Motion to approve draft of NAC 640 changes – James McKivigan

Second: Brian Fearnley

Motion Passes Unanimously

Item 13 - **Adjournment.** The meeting was adjourned by Chairperson Smith at 5:27 pm.