

NEVADA PHYSICAL THERAPY BOARD CONTINUING COMPETENCE MODEL

NEVADA MINIMUM ANNUAL REQUIREMENT 15 Continuing Competence Units (CCUs)

Documentation of All CCU activities MUST be uploaded by licensees during license renewal.

There are several options for licensees to meet the minimum requirement. Please see the chart below, and the descriptions that follow, for details on how to successfully meet the minimum standards in each category. Each description also includes a reference to the application/steps required to demonstrate successful completion of each activity.

Continuing Competency Requirement **effective January 1, 2025**, includes **1 CCU** activity concerning **Cultural, Access, and Ethical Standards (DEI)** within the year immediately preceding their license expiration. This credit will contribute toward the overall required 15 CCUs, rather than in addition to.

Per NAC 640.400(2), the Board will not approve as training for continuing education, experience acquired in fields that it determines are unrelated to the practice of physical therapy

****NOTE: licensees can complete as many CCUs ABOVE the minimum requirement, but at this time no additional credit will be given and CCUs cannot be carried over to any additional licensing period****

Continuing Competency Units	Option A	Option B	Option C
1. Certified Activities	15 CCUs		≥7 CCUs
2. Advanced Competency Activities		15 CCUs	
3. Professional Activities			≤8 CCUs

Definition of Continuing Competence

Continuing competence in physical therapy is the lifelong process of maintaining and formally documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan, and subsequent reassessment. Continuing competence is intended to develop and increase knowledge, skills, and professional performance while trying to prevent professional obsolescence by staying current with the new developments in theory and practice and preventing skill and knowledge deterioration.

Definition of Evidence-Based Practice:

Evidence-based practice is the integration of best research evidence with clinical expertise and patient values. This definition states that clinical decision making should be based on three components:

1. Best Research Evidence
2. Clinical Expertise
3. Patient Values and Preferences

(As defined by Sakett DL, Straus SE, Richardson WS, et al. Evidence-based medicine: how to practice and teach EBM. 2nd ed. Edinburgh: Churchill Livingstone, 2000 as found in the Internet Journal of Allied Health Sciences and Practice, Vol. 3, No. 4)

NEVADA PHYSICAL THERAPY BOARD CONTINUING COMPETENCY UNIT DEFINITIONS

CERTIFIED ACTIVITIES:

These activities are **submitted with payment** for review by the Nevada Physical Therapy Board (NPTB) Advisory Committee on Continuing Competency (ACCC). The ACCC certification process will determine if the activity is approved, and if so, the number of CCUs awarded. Licensees can accumulate a total of 15 CCUs from this category to complete the minimum requirement unless otherwise specified.

Certified Activities
▪ Conferences: As awarded by the ACCC
▪ Individual Continuing Education Courses: As awarded by the ACCC
▪ Non-Clinical Continuing Education Courses: As awarded by the ACCC*

Licensees can accumulate a **MAXIMUM of 8 CCUs from the non-clinical category.*

ADVANCED COMPETENCY ACTIVITIES:

*These activities are advanced coursework or specialization in a sub-specialty that demonstrates ongoing, contemporary learning **in the field of Physical Therapy**. Licensees can accumulate a total of 15 CCUs from this category to complete the minimum requirement.*

Advanced Competency Activities
▪ Passing score on the Certified Specialist Examination through ABPTS: 15 CCUs**
▪ Participation in an Accredited Residency: 15 CCUs
▪ Participation in an Accredited Fellowship: 15 CCUs

***Credit given for the licensing year during which participation in the activity is > 6 months*

PROFESSIONAL ACTIVITIES:

*These are activities that the NPTB has deemed appropriate to receive CCUs without the need for ACCC review. Licensees can accumulate a **MAXIMUM of 8 CCUs from this category** towards completion of the minimum requirement. **(You must complete an additional 7 CCUs from either of the other two categories to meet the minimum yearly requirement)***

Professional Activities		
▪ In-Person Attendance at NPTB/APTA NV meetings	1 CCU per meeting	(max 4 CCUs/year)
▪ NPTB/APTA NV Board/FSBPT/Committee work	5 hours for 1 CCU	(max 4 CCUs/year)
▪ College Coursework	1 credit for 1 CCU	(max 8 CCUs/year)
▪ In-service (attending an in-service)	1 hour for 1 CCU	(max 4 CCUs/year)
▪ Pro-bono PT service	2+ hrs/day of service for 1 CCU	(max 4 CCUs/year)
▪ Primary Clinical Instructor	40 hrs of CI time for 1 CCU	(max 4 CCUs/student)
▪ Peer-Reviewed Publication	1 article for 8 CCUs	(max 8 CCUs/year)
▪ Primary Instructor of a Continuing Competency Course	1 Hour for 1 CCU	(max 8 CCUs/for the first year the course is taught)
▪ Mentorship	20 hrs of Mentorship for 1 CCU	(max 4 CCUs/year)
▪ Professional Advocacy	2 hrs of Advocacy for 1 CCU	(max 8 CCUs/year)

NEVADA PHYSICAL THERAPY BOARD CONTINUING COMPETENCE DOCUMENTATION TABLE

CCU Documentation must be submitted with license renewal verifying 15 CCU/yr.

NPTB CCU Verification Form* is also required for Advanced Competency and Professional Activities.

NOTE: When a signature is required, the signature must be from the officer of the organization. For example, the Residency Program is verified by the program director.

CCU Documentation Table:

<u>CCU CATEGORY</u>	<u>Description of Documentation required for renewal</u>
Certified Activities	
Conferences	Certificate of completion for the activity that is a NPTB approved continuing education course or conference.
Individual Continuing Education Courses	Course Certificate with the correct dates, CCUs listed, and name.
Non-Clinical Continuing Education Courses	Course Certificate with the correct dates, CCU listed, and name.
Advanced Competency	
Certified Specialist Examination through ABPTS	Passing Score demonstrated by the formal ABPTS letter and NPTB CCU verification form
Accredited Residency	Signed proof of participation on NPTB CCU Verification Form*
Accredited Fellowship	Signed proof of participation on NPTB CCU Verification Form*
Professional Activities	
In-person attendance at NPTB/APTA NV meetings	Certificate or Signed proof of attendance on NPTB CCU Verification Form*
NPTB/APTA NV/ FSBPT Board/Committee work:	Submit signed proof of service on NPTB CCU Verification Form*
College Coursework	Copy of course syllabus & transcript submitted with NPTB CCU verification form* Contemporary learning in the field of Physical Therapy
In-service (attending an in-service)	Certificate or Signed proof of attendance on NPTB CCU Verification Form*
Pro-Bono PT Service	Certificate or Signed proof of service on NPTB CCU Verification Form*
Primary Clinical Instructor	Certificate or Signed proof of service on NPTB CCU Verification Form*
Peer-Reviewed Publication	Active participation may include being the primary author, co-author, investigator, editor, etc. Copy of the published product submitted with NPTB CCU verification form*
Primary Instructor of Continuing Competency Course	Certificate or Signed proof of service on NPTB CCU Verification Form*
Mentorship	Complete the Mentorship Log in its entirety as directed on the NPTB CCU Verification Form*
Professional Advocacy	Complete the Advocacy Log in its entirety as directed on the NPTB CCU Verification Form*

*Nevada Physical Therapy Board (NPTB) Continuing Competence Verification Form found on the website

NEVADA PHYSICAL THERAPY BOARD CONTINUING COMPETENCE VERIFICATION FORM

FOR ADVANCED COMPETENCY AND/OR PROFESSIONAL ACTIVITIES ONLY

**Please complete and submit this page along with the required documentation*

Licensee Name: _____ Email: _____

Phone: _____

Advanced Competency Type:

- ABPTS Exam (See 1)
- Accredited Residency (See 2)

- In-Service (See 4)
- Accredited Fellowship (See 2)

Professional Activity Type:

- APTA NV /NPTB/ FSBPT (See 5)
- College Coursework (See 4)
- Primary Clinical Instructor (See 4)
- Con Ed Course Instructor (See 4)

- APTA NV/ FSBPT/ NPTB Board/Committee Work (See 5)
- Pro-Bono PT Service (See 3)
- Peer Reviewed Publication (See 6)
- Mentorship (See 7)
- Professional Advocacy (See 8)

Complete the following details as they apply to the activity type, please be as thorough as possible. For any questions/concerns, please contact the NPTB for clarification prior to submission.

1. ABPTS Exam

Exam Specialty: _____

Exam date: _____

2. Residency/ Fellowship

Program Name: _____

Contact Information:

Program Director Name: _____

Email: _____ Phone: _____

3. For Pro-Bono PT Service

Contact information:

Program Director Name: _____

Email: _____ Phone: _____

Relevant Dates/Times: _____

Event Name: _____

***SIGNATURES REQUESTED BELOW ARE FOR ALL ACTIVITIES**

* Required Signature _____	*Licensee Signature _____
Activity Type (#) _____ Date _____	Activity Type (#) _____ Date _____

Please provide a brief description of how this activity is related to physical therapy.

4. In-Service/Organization/Program/School Name/Course Instructor (circle one)

Program/Company/School Name: _____

Please provide a brief description of how this activity is related to physical therapy.

Contact Information:

Program Director Name: _____

Email: _____ Phone: _____

Relevant Dates/Times: _____

5. For APTA NV/NVPTB Board/Committee Work (circle one)

Relevant Dates/Times Duration (Minutes or Hours):

Please provide a brief description of the activity or work:

6. For Peer-Reviewed Publication

Licensee role in writing/publication process and Journal Article Title:

***SIGNATURES REQUESTED BELOW ARE FOR ALL ACTIVITIES**

* Required Signature _____	*Licensee Signature _____
Activity Type (#) _____ Date _____	Activity Type (#) _____ Date _____

7. Mentorship Log

Please complete the Mentorship log Below

Mentor Name & License #: _____ Email: _____

Mentee Name	Date	Description of Mentorship Opportunity:	Duration (Minutes or Hours)	Mentee Signature

Total Time (hours): _____ CCUs (1 per 20hr Mentorship): _____

Mentor Signature: _____ Date: _____

NEVADA PHYSICAL THERAPY BOARD ACCC REVIEW GUIDELINES

FOR APPROVAL OF **CERTIFIED ACTIVITIES** ONLY

1. All submissions must be submitted through CE Broker. Email D.L.IRBY@GOVMAIL.STATE.NV.US for any questions.
2. **Course application cut-off is 2 weeks Prior to the next scheduled meeting, courses submitted after the period will be placed on the agenda for the following meeting.**
3. The following information must be included **with the application** and **placed in order** to streamline course review and processing.
 - a. Course Description, Goals, and Objectives
 - b. Hour-by-Hour Timeline (**for ALL courses, regardless of length** – please identify where breaks/meals are, these do not count when determining CCUs).
 - i. For courses that are held on numerous days and have numerous instructors, please send a condensed comprehensive timeline followed by any other pertinent details to simplify the timeline/CCU review.
 - ii. Be sure to include a precalculated CCU total based on the guidelines set forth by the NPTB (See NPTB website for calculator)
 - c. Brief Biography of Instructor, no more than 500 words OR brief 2-page CV.
 - d. Examination that accurately reflects the content and rigor of the course (required for any course that is not **ENTIRELY** on-site).
 - e. Provide at least 5 references within the last 5 years reflecting the most current evidence-based research utilized to compile the course.
 - f. Copy of the Certificate of Completion (with signature) - *The certificate must contain the name of the provider and a descriptive/accurate course title (the name of the provider and course title should match what is on the application above).*
4. Do **NOT** submit course/instructor evaluations, brochures, activity planners, etc. These will not be taken into consideration for CCU determination.
5. The CCUs requested will not necessarily be the CCUs approved. Approval is based on the actual time and content of the course. The course will be reviewed according to the statute and regulations of the NPTB as well as the review guidelines that are attached below titled "ACCC REVIEW GUIDELINES".
6. Approval for fewer units than the amount requested will not result in a refund of the fee difference. (in rare circumstances, if more units are allocated than requested, payment of the full fee – if there was an increase – will be required prior to course approval).
7. In certain instances, where the ACCC identifies an error or issue of clarity with submission rules, partial refunds will be approved on a case-by-case basis by Board staff.
8. Interested parties can view the agendas for the ACCC on the NPTB website.
9. The ACCC meets as needed, typically this occurs once a month. Once the ACCC has completed its review, an email will be sent to notify the applicant of the outcome.
10. Denied Courses (**initial application fee will be forfeited**): Will receive a notification via email with a reason for denial. These courses can be resubmitted for review with an updated/corrected application and a **new application fee**.
11. Applicants/Licensees may visit the NPTB's website for a complete listing of approved courses.

NEVADA PHYSICAL THERAPY BOARD ACC REVIEW GUIDELINES

CERTIFIED ACTIVITIES – ACCC COMMITTEE REVIEW GUIDELINES

Clinical Physical Therapy Practice (A)

Clinical physical therapy practice implies that the continuing competence course must meet the criteria in the categories listed below.

1. The course must address at least one topic that covers an aspect of clinical practice directly related to patient care along the continuum of active pathology, impairment, functional limitations, and disability.
 - a. Core Knowledge
 - b. Examination and Evaluation
 - c. Prognosis
 - d. Diagnosis
 - e. Clinical Decision Making
 - f. Clinical Guidelines
 - g. Evidence-Based Practice (as defined above)
 - h. Interventions
 - i. Wellness, Health Promotion, and Fitness
 - j. Clinical Outcome Measures
 - k. Psychosocial issues (including but not limited to mental health, ethics, gender issues, cultural issues including spirituality and racial issues; **as they relate to the practice of physical therapy**)
 - l. Injury Risk Reduction and Prevention
 - m. Technology (directly related to patient care)
 - n. Any of the nine specialty exams through the A.B.P.T.S.
2. The course must be taught by one individual or a team of individuals who hold a comparable level of competence as a physical therapist and/or who have:
 - a. Exhibited experience in the topic^^
 - b. Demonstrated expertise in the topic^^
3. The course must be sufficiently rigorous to be contemporary and beyond/above entry-level physical therapist or physical therapist assistant practice in any areas of physical therapy practice including:
 - a. Hospital (e.g. wound care, critical care, intensive care, acute care, and subacute care settings)
 - b. Outpatient clinics
 - c. Rehabilitation settings
 - d. Subacute, extended care, skilled nursing, or hospice facilities
 - e. Home Health
 - f. School Based
 - g. Industrial, workplace, or other corporate/occupational environments
 - h. Athletic, Fitness, or sports training facilities
 - i. Mobile/Concierge settings
 - j. Telehealth
4. If the course is fully self-paced (recorded content with or without reading component), or a hybrid course (combination of live webinar and self-paced portions) with self-paced portions then a sufficiently rigorous post-test must be administered **AND** reflect/match the stated objectives

NEVADA PHYSICAL THERAPY BOARD ACC REVIEW GUIDELINES

Non-Clinical Physical Therapy Practice (B)

1. The course must address at least one topic or an aspect of physical therapy practice.
 - a. Healthcare Policy and Administration
 - b. Interdisciplinary/Intradisciplinary Healthcare
 - c. Physical Therapy Documentation
 - d. Physical Therapy Insurance and Reimbursement
 - e. Physical Therapy Research Methods/Procedures
 - f. Physical Therapy Case Management
 - g. Medicolegal Pertaining to Physical Therapy
 - h. Patient Satisfaction
 - i. Language (directly related to physical therapy practice)
 - j. Professional Development/Professionalism (including leadership, communication, conflict resolution)
2. Licensees required to complete 1CCU regarding Cultural, Access, and Ethical Standards (DEI) before each renewal period. Including Courses related to:
 - a. Ethics
 - b. Access
 - c. Bias (Implicit/Explicit)
 - d. Gender/ Sexuality
 - e. Culture
 - f. Race
 - g. Spiritual Beliefs
 - h. Ageism
 - i. Bias related to ICF model
 - j. Employer provided Cultural Competency (DEI) Courses
3. Veterinary Rehabilitation Physical Therapists have been approved up to 5 CCU from vendors approved by Veterinary Board. Approved Providers can be found here: <https://nvvetboard.nv.gov/FAQ/> under "What is approved for CE in Nevada?"

Denials- Courses not likely to receive approval (C)

1. Courses that are:
 - a. Self-paced Reading of Textbooks/Chapters of Textbooks/Excerpts of Textbooks/Copies or Reprints of Textbooks or peer-reviewed journal articles with a post-test.
 - b. Beyond the scope of physical therapy practice
 - c. Clearly under the purview of another discipline
 - d. Below entry-level physical therapist or physical therapist assistant clinical practice
 - e. General Business Practice Management/Improvement (including marketing strategies, expanding clinical practice, revenue generation)
 - f. About issues related to an area of clinical practice for which the scientific evidence has clearly invalidated the topic
 - g. About a practice that is not accepted by contemporaneously practicing physical therapists

- h. About general self-improvement (e.g., self-help courses, psychosocial content not relating to the practice of healthcare)
- i. Employment law
- j. Language courses unrelated to physical therapy practice
- k. University coursework is unrelated to healthcare
- l. Computer competence courses (unrelated to PT practice or telehealth)
- m. Provider submitted Animal Physical Therapy courses are not approved through the Nevada Physical Therapy Board.
- n. Training faculty
- o. Insufficient documentation after 30 a day grace period to re-submit (*Approved with Condition Courses only*)
- p. Outdated Material(s)
- q. Self-paced course consisting of only reading material (no video content)
- r. Lack of instructor expertise or experience in content area

[Approved with Condition- Courses that do not provide sufficient documentation \(D\)](#)

Courses that do not provide sufficient documentation will receive an email, indicating that one or more of the following components are missing and need to be submitted in order for the course to be approved. If the request for additional documentation is not completed and received within 30 days from the date of the letter, then the course will be denied based on insufficient documentation see subsection (C.1.o.). Sufficient documentation request may include one or more of the following conditions:

- a. Course overview of objectives
- b. Hour-by-hour timeline (for all courses, regardless of length)
 - If breaks/meals are not identified
- c. Brief Biography of Instructor demonstrating knowledge/ experience in content area
- d. No post-test for self-paced or virtual courses
- e. No references
- f. Course certificate (with appropriate course title/instructor/CCUs that match the application)
- g. Psychosocial issues content that does not relate to the practice of healthcare
- h. Delivery method not supported (self-paced reading-only course) with the recommendation to change the delivery method for approval

^Courses that are tangential or indirectly related to clinical practice will be reviewed and evaluated on a case-by-case basis.

^^Experience and expertise will be reviewed on a case-by-case basis

NEVADA PHYSICAL THERAPY BOARD COURSE APPLICATION INSTRUCTIONS

Please contact D.L.IRBY@GOVMAIL.STATE.NV.US for any continuing competence-related questions

Provided information may be subject to change at any time

Providers

1. Visit <https://cebroker.com/providers>
2. Select Nevada under the "Select regulating entity button or add Nevada's PT Board to your account if you already have an existing account"
 3. Click the "Get Started" Button
 4. Click the "Select a board" Button
5. Enter your company and contact information and click continue
 6. Once logged into your account click "Courses"
 7. Then click "New Course to start a course application"
 8. Provide any needed information and documentation

*If you have multiple contacts that submit courses for your company you must give them "Administrator" access.

Licensees

1. Visit <https://cebroker.com/nv/account/basic/> to create an account or visit <https://launchpad.cebroker.com/login> to log in
2. Click "Report CE" to post your Continuing Education activities
3. For **certified activities** you may report them by clicking "**Activities approved by the Nevada Physical Therapy Board**"
4. For your **Cultural, Access, and Ethical Standards (DEI) requirement** click **Diversity, Equity, Inclusion or Social Justice**.
5. For **Advanced Competency activities** click "Additional Options"
6. To submit a course that has not been approved by the state of Nevada click "Request CCU Credit for Non-Certified Activities"
7. Fill out and submit any required information/documentation (Some required documents will be located on our website and on CE Broker)