

North Carolina Board of Physical Therapy Examiners
MINUTES
March 8, 2023
8300 Health Park, Conference Center
Raleigh, North Carolina 27615

Members Present:

C. David Edwards, PT, Chair
Leslie P. Kesler, PT, Secretary/Treasurer
Teresa Hale, PT
Rosa Maria Gonzalez, BSN, RN, Public Member
Stephanie Bernard, PTA
Angela Diaz, PT (arrived 8:56 a.m.)
Megan Wentz, PTA (remote attendance)

Members Absent:

Sara Rooker, MD

Staff Present:

Kathy Arney, PT, Executive Director (ED)
Paula Brooks, Office Administrator
David Nall, IT Systems Administrator
Ellen Roeber, Deputy Director
Joyce Tynes, Finance Manager/Licensing Manager

David C. Gadd, Board Attorney

The format for the Minutes is as follows: *V-# Summary of Motion (Board Member who introduced motion)*

A. Preliminary Matters

The Chair recognized the two new Board Members, Sara L. Rooker, MD (unable to attend this meeting due to family emergency) and Angela Diaz, PT, attended her first Board meeting in 2023.

B. Meeting Called to Order by C. David Edwards, Board Chair for NCBPTE at 8:47 a.m. March 8, 2023. The meeting was conducted in-person and open to the public. The meeting was noticed in the Board office, on its website, and NC Secretary of State website as required by law. There were no requests for the meeting agenda prior to the meeting. The Chair conducted a roll call; members were in attendance as noted above; a quorum was present. No members of the public were in attendance.

Conflict of Interest Reminder by the Chair

Board Chair, Edwards, reminded members of their duty to avoid conflicts of interest and appearances of conflicts of interest, per NCGS 138A-15. In addition, David Edwards, asked if there were any known conflicts of interest or appearance of conflicts of interest with respect to any matters that were to be brought before the Board today as required by NC GS 138A-15. No Board member indicated conflicts of interest with the business before the Board today.

C. Approval of the Minutes

V-001-'23 Passed Minutes December 7, 2022 [Attachment I]

Motion to approve draft Minutes of the Board Meeting held on December 7, 2022. (*Gonzalez*)

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzales
Members voting in the negative:	None

D. Applications for Review

V-002-'23 Salvia J. – PTA Applicant by Endorsement – disciplinary action by another licensure Board. (*Hale*)

The Board adopted a motion to present a consent order to the applicant with similar conditions as the Kentucky Consent Order dated November 17, 2023, pending documentation of completed conditions and additional information from the Applicant. The agreement will include a stipulation the applicant provide the NC Employer with a disclosure statement and that they are aware of her discipline in KY and agree to serve as the supervisor for her clinical work. The NC Board Staff – Executive Director was delegated the authority to assist the Board attorney in communicating with the licensee and working with the Board attorney to determine the agreement similar to the Kentucky order and any required conditions in North Carolina.

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

V-003-'23 Valentini, T. – FEPT applicant by Exam – requires Board approval to be eligible to take the NPTE and be eligible for licensure in NC. Motion was approved for the applicant to be eligible for the exam and eligible licensure pending a passing score (*Hale*)

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

V-004-'23 Patel – FEPT applicant by Exam – Education not substantially equivalent and ED has communicated with Applicant regarding deficiencies and recommendations to address.

Motion made to make application eligible for NPTE once his educational deficiencies have been met and eligible for licensure pending passing the NPTE and filing a completed application. *(Kesler)*

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

E. Closed Session

V-005-'23 Passed – Motion to go into Closed Session

A motion to go into Closed Session was made at 8:40 am, in accordance with GS 143-318.11 (a) (1) to engage in privileged communications with the Board’s counsel concerning Closed Session Minutes of prior Board Meetings. *(Hale)*

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

V-006-'23 Passed - Return to Open Session

Motion to return to Open Session at approximately 8:56 a.m. *(Gonzalez)*

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

Approval of actions during the Closed Session

V-007-'23 Passed – Motion to approve Minutes from the Closed Session of the December 7, 2022, as written. *(Kesler)*

Members voting in the affirmative:	Edwards, Kesler, Hale, Diaz Wentz, Bernard, Gonzalez
Members voting in the negative:	None

F. Responses from ED/DD to questions addressed at the previous Board Meeting [Attachments II-III]

- Discharge from Surgi-center
- PT’s performance of Independent Medical Examinations (IME)

G. Scope of Practice Questions for Board Consideration/Public Protection Task Force (PPTF) [Attachments IV- VIII]

- Public Protection Task Force (PPTF) – David Edwards, Chair of the PPTF updated the Board on the meeting minutes from the PPTF meeting on February 22, 2023.

- **ECG Interpretation** – Deputy Director (DD) discussed scope of practice response to licensee question regarding “EKG” interpretation. After an update from the DD regarding research and other sources consulted in creating the response on ECGs, the board accepted the response as discussed. The ED/DD will respond to the licensee. The DD will up update the ECG response to include the PTA role and present it at a future meeting for Board consideration.

- APTA Entry – Level PA Competencies in Cardiovascular & Pulmonary PT
- Proposed Response for consideration by the Board – ECG

- **V-008-'23 CAPTE candidacy status vs. accredited status** – approving applicants for licensure. After review of the Department of Education federal rule and CAPTE definition changes, the ED recommended approval of applicants with completed applications graduated from CAPTE candidacy status PT/PTA programs be licensed in NC. *(Kelser)*

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

- **V-009-'23 Position Statement #6 revision re: Pulse Oximetry - Motion made to approve revised position statement #6** *(Gonzalez)*

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

- **V-010-'23 Response to questions concerning PT Assessment for PTA Educators posed by J. Cooper, PT**

After an update from the DD regarding research and other sources consulted in creating the response on PTA “assessment”, the board approved a motion to accept the proposed response as written. The ED/DD will respond to the licensee.

Motion approved to respond to Mr. Cooper *(Kelser)*

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

- **V-011-'23 Response to questions posed regarding Pediatric Feeding and physical therapy scope of practice**

After an update from the DD regarding research and other sources consulted in creating the response Motion made to accept a proposed response Pediatric feeding therapy and treatment tongue and tie related issues. DD will update response to include PTA’s – *(Hale)*

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

H. Attorney's Report- including potential legislation and regulatory education.

- Legislative Update
 - Federal Legislation – HR 7939 enacted- Portability of Professional Licenses of Members of the Uniformed Services and Their Spouses. The Board attorney reviewed the statute which provides the Board must allow a practice privilege for servicemembers and spouses who relocate in the State pursuant to military orders. Discussion was had regarding internal processes to comply with the new law.
- 1:00 pm Regulatory Training – Joe Jordan, Executive Director NC PHP
 - Mr. Jordan provided a presentation on NCPHP involvement with occupational licensing Boards and operations related to impaired licensees and providing resources for mental health and related situations to the Board of PT Examiners. Board members asked questions and were provided detailed responses.

I. Executive Director's (ED) Update – [Attachments IX-XI]

The Executive Director provided verbal updates including the following:

- Current Board Member Contact Information list – ED asked Board Members to provide any necessary updates to staff.
- Current Licensees Count – ED reviewed the report in detailed for comparison of same dates in 2022 vs 2023.
 - Renewal 2023 – Summary - ED reported 96.5% renewal of licenses for 2023
 - Initial Revivals – ED reported the largest initial revival period (1 month post Feb 1) in her tenure. An updated process was implemented in office in order to prepare for revivals going electronic, by 2024 renewal. Lessons learned will be implemented in the electronic and subsequent version of the revival application.
- Reference – Staff Photo Roster / Staffing updates – ED provided a photo roster of office staff for Board member reference and brief update on new staff and their roles.
- Licensing Update – ED / Licensing Manager
 - New Military Processes – HR 7939 – reference Attorney report; active military members and spouses have a new expedited process to obtain a privilege to practice or Compact Privilege to practice in NC.
 - New Board member education – applications – New Board members handling application review and approval will be held March 17, 2023.
 - Changes to license cards available on website – Addresses have been removed from license cards for safety.
- Board Member Mentors – David Edwards will draft a plan for Mentor program and bring back for approval.
- Strategic Plan FY 2023 – Kathy reviewed the Strategic Plan and updates. Primary goals in each category have been accomplished fiscal year to date. The Strategic Planning Task Force will meet again prior to the June 2023 Board meeting, where updates for the next fiscal year will be considered by the Board.

V-012-'23 Board Policy – All Board applications remain active for (1) one year

A review of the rationale for this Board policy clarification was reviewed. Updates to applications and the Board website will be made where necessary for clarity and consistency of application to state functional record retention compliance.

Motion was made to approve all applications be active for one (1) year was approved. (*Hale*)

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

V-013-'23 Board Policy – A motion was made the Board delegate authority to ED/DD to approve all routine revival applications: payment, CC and endorsements (*Kesler*)

Members voting in the affirmative: Edwards, Kesler, Hale, Diaz
Wentz, Bernard, Gonzalez

Members voting in the negative: None

J. Financial Update [Attachments XII-XIII]

- Update - Joyce Tynes, Finance Manager -
The Finance Manager reviewed all documents below with the Board; questions were answered.
 - Profit and Loss
 - Balance Sheet
 - Budget to Actual Comparison
- Financial Recommendations – First Quarter 2023
 - NC Compact Fee change – this may be a consideration for the FY2024 budget due to increased administrative costs in implementing the PT Compact.
- Auditor Agreement FY 2023 & sending of an Auditor RFP for next 3 years are scheduled to be sent in spring of 2023.
- Budget preparation FY 2024 – FY 2024 budget preparation begins in March and a proposed budget will be considered for approval by the Board in June 2023

K. Report from Deputy Director (DD) [Attachments XIV]

- Report from DD
- DD reviewed each category in the report in detailed. No changes resulted from discussion.
- Update – Revival changes and early 2023 update – DD reviewed revival process changes with an anticipated goal to move to electronic process before next renewal.

L. Committee on Board Rules

- Update – Agency Rulemaking
 - Gadd recommendations for Rulemaking 2023 (David to review)
 - The Board Attorney presented information regarding Rules Review Commission (RRC) current rule making and considerations for future Board Rulemaking. Proposed RRC rule changes include limitations on agencies withdrawing rules after they have been submitted, oral presentations being limited to 5 minutes, which the Chair can extend, if they desire. These may impact rulemaking flexibility in the future. The Board should also consider amendment to rules thoroughly prior to making changes as the entire rule will be scrutinized.
 - Dry Needling – Scope of Practice - the DD will be creating a potential draft of training rules related to this topic for PPTF and Board consideration, keeping in mind caveats related to rulemaking from RRC rules.

- Any rule proposed for which there are 10 objections, requires the rule be considered by the NC legislature for review.

M. Committee on Information Technology [Attachments XV-XVII]

The Board IT Infrastructure Manager presented the IT updates to the Board members and addressed the change from use of Board member personal emails to ncptboard.org email addresses. See rationale listed in the attached report. There was consensus on this occurring by the Board and David Nall will implement.

- Update – Director of IT
- Update – IT Infrastructure Manager
- Use of Board email address for Board Members
 - NCPT Board Member email Address Policy
 - Updated NCPT Board Member IT Agreement Form

MI. Correspondence with Schools and Annual School Score Reports

Documents provided for review and reference:

- Pass rate (2023) for NC PT and PTA Schools (as of February 13, 2023)
- Pass rate (2022) for NC PT and PTA Schools (as of February 13, 2023)
- Pass rate (2021) for NC PT and PTA schools (as of February 13, 2023)
- Pass rate (2020) for NC PT and PTA schools (as of February 13, 2023)

There were no questions posed by the Board.

- Updated School Addresses and contacts – provided for review and reference.
- 2022 Exam Schedule and Board member notification for score days – Executive Director asked Board Members to update the Licensing Staff on availability regarding application review around score days.
- School Presentations – No new report
- School Communications – DD will be in communication with all NC PT and PTA schools regarding interactive learning modules.

O. Prometric [Attachment XVIII]

- After review of the available reports from the fourth quarter of 2022, ED indicated NCBPTE satisfaction scores are increasing.
- The Board had no feedback on Comments submitted by exam takers from the period.

P. Ethics Commission

- Reminders were issued to the Board members for the following:
 - Board Member Ethics Education (required every 2 years) – a link is available for Board member access to training <http://ethics.nc.gov/education>

- The Office Manager will be tasked with getting this form back from each Board Member.
- Ethics Compliance Report – the Board newest members on this report have dated information and the ED will contact the Ethics Commission to have this updated.
- SEI Reminder – Due April 15 annually – ALL Board members – click for filing instructions – <https://ethics.nc.gov/seis>
 - The Office Manager will be tasked with getting this form back from each Board Member.
- NC Ethics Commission Lobbying update – see newsletter from the Ethics Commission

Q. PT Compact Commission

- Compact Update
 - December 2022, the PT Compact Commission signed an Memorandum of Understanding with the FSBPT which assures financial stability for the PTCC and the PTCC agreed to increase compliance with the PT Compact statute compliance requirements to 80% overall for each state.
- Compact Compliance Reports – no new report for Q1 2023
- PT Compact Privilege NC Jurisprudence Requirement – NC should see improvements with changes made to the ptcompact.org website reference to NC. Additional changes are being considered for the Board website.

R. Board Appointments 2022 (1PT and 1PTA) / 2023 Board Appointments

- New Member appointments
 - PT New Member – Term January 1, 2023 to December 31, 2025 – Angela Diaz
 - Medical Doctor Member – Term January 1, 2023 to December 31, 2025 – Sarah Rooker, MD
 - Public Member – Term January 1, 2023 to December 31, 2025 – Anticipated Appointment – Renuka Kasula

S. Submission of Reports to State etc.

The ED shared reports that have been filed or requests for information responded to as follows:

- Information Request for Annual Report on Rules with Economic Impact
- NC Child Support Services
- NC Community Annual Pass Rate Report
 - NC Community College Letter 2 3 2023
- OSBM Annual Fee Report 2021 – 2022
- Primary Source Verification responses

- NCQA Primary Sources Verification – License Education & Training Verification – Andros
- Primary Source Verification – Verisys
- NCQA Primary Source Verification – License Education Verification – Select Medical
- SPO Medical Staff Online – Primary Source Inquiry
- Payroll Report Filing to state – 4th Quarter 2022
- Directors and Officers (D&O Insurance) Annual Policy Renewed
- Annual Rulemaking Coordinator listing – Verification
- Letter to Governor Cooper / Board Dates 2023
- Lobby Expense Report forms 4th Quarter

T. Election of officers and FSBPT Delegates/Appointment of Standing Committee members

- New Appointment – Investigative Committee – Angela Diaz, PT
 - David Edwards appointed Angela Diaz, PT to the Investigative Committee
- Delegate to FSBPT Delegate Assembly – The FSBPT Delegate will be served by David Edwards. Alternate delegates Angela Diaz.
 - Delegate required attendance at LIF meeting in July 2023 and Delegate Assembly either in person or remote.
 - Alt. Delegate attends delegate training and agrees to fill the role of the delegate if they are unable to serve
- Model Practice-Act Workshop – July 17, 2023 FSBPT will fund 2 from each jurisdiction – ED will clarify who may attend. D. Edwards is interested.
- Public Protection Task Force - David Edward, Stephanie Bernard, Rosa Gonzalez, Leslie Kesler.
- Rules Committee – Megan Wentz, Teresa Hale

U. Federation (FSBPT)

- FSBPT Budget Memo was provided for review and reference.
- FSBPT Publications – Links – <https://www.fsbpt.org/News>
- Meeting date 2023
 - Regulatory Workshop for Board Members and Administration-March 10-12 Virtual
 - Leadership Issues Forum (LIF) – July 15-16, 2023 Arlington VA -Required delegated and Administrator
 - Delegate Assembly – required for Delegate and Alt Delegate October 16, 2023-virtual.
 - Annual FSBPT Education meeting October 19-21, 2023 Jacksonville, FL
 - New required FSBPT Member Portal – required for webinar and in -person meeting attendance.
 - FSBPT Webinar Series – Go to FSBPT meeting portal – please sign up !! and attend !
 - CBA – Nominations for Leadership Position

V. APTA NC & APTA

- APTA – apta.org
- APTA Meeting – October 13-14 2023, Elon NC
- Webinar Series – go to APTAnc.org for listing may require membership for access

W. Other regulatory Organizations – NCBPTE is a member of CLEAR, but both agencies provide tremendous educational opportunities for regulators.

- CLEAR
- FARB

X. Credentialing Agencies

- No New Report – Examples of reports from each agency were provided for Board member review and information.
 - FCCPT
 - IERF
 - ICD

Y. Correspondence from ED, Articles, etc.

- D. Moniot – request for guidance scope of practice clinical documentation
- T. Horne - PTA Whole Health Coach
- E. Carter – Refusal of Treatment for Violent Patient
- Article NC Auditor and NC Medical Board
- G. Johnson – PT Supervision – student and telehealth

Z. Dates and Locations for Future Meetings:

Upcoming Quarterly Board Meeting will be held at AIHF Conference Room 8300 Health Park, Raleigh, NC 27613.

Dates –Wednesdays

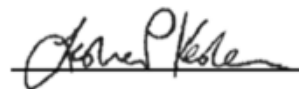
June 7, 2023
 September 13, 2023
 December 6, 2023

Adjourn

Meeting adjourned by C. David Edward, Chair at 3:08 pm



Paula Brooks
 Recording Secretary



Leslie Kelsner
 Secretary/Treasurer

Attachment 1



Adopted – March 8, 2023- Board Meeting

North Carolina Board of Physical Therapy Examiners

MINUTES

December 7, 2022

Crabtree Marriott Hotel

Raleigh, North Carolina 27615

Members Present:

Teresa F. Hale, PT, Chair

C. David Edwards, PT, Secretary/Treasurer

Paul Garcia, MD

Leslie P. Kesler, PT

Jamie L. Miner, PT

Rosa Maria Gonzalez, BSN, RN, Public Member

Stephanie Bernard, PTA

Megan Wentz, PTA

Staff Present:

Kathy Arney, PT, Executive Director (ED)

Paula Brooks, Office Administrator

David Nall, IT Systems Administrator

Ellen Roeber, Deputy Director

Joyce Tynes, Finance Manager/Licensing Manager

David C. Gadd, Board Attorney

Members Absent:

The format for the Minutes is as follows: *V-# Summary of Motion (Board Member who introduced motion)*

A. Preliminary Matters

The Chair recognized Ellen Roeber, PT, DPT, Deputy Director (DD), attending her first full Board meeting. The DD provided her work history for the Board.

No members of the public were present.

B. Meeting Called to Order by Teresa Hale, Board Chair for NCBPTE at 8:30 a.m. December 7th, 2022. The meeting was conducted in-person and open to the public. The meeting was noticed in the Board office, on its website, and NC Secretary of State website as required by law. There were no requests for the meeting agenda prior to the meeting. The Chair conducted a roll call; all members were present, a quorum, as noted above.

Conflict of Interest Reminder by the Chair

Teresa Hale, Board Chair, reminded members of their duty to avoid conflicts of interest and

appearances of conflicts of interest. In addition, Teresa Hale, asked if there were any known conflicts of interest or appearance of conflicts of interest with respect to any matters that were to be brought before the Board today as required by Executive Order 127. No Board member indicated conflicts of interest with the business before the Board today.

C. Approval of the Minutes

V-097-'22 Passed Minutes September 14, 2022 [Attachment I]

Motion to approve draft Minutes of the Board Meeting held on September 14, 2022. *(Kesler)*

Members voting in the affirmative:	Hale, Edwards, Garcia, Gonzalez, Kesler, Miner, Wentz, Bernard
Members voting in the negative:	None

D. Applications for Review

There were no applications for the Board to review. Arney reminded the Board, for educational purposes, of the types of applications that they are required to approve.

Joyce Tynes, Licensing Manager discussed activities of the licensing staff including updating processes and documentation of those as the Board office continues modernization efforts. An email from a grateful licensee was read to the Board complimenting licensing and other staff members on their efforts to license him efficiently as he had a job waiting.

E. Closed Session

V-098-'22 Passed – Motion to go into Closed Session

A motion to go into Closed Session was made at 8:40 am, in accordance with GS 143-318.11 (a) (5) to engage in privileged communications with the Board’s counsel concerning Closed Session Minutes of Board Meetings and contracts for services to the Board. *(Edwards)*

Members voting in the affirmative:	Hale, Edwards, Garcia, Gonzalez, Kesler, Miner, Wentz, Bernard
Members voting in the negative:	None

V-099-'22 Passed - Return to Open Session

Motion to return to Open Session at approximately 8:56 a.m. *(Edwards)*

Members voting in the affirmative:	Hale, Edwards, Garcia, Kesler, Miner, Gonzalez, Bernard, Wentz
Members voting in the negative:	None

E. Approval of actions during the Closed Session

V-100-'22 Passed – Motion to approve Minutes from the Closed Session of the September 14, 2022, as written. *(Wentz)*

Members voting in the affirmative:	Hale, Edwards, Garcia, Kesler,
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Members voting in the negative: Miner, Gonzalez, Bernard, Wentz
None

V-101-'22 Passed – Motion to approve amendments to the actions Board Financial Auditor contract for FY2023 and the next Request for Proposal for Auditor as discussed in Closed Session (Kesler)

Members voting in the affirmative: Hale, Edwards, Garcia, Kesler,
Miner, Gonzalez, Bernard, Wentz
Members voting in the negative: None

F. Responses from ED/DD to questions addressed at the previous Board Meeting

The Executive Director has not received questions regarding Monkeypox; if there are questions the response will be edited as it is now being referred to as Mpox.

G. Scope of Practice Questions for Board Consideration/Public Protection Task Force (PPTF) [Attachments]

Updated Public Protection Task Force – David Edward, Chair of the PPTF updated the Board on the following topics from the Task Force meeting on November 17th, 2022. Previously addressed topics that were or may be finalized in the upcoming year include:

- Imaging – which has been referred to APTA NC
- Dry Needling – informed consent and training requirements
- Pelvic Health – position statement complete and posted; additional questions will be handled on a case-by-case basis.

New topics for prioritization and consideration for the Board include

- Lung Bowel Sounds
- Pulse Oximetry / Position Statement
- Wellness “Episode of Care”
- Revival by 500 hours
- SSNs necessity for collection and maintenance
- Telehealth
- Shockwave/Laser Therapy
- Inactive/Retired license status
- PT’s discharging patients from surgical centers
- PT’s and IME’s in NC

Executive Director facilitated discussion of the Board of the above topics for prioritization for the PPTF. The following input was received:

- **Lung Bowel Sounds** – future questions not previously addressed will be handled on a case-by-case basis
- **Pulse Oximetry / Position Statement** – Staff presented an edited version of the position statement edited in June related to the request for reconsideration from a licensee that pulse oximetry be removed from the list described. The Board discussion

agreed with the edit for remove of pulse oximetry from the list but a paragraph added at the end of the statement to clarify when pulse oximetry should be used in conjunction with physician direction and orders.

- **Wellness “Episode of Care”**- this topic was requested by a licensee for Board review; Board believes this has been addressed sufficiently in Board Rule at this time.
- **Revival by 500 hours** - current regulatory best practice aligns with current Board rules; Board agreed with ED recommendation to add information to the Board website assisting applicants with a plan of action for completion of the 500-hour requirement. This may be addressed in the future with research outcomes HRRI and FSBPT are working on.
- **SSNs necessity for collection and maintenance** – NC state requires Occupational Licensing Boards obtain and maintain this information in the Board database and report as required annually for purposes of the state which include but are not limited to child support non-payment and tax filings. The Board will maintain this information behind several layers of security and will no longer be available for staff viewing, but upon request only. This information will continue to be maintained and reported to the state as required.
- **Telehealth** – The Board referred this topic to the PPTF for review
- **Shockwave/Laser Therapy** – After discussion, the Board decided this topic would not be referred to the PPTF. If additional requests are made in the future the Board will reconsider.
- **Inactive/Retired license status** – The Board discussed how a licensee’s status is shown on the website and in the Board computer system (active, expired, lapsed, etc.). The Board decided the methods currently used are sufficient at this time and should not be changed.

Additional questions were posed to the Executive Director for Board consideration and response.

- **Question posed to the Board regarding PTs in Surgi-Center “clearing” patients for discharge** – the ED made a recommendation for response which the Board reviewed and approved.
- Question posed to the Board – **Can PT’s perform IME’s (Independent Medical Examinations) in NC?** The ED made a recommendation for response which the Board reviewed and approved.
- **Questions regarding PTA Scope of Practice – Inquiry from Jared Cooper, PT – PTA educator** - the Board determined it would refer this inquiry to the PPTF for discussion and response.
- **Virtual PT** – the Board discussed several topics related to the topic:
 - **UHC and Kaia app** – the Investigative Committee completed its correspondence, facilitated by the NC Department of Insurance, with UHC regarding the Kaia app, resulted in the app no longer being referred to as “virtual physical therapy”
 - **LUNA Physical Therapy** – Jamie Miner, PT explained how this app is used and

applied in the field of PT. Physical Therapy licensees use the application to obtain patient referrals and set their own schedule to see the patients in their homes. All paperwork is done on the app. The service is provided and filed as Part B for Medicare or can be private pay and a referral would not be needed.

H. Attorney's Report

- **General Attorney Update**
Breach Outage – The Board Attorney will continue to communicate with the State Farm referred attorney and IDX as needed. Attorney Gadd has been on the calls with Arney to provide information and assist with licensees who have expressed concern.
- **Legislative Update - Not currently in session.**
- **Rules – the Rules Review Commission (RRC) has submitted rules for public comment. One of the proposed rules places additional restrictions on when rules may be withdrawn by agencies. The Board staff will submit questions to the RRC regarding agency withdrawal of rules. The board will need to be diligent on how the new RRC rules will impact the Board.**
- **Consideration of Disciplinary Actions – None**
- **Board Regulatory Training – Gadd provided education on Position Statements, specifically when they are appropriate versus rulemaking and statutory amendments. Discussion was had about the value of Position Statements when establishing guidelines which may be used by licensees and Board Staff to apply the Practice Act and Board rules to the practice of PT.**

I. Executive Director's (ED) Update – [Attachments]

The Executive Director provided verbal updates including the following:

- **Board Contact Information – requested the Board members to provide updated contact information to Paula Brooks Office Administrator. All Board members acknowledged receiving information at their current Board email addresses. Additional discussion related to transitioning Board member emails exclusively to ncptboard.org and using Board laptops only for Board communications and application review. ED will bring a procedure back to the next Board meeting regarding transition and ways to maintain efficient notification for members when materials are being sent. David Nall, Information Technology Infrastructure Manager, will lead this effort.**
- **Current Licensees Count – Quarterly update – slightly increased for this quarter from one year ago and over recent quarters at 3.4% growth.**

- Office Operations – updates
 - New Property Manager -Matt Burns, Thomas Park Investments
 - Fax Capabilities – computer based (non-phone line dependent) 4 staff have capabilities; number remaining 919 490-5106. One fax has been received in the 6 weeks since installation.
 - Soft Phones - computer based phone software estimates are still being considered to replace cell phones and outdated in-office phone system.
- Board member Mentor Program – A Board Member proposed experienced Board members could mentor newer members and assist with onboarding and understanding of Board member processes. The Board agreed to beginning this with new members appointed for terms beginning in 2023.
- Discuss with licensees: re: Outage concerns
 - Executive Director reviewed the financial breakdown of the Outage.
 - December 2, 2022 - Enrollment with IDX ended
 - State Farm Insurance Cyber Insurance – It is anticipated the premium may increase given the claim for 2022. We will not know the outcome until the policy is up for renewal in 2023.
 - FY 2023 Budget - Overall Expense update – Expenses are higher than budgeted due to the outage.
- New FSBPT Continuing Competence Self-Reflection poll – Beta Testing. FSBPT Continuing Competence Committee is requesting beta testers – Self Reflection tool.
 - David Edwards and Jamie Miner agreed to Beta Testing
- 2023 Renewals update
 - Fees / Costs questions – ED shared feedback from licensees. A small percentage of applicants expressed concerns with the cost of credit card fees and renewal fees. The Board was provided with their emailed comments. No change is required at this time.
 - Renewal Summary 2023 update – Nov 21 2022, 13% have renewed, at this time in 2021 11% renewed; Renewals have proven consistent with prior years.
 - Requests for expunging/removal of licensure records – these are public records and are unable to be removed.
- FSBPT API update – the electronic interface with FSBPT is working to obtain exam scores and FSBPT IDs; once created an interface for exchange of PT Compact data is anticipated to be added. Joey Peters, Board IT programming contractor is working with NCBPTE IT on this project doing an excellent job.

- Strategic Planning – Report update – ED provided a verbal update of the FY2023 strategic plan. In all categories the Board is on track with established plans. Execution of the plan will continue through the fiscal year.

J. Financial Update [Attachments]

- Verbal Update - Joyce Tynes, Finance Manager
 - FY 2022 Financial Audit – Review with Board – The FY2022 was reviewed by Joyce Tynes for the Board. The Audit for this year, as in years past, reports no irregularities. The Reserves have been updated to reflect Board adopted requirements and income of approximately \$130,000 was shown.
 - Balance Sheet FY 2022 – shows a healthy financial position.
 - Profit and Loss comparison of FY 2022 to FY 2021 – the Board has needed to spend monies beyond budgeted to enhance Information technology and systems for the Board office. This will continue into FY2023.
- Review and Board Insurances
 - Directors and Officers Liability Policy Renewal – 2023 – the annual policy renewal was submitted December 5, 2022. This year as required by the application PCI/DSS (security) compliance was updated. The quote for renewal is anticipated later in December. The Board agrees the policy is still necessary.

V-102-'22 Passed - Motion made for the ED authority to renew the 2023 D&O insurance coverage up if the premium does not exceed \$35,000 annually (Edwards)

Members voting in the affirmative: Hale, Edwards, Garcia, Kesler,
Miner, Gonzalez, Bernard, Wentz

Members voting in the negative: None

K. Report from Deputy Director (DD)

- Ellen Roeber, PT, DPT - Deputy Director Report
 - DD provided a brief verbal update on her part-time work becoming oriented to continuing competence processes during renewals, course approvals, revivals and working directly with the Licensing staff and Manager to update consistency of processes that interface with her role as DD.
- NCBPTE Webinar Series hosted by DD
 - DD provided a brief verbal update on a November 17, 2022 Webinar she hosted related to continuing competence requirements for license renewal – She indicated that the Q&A portion of the webinar and parts of it will be posted on the website and

available for continuing competence points for licensees.

- Rule 21 NCAC 48G .0109 (h) Professional Self-Assessment - Reflective Practice Exercise (RPE)
Since the inception of the rule in 2009, there has been a single RPE designed by the Board for licensees to use in this category of continuing competence. Others could be approved by the Board, but few have been successfully submitted. The Nov. 17, 2022, webinar precipitated a submission for approval.
 - The DD presented a rubric for Board consideration and approval for staff approving Self-Assessment - Reflective Practice Exercises. The requirements includes:
 - The exercise includes a process to evaluate current professional practice abilities.
 - The exercise includes goal establishment to address areas of deficiencies or areas for growth identified as a result of the evaluation process.
 - The exercise includes a plan of action to work toward meeting goals.
 - The exercise includes documentation of activities that are completed to achieve established goals.
 - Is the activity submitted by a current Board pre-approved provider?

V-103-'22 Passed - Motion made to approve the rubric for approval of continuing competence Self-Assessment - Reflective Practice Exercises as presented by the DD. (Wentz)

Members voting in the affirmative: Hale, Edwards, Garcia, Kesler,
Miner, Gonzalez, Bernard, Wentz

Members voting in the negative: None

L. Committee on Board Rules

- Rulemaking Coordinator – No Update

M. Committee on Information Technology [Attachments]

- Reports from Director - Information Technology and Infrastructure Manager were presented

- Media report – Cyber Threat – System Outage for NC Dept of Information Technology

N. Correspondence with Schools and Annual School Score Reports [Attachment]

Documents provided for review and reference:

- Pass rate (2022) for NC PT and PTA Schools (as of November 15, 2022)
- Pass rate (2021) for NC PT and PTA Schools (as of November 15, 2022)
- Pass rate (2019) for NC PT and PTA schools (as of November 15, 2022)
- Pass rate (2018) for NC PT and PTA schools (as of November 15, 2022)

No action was recommended for communication with schools at this time. ED updated the Board on several NC programs CAPTE is monitoring this quarter.

- Updated School Addresses and contacts
 - The ED will send an introductory correspondence to New Program Directors of PT/PTA programs
- School Presentations – Duke January 2023 - ED/DD

O. Prometric

- NPTE - Survey Satisfaction by Month – NCBPTE satisfaction is in the 80%- 90% range. Due to extensive modernization efforts, the Licensing staff is working consistency of processes, written procedures and leveraging technology for more self-service features for website applicant and licensee users. This may enhance satisfaction ratings.
- FSBPT Candidate Comments Report and other metrics were provided for Board review– July 2022

P. Ethics Commission [Attachment]

Reminders were issued to the Board members for the following:

- Board Member Ethics Education (required every 2 years) – a link is available for Board member access to training
- Ethics Compliance Report – Board members should refer to this report for their next scheduled training and SEI filing deadlines
- SEI Reminder – Due April 15 annually – ALL Board members – click for filing instructions – <https://ethics.nc.gov/seis>
- Ethics Commission newsletters were reviewed and are available for reference.

Q. PT Compact Commission

Arney provided updates to the PT Compact

- Compact Update – ED is the NCBPTE delegate and continues to serve as Chair of the PTCC. The PTCC recently completed a strategic plan in which NC is expected to
- Compact Compliance Reports
- Bylaws, Rules & Policy Guidelines updates
 - 14 days to report vs 48 hours is the most important

R. Board Appointments 2022 (1PT and 1PTA) / 2023 Board Appointments

- 2023 Board Appointment Term Ending 12/31/2022 – Miner, Garcia & Gonzalez. Gonzalez and Miner are eligible for reappointment.
- APTA NC – submitted names for PT and MD to the Governor; the Public Member appointment is completed through the Governor’s office of Boards and Commissions

Appointments are anticipated in late 2022 or early 2023.

S. Submission of Reports to State etc. [Attachments] – the following reports to the state, policy renewals or public record requests and communication were completed during the quarter:

- Catapult Wage & Salary Benefit Report Submission
- Catapult Benefit Survey
- Select Rehabilitation Request for NC PT Licenses Disciplines Q3
- BCBS Annual Group Eligibility
- D&O Insurance Submission Updating
 - PCI / DSS compliance
- Annual Report to the State & Financial Report – October 31, 2022
- SHEPS Center – PT MDS Data usage request UNC Pembroke
- Board Appointment Report
- SHEPS Center – NCBPTE annual requested submission October 2022
- Board Newsletter and submission to the state Publications office
- NC BOLD – NC Dept of Commerce – updated links previously submitted
- Updated Annual Retirement Trustee Directors and Officers Insurance

T. Election of officers and FSBPT Delegates/Appointment of Standing Committee members

- Annual Elections: Chair and Secretary / Treasurer

After nominations, the following Board members were elected to Board Office for the calendar year 2023:

V-104-'22 Motion made for David Edward, PT as Chair of the Board. (Hale)

Members voting in the affirmative: Hale, Edwards, Garcia, Kesler,
Miner, Gonzalez, Bernard, Wentz

Members voting in the negative: None

V-105-'22 Motion made for Jamie Miner, PT as Secretary /Treasurer; in the event she is not re-appointed Leslie Kesler, PT will serve. (Edwards)

Members voting in the affirmative: Hale, Edwards, Garcia, Kesler, Miner,
Gonzalez, Bernard, Wentz

Members voting in the negative: None

Chair Hale made the following appointments to Committees and Task Forces for 2023:

- Investigative Committee – Jamie Miner, PT will continue serving on the Investigative Committee; in the event she is not re-appointed Leslie Kesler, PT will fill this role.
- Rules Committee – Megan Wentz, PTA will serve on the Rules Committee.
- Finance Committee – Leslie Kesler, PT will serve on the Finance Committee;
- Public Protection Task Force – David Edwards, PT will serve on the Public Protection Task Force as Chair – Stephanie Bernard, PTA will serve and Leslie Kesler, PT Rosa Gonzalez, Public Member will continue their service.
- Executive Director Review Task Force – Teresa Hale and Jamie Miner will serve on the Review Task Force. David Edward will serve when he becomes Chair.

- Strategic Planning Task Force – Leslie Kesler, PT and Stephanie Bernard, PTA will continue serving with the addition of Jamie Miner, PT
- FSBPT Delegate and Alternate Delegates will be selected in March 2023 or after Board Appointments for 2023.

U. Federation (FSBPT) [Attachment]

- New Required FSBPT Member Portal
 - Cadence - FSBPT Webinar and meeting portal required for sign up and registration. Please attend course offerings throughout the year
 - FSBPT Publications - Links – <https://www.fsbpt.org/News-events/publications>
 - FSBPT Annual Meeting – October 27-29 Orange County – California
 - Attendee update –
 - Jamie Miner provided a presentation on her experiences and education from the Annual Meeting
 - Update Meeting dates 2023
 - LIF – July 2023 – Delegate & Administrator
 - Annual Meeting – Jacksonville FL – October 2023

V. APTA NC & APTA

- APTA NC – Report NCBPTE to annual APTA NC business meeting

W. Other regulatory Organizations – no new report

X. Credentialing Agencies

- FCCPT – no new update

Y. Correspondence from ED, Articles, etc.

- FSBPT Article

Z. Dates and Locations for Future Meetings:

Upcoming Quarterly Board Meeting will be held at AIHF Conference Room 8300 HealthPark, Raleigh, NC 27613.

Dates –Wednesdays

March 8, 2023

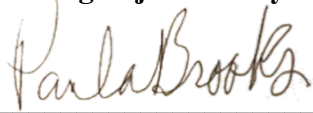
June 7, 2023

September 13, 2023

December 6, 2023

Adjourn

Meeting adjourned by Teresa Hale, Chair at 2:38 pm



Paula Brooks
Recording Secretary



C. David Edwards, PT
Secretary/Treasurer

Attachment 2



From: [Kathy Arney](#)
To: [Wanczyk, Carolyn](#)
Cc: [Kathy Arney](#); [Kathy Arney](#)
Subject: RE: Surgi-center same day
Date: Thursday, December 8, 2022 11:00:46 AM
Attachments: [3 \(d\) Direct Access - reviewed 06-08-2022.pdf](#)

Ms. Wanczyk,

In response to your emailed questions regarding PTs “clearing” patients prior to discharge from hospital-based outpatient surgi-centers, the Board reviewed your question at its meeting December 7, 2022 and has the following response:

Medical discharge from a hospital would require a physician or appropriate medical provider, as PTs do not make medical diagnoses. The scenario you posed relates to physical therapy and physical function post-surgery addressed below.

1. do we need an order?

The NC PT Practice Act and Board rules allow for unrestricted direct access to PTs in NC (see attached Board Position attached which is also found on the Board website). The Board does not have authority over employers or payers and their policies. An employer may have requirements in addition to the legal requirements of the Practice Act as long as the legal requirements are being met.

2. should this be filed as an initial eval or a progress note?

The NC PT Practice Act requires that a physical therapist evaluate a patient and have first-hand knowledge of the patient. In order to determine if a patient can perform the functional requirements and training mentioned (ambulate, transfer, perform stair climbing, do a toilet transfer (if needed), teach precautions/review an education booklet, teach family to assist (if needed) and complete a car transfer) an appropriate evaluation prior to performing activities is required. It would not be considered a “progress note” because the patient has not been evaluated and progress would not be able to be determined.

I hope this information is helpful to you. Please let me know if you have additional questions.

Kathy

Kathy O'Dwyer Arney, PT, MA
Executive Director
North Carolina Board of Physical Therapy Examiners
8300 Health Park, Suite 233
Raleigh, North Carolina 27615
Phone: (919)490-6393;(800)800-8982
Fax: (919)490-5106
email: karney@ncptboard.org
Web address: www.ncptboard.org

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From: Wanczyk, Carolyn <Carolyn.Wanczyk@Vidanthealth.com>

Sent: Wednesday, November 16, 2022 6:29 PM

To: Kathy Arney <karney@ncptboard.org>

Subject: Re: Surgi-center same day

Hi Kathy,

The surgi center requests that PT sees all of the total joint replacements before they discharge. Currently I believe there is no order placed- the PT is just notified when they are ready for discharge from a medical standpoint. The time spent is not billed to the patients insurance company. The PT will go over and make sure the patient is able to ambulate, transfer, perform stair climbing, do a toilet transfer (if needed), teach precautions/review an education booklet, teach family to assist (if needed) and complete a car transfer. When I do it, I personally test strength and sensation before attempting to stand as I feel this is best practice. I only fill in when needed- I am not entirely sure how thorough the primary therapist is on what he is assessing. This has come up as they have recently transferred to an electronic system and new templates/order sets have been built.

I guess I have two main questions.

- 1) do we need an order?
- 2) should this be filed as an initial eval or a progress note?

I personally think there should be an order and we should be writing it as initial eval, but I have had some push-back, so was hoping to get a definitive answer.

Thank you
CJ

Sent from my iPhone

On Nov 16, 2022, at 12:16 PM, Kathy Arney <karney@ncptboard.org> wrote:

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This message came from outside of ECU Health.

[Report Suspicious](#)

Ms. Wanczyk,

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some additional information to provide to the Task Force so we can analyze your question. It would be most helpful to know if the expectation is that they are safe to go home medically or from a PT and functional point of view. Is the PT performing any type of evaluation of the patient hands on? What are they using to determine that the patient is "cleared" post-surgery? What are they clearing?

Thank you for your assistance in answering these questions.

Kathy

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From: Kathy Arney

Sent: Saturday, November 12, 2022 6:20 AM

To: Wanczyk, Carolyn <Carolyn.Wanczyk@Vidanthhealth.com>

Cc: Kathy Arney <karney@ncptboard.org>; Ellen Roeber <eroeber@ncptboard.org>;

Kathy Arney <karney@ncptboard.org>

Subject: RE: Surgi-center same day

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Thank you for your interesting question and you will hear from us as soon as we are able.

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Attachment 4



21 NCAC 48C .0101 PERMITTED PRACTICE

(a) Physical therapy is presumed to include any acts, tests, procedures, modalities, treatments, or interventions that are **routinely taught in educational programs or in continuing education programs for physical therapists and are routinely performed in practice settings.**

(d) The practice of physical therapy includes tests of joint motion, muscle length and strength, posture and gait, limb length and circumference, activities of daily living, pulmonary function, **cardio-vascular function**, nerve and muscle electrical properties,.....

In response to the question, “Is interpreting EKGs within the PT scope of care vs just determining it a rhythm is or is not irregular?” the Board considered this question at its meeting March 8, 2023.

After consulting CAPTE accredited DPT programs in NC, Board-Certified Cardiovascular and Pulmonary Clinical Specialists in NC who are considered subject matter experts, and the 2022 Academy of Cardiovascular & Pulmonary Physical Therapy’s [Entry-Level Physical Therapist Competencies in Cardiovascular & Pulmonary Physical Therapy](#), the Board determined ECG interpretation does meet the requirements of the NC PT Practice Act and Board Rule 21 NCAC 48C .0101 Permitted Practice (as referenced above). ECG interpretation would be taking place within the context of a PT evaluation or plan of care and should not imply diagnosis of medical disease. Any information or outcome obtained as a result of an ECG interpretation that is beyond the PT scope of practice, is required by the NC PT Practice Act 90-270.12 to be referred to a licensed medical doctor. If the patient does not have a medical doctor, it is the responsibility of the PT licensee to refer the patient to the appropriate healthcare provider for services beyond the scope of the physical therapist.

Basic ECG interpretation at entry level would fall within the scope of practice for physical therapists who have the training, education, and are competent to perform this as noted above. ECG interpretation would not be within the scope of a PTA. Since the clinical skills required to interpret ECG range from entry-level to advanced, a PT student should only perform this skill under the supervision of a trained, educated, and competent PT.

The, above referenced, Academy of Cardiovascular & Pulmonary Physical Therapy’s 2022 publication defines levels of competency as “proficient, emerging, familiarity, or none-not entry-level.” The same publication also defines “complex patients” and “complex settings.” In doing so, physical therapists must recognize their own personal level of proficiency and competence when practicing ECG monitoring and interpretation. Advanced training is required for more complex patients and settings (see Board definition of “advanced training” on the home page of the Board website under “Scope of Practice”).

Attachment 5



Memo

To: NC Board of Physical Therapy Examiners

From: Kathy Arney, Executive Director

cc: David C. Gadd, Attorney

Date: 03-08-23

Re: CAPTE Candidacy Accreditation status – definition and educational program status for applicant licensure upon graduation

Program Director, Tiffany Needham, PTA, MS, CEASIII of Central Carolina Community College Developing PTA educational program posed the question, will graduates of a CAPTE Candidacy-approved program be approved to sit for the NC licensure exam? The question was posed as CAPTE updated its definition of Candidacy status to be considered an accredited program and graduates are eligible to sit for the licensure exam based on state law and regulation.

In response as it relates to eligibility to take the NPTE, the Executive Director responded, the NC Board of PT Examiners now utilizes the Alternate Approval Pathway (AAP). AAP allows PT/PTA programs to determine if their student is on-track to graduate and check that status in the educational program portal at FSBPT. FSBPT then makes a determination if they will approve the candidate to sit for the NPTE. The ED corresponded about this question with Christine Sousa, FSBPT Managing Director of Exam Services and reviewed the NPTE Policies for 2023 regarding this topic. Page 6, Section 2, Approval for Candidates to Sit for the NPTE addresses this question by stating:

After FSBPT's eligibility criteria have been met, the licensing authority of the jurisdiction to which the candidate is applying, or their authorized designee, must approve the candidate to sit for the examination. At a minimum, the licensing authority must require that the candidate is a graduate of or graduating from a PT or a PTA program that meets the candidacy or accreditation standards of the Commission on Accreditation

in Physical Therapy Education (CAPTE) or is deemed substantially equivalent. Candidates may sit for the NPTE no more than ninety days prior to graduation if there is a reasonable expectation that they will graduate from a program.

Further, the NC PT Board rule, which affirms the ability for FSBPT to approve candidates for the NPTE using this criteria is 21 NCAC 48D .0107 which states:

21 NCAC 48D .0107 PERSONS REFUSED EXAMINATION PERMISSION

- (a) The Board shall refuse permission to take the examination to any person who:
- (1) Does not meet the requirements as set forth in the Physical Therapy Practice Act;
 - (2) Furnishes false information to the Board on the application; or
 - (3) Fails to furnish personal background information as required by these Rules.
- (b) The Board and Federation have authority to approve an applicant's exam eligibility. The Board shall approve exam eligibility for foreign-trained applicants. The Federation shall grant exam eligibility for all other applicants as set forth in National Physical Therapy Examination policies, which are available free of charge at the Board's office and at www.fsbpt.org.
- (c) Any applicant who is refused permission to take the examination shall be entitled to petition the Board for a contested case hearing pursuant to Subchapter 48G, Section .0500 of this Chapter.
- (d) Any applicant who is refused permission to take the examination by the Federation has the option to appeal using the policies set forth in Paragraph (b) of this Rule.

History Note: Authority G.S. 90-270.92; 90-270.95; 90-270.97; 90-270.100; 90-270.103; Eff. February 1, 1976; Readopted Eff. September 30, 1977; Amended Eff. December 1, 2006; August 1, 2002; December 30, 1985; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 1, 2018; Temporary Amendment Eff. September 25, 2020; Amended Eff. August 1, 2021.

Since exam eligibility is accepted for candidates attending candidacy status programs, the Board should consider whether an applicant from a candidacy status program with a completed application is eligible for licensure. On July 1, 2020, Federal Department of Education Office of Postsecondary Education final rule 84 FR 58923 went into effect. This rule recognizes academic degrees earned from programs in pre-accreditation status as being from an accredited program. As a result, CAPTE changed its rules to comply with the new federal requirement. The CAPTE rule now reads as follows:

7.2, Definition of Candidate for Accreditation. Candidate for Accreditation is a pre-accreditation status, awarded prior to enrollment of students in the technical (PTA programs) or professional (PT programs) phase of the program, which indicates that the physical therapy education program is making satisfactory progress toward and likely to attain full accreditation. **All credits and degrees earned and issued by a program holding candidacy are considered to be from an accredited program.**

This information was confirmed in correspondence with Michael Chevalier, LPTA, Lead Pre-Accreditation Program Specialist, Commission on Accreditation in Physical Therapy Education, American Physical Therapy Association.

NC PT Board rules related to license applications include those noted below which do not address the type of accreditation status required for licensure.

SUBCHAPTER 48E - APPLICATION FOR LICENSURE

SECTION .0100 - REQUIREMENTS

21 NCAC 48E .0101 FILING APPLICATION AND BOARD DETERMINATION OF EXAM ELIGIBILITY

- (a) An applicant for licensure shall ensure that his or her credentials are filed with the Executive Director in accordance with the rules of this Subchapter.
- (b) Applicants pursuant to G.S. 90-270.97 shall submit all application requirements to the Executive Director at least 30 days prior to the examination.
- (c) The Board shall not approve an application until the applicant has graduated as defined by 21 NCAC 48A .0105(6).

*History Note: Authority G.S. 90-270.92; 90-270.95; 90-270.98(b);
Eff. February 1, 1976;
Readopted Eff. September 30, 1977;
Amended Eff. May 1, 1988; December 30, 1985; October 28, 1979;
Recodified Paragraph (c) to 21 NCAC 48C .0501 Eff. January 25, 1989;
Amended Eff. July 1, 2013; August 1, 1998; February 1, 1996;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 1, 2018;
Amended Eff. May 1, 2020;*

21 NCAC 48A .0105 DEFINITIONS

The following definitions and the definitions in G.S. 90-270.90 apply throughout Chapter 48:

- (1) "Computer Based Testing" or "CBT" means the Federation approved National Physical Therapist and Physical Therapist Assistant Examinations administered by a testing agency approved by the Federation.
- (2) "Credentials" means the materials related to educational background and professional experience that an applicant for licensure must present to the Board.
- (3) "Educational programs" means physical therapy and physical therapist assistant educational programs accredited by the Commission on Accreditation of Physical Therapy Education (CAPTE).
- (4) "Endorsement" means granting a license in this State based upon the applicant possessing an active license in another State.
- (5) "Federation" means Federation of State Boards of Physical Therapy.
- (6) "Graduated" or "graduation" means the completion of all requirements, including clinical experience, from an accredited program for physical therapists or physical therapist assistants. If an educational program certifies that the degree is assured and will be conferred at a later date, an applicant will be considered to have been graduated.
- (7) "Inappropriate touching" means the unwelcome or unwanted laying of hands by a licensee for a purpose inconsistent with a physical therapy evaluation or treatment of a patient.
- (8) "Note" means the physical therapy progress note that documents each patient visit.
- (9) "On-site supervision" means the supervising licensee is present in the department or facility where services are provided, is immediately available to the person being supervised and maintains continued involvement in aspects of treatment sessions in which students completing clinical requirements or physical therapy aides are involved in components of care.
- (10) "Patient" means any recipient of physical therapy services and includes the term "client".
- (11) "PT" means a Physical Therapist.
- (12) "PT exam" means a Federation approved licensing examination for physical therapists.
- (13) "PTA" means a Physical Therapist Assistant.
- (14) "PTA exam" means a Federation approved licensing examination for physical therapist assistants.

Finally, other US jurisdictions were polled through the FSBPT Council of Board Administrators for their law/rules/policies related to this topic. Of the six (6) respondents (WA, OR, TX, GA, MD and OH) the results were as follows:

License with candidacy status	4
Do not license with candidacy status	1
Unsure	1

Due to the Federal regulation change, and nothing that prohibits licensing candidates in NC who provide all the requirements for licensure, it is recommended that the NC Board of PT Examiners follow the CAPTE rule and recognize applicants from programs holding candidacy status as being from accredited programs for the purpose of licensure.

Attachment 6



Position Statement – North Carolina Board of Physical Therapy Examiners

6. Performance of Medical Procedures Requested of Physical Therapy Licensees in Healthcare Settings (Formerly: Performance of Finger Blood Specimens)

Adopted – December 28, 2001

Updated – December 6, 2006

Reviewed by the Board – September 23, 2010, June 17, 2015

Updated- June 6, 2018, June 8, 2022, December 7, 2022

Physical therapy licensees are often asked to perform medical procedures related to a patient's overall care that are not within the definition of physical therapy, nor are they presumed to be precluded by the practice acts of other health care disciplines. Examples would include, but are not limited to, assessment of bowel sounds, PT/INR, suture and staple removal, urine specimens, and finger sticks.

In some cases, the interpretation of the results of medical procedures are left to the primary healthcare professional requesting those tests or measures. If the patient does not have a primary healthcare provider, it is the responsibility of the PT licensee to assure the patient is referred to a provider who is able to address interpretation of test results.

The performance of these procedures is not considered part of the scope of practice for physical therapy; however, it would not be a violation of the **North Carolina Physical Therapy Practice Act** for a physical therapist (PT) or physical therapist assistant (PTA) to perform these medical procedures provided that the PT or PTA has been properly trained and is competent and makes it clear to the patient that this procedure is not physical therapy. The PT or PTA should communicate the results to the appropriate health professional so the health professional can interpret and communicate the results to the physician to make any necessary modifications to the patient's treatment plan. In addition, physical therapy licensees cannot bill for their time performing non-physical therapy procedures as physical therapy. Lastly, the NCBPTE cannot speak for other Boards as to whether the performance of these medical procedures would violate other health care practitioners' practice acts. The NCBPTE can only say that it is not a violation of the North Carolina Physical Therapy Practice Act.

The Board has been asked about pulse oximetry which is used by PT licensees to monitor and assess patient vital signs. The Board has also been asked about oxygen titration. When pulse oximetry is performed in the context of monitoring patients with oxygen titration, a physician referral is required, as decisions regarding oxygen titration would be considered within the scope of practice of medicine.

Lastly, the NCBPTE cannot speak for other Boards as to whether the performance of these medical procedures would violate other health care practitioners' practice acts. The NCBPTE can only say that it is not a violation of the **North Carolina Physical Therapy Practice Act**.

Kathy Arney, PT, MA, Executive Director

NC Board of Physical Therapy Examiners

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Attachment 7



Proposed Response to PTA Assessment Questions posed by J. Cooper – Board meeting 03-08-23

The Board acknowledges, as you have outlined in your inquiry, that the word “assessment” has different meanings depending on the context. “Assessment” utilized during patient treatment is different than “assessment” resulting from a physical therapist’s evaluation or re-evaluation that results in forming a plan of care or altering a plan of care.

PTAs are always under the supervision of a physical therapist who has established each patient’s plan of care and determined the safe and appropriate delegation of treatment interventions. Furthermore, PTs should consider a PTAs education and training when delegating treatment interventions per Article 90-270.90. In doing so and when deemed appropriate by the PT, PTAs may collect objective, measurable data that PTs may then utilize in plan of care decisions.

Regardless of whether a PT or PTA licensee is delivering a patient treatment intervention, patient “assessment” is required to promote safe and effective patient care. Board rules support the PTA’s use of “assessment” in this manner to make “modifications of treatment programs that are consistent with the established patient plan of care” (21 NCAC 48C .0201(b)), document “patient status”, “changes in clinical status”, and “response to treatment based on subjective and objective findings, including any adverse reactions to an intervention.” (21 NCAC 48C .0201(f) (4)(5)(8)).

The statements you made in your summary are mostly accurate in the context of the educational setting. The NC Practice Act and Board Rules, as outlined above, support these statements. Complexity, both of the patient and of patient settings, is one of many factors the PT should consider when delegating treatment intervention.

There are several Board rules and position statements provided that address topics relevant to this subject and serve as references for your review and consideration.

NC PT Practice Act

§ 90-270.90. Definitions. In this Article, unless the context otherwise requires, the following definitions shall apply:

(3) "Physical therapist assistant" means any person who assists in the practice of physical therapy in accordance with the provisions of this Article, and who works under the supervision of a physical therapist by performing such patient-related activities assigned by a physical therapist which are commensurate with the physical therapist assistant's education and training, but an assistant's work shall not include the interpretation and implementation of referrals from licensed medical doctors or dentists, the performance of evaluations, or the determination or major modification of treatment programs.

NC Board of PT Examiners - Rules

SECTION .0200 – PHYSICAL THERAPIST ASSISTANTS 21 NCAC 48C .0201 SUPERVISION BY PHYSICAL THERAPIST

(a) A physical therapist assistant may assist in the practice of physical therapy only to the extent allowed by the supervising physical therapist.

(b) A physical therapist assistant may make modifications of treatment programs that are consistent with the established patient care plan.

(c) A physical therapist assistant may engage in off-site patient related activities that are appropriate for the physical therapist assistant's qualifications and the status of the patient.

(d) A physical therapist assistant may document care provided without the co-signature of the supervising physical therapist.

(e) A physical therapist assistant who is supervising a physical therapy aide or student must be present in the same facility when patient care is provided.

(f) The physical therapist assistant must document every intervention/treatment, which must include the following elements:

- (1) Authentication (signature and designation) by the physical therapist assistant who performed the service;
- (2) Date of the intervention/treatment;
- (3) Length of time of total treatment session;
- (4) Patient status report;
- (5) Changes in clinical status;
- (6) Identification of specific elements of each intervention/modality provided. Frequency, intensity, or other details may be included in the plan of care and if so, do not need to be repeated in the daily note;
- (7) Equipment provided to the patient or client; and
- (8) Response to treatment based on subjective and objective findings, including any adverse reactions to an intervention.

History Note: Authority G.S. 90-270.90; 90-270.92; 90-270.102; Eff. December 30, 1985; Amended Eff. December 1, 2006; August 1, 2002; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 1, 2018.

21 NCAC 48C .0202 PROHIBITED PRACTICE

(a) A physical therapist assistant shall not engage in practices requiring the knowledge and skill of a physical therapist.

(b) A physical therapist assistant shall not engage in acts beyond the scope of practice delegated by the supervising physical therapist.

History Note: Authority G.S. 90-270.90; 90-270.92; 90-270.102; Eff. December 30, 1985; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 1, 2018.

Position Statements

Position Statement 13. NCBPTE Position Statement on Pelvic Health in the NC Physical Therapy Scope of Practice.....

To further clarify, “APTA Pelvic Health advises that physical therapy examination of and interventions to the internal pelvic muscles be taught to physical therapists, supervised physical therapist students and PTAs. PTAs may be instructed in examination and interventions of the internal pelvic muscles under the provision that this education is intended for foundational knowledge and that examination of the pelvic dysfunction should remain within the scope of the licensed physical therapist”. “Furthermore, interventions for pelvic dysfunction including, but not limited to, therapeutic exercise, neuromuscular re-education, manual therapy and behavioral 2 retraining may require immediate and continuous examination and evaluation throughout the intervention while at other times may be relatively routine. In routine circumstances, those interventions may be delegated to PTAs and student physical therapists under direct supervision. When immediate and continuous examination and evaluation is necessary, those interventions should be performed only by a licensed physical therapist.” (APTA Pelvic Health)

Position Statement 14. Performance of Sharp Debridement by a Physical Therapist Assistant

The NCBPTE has determined that in those limited situations in which engaging in interventions involving sharp debridement does not require continuing evaluation during the intervention, it is not a violation of the North Carolina Physical Therapy Practice Act or Board’s rules for a physical therapist assistant who is properly trained and appropriately supervised to perform sharp debridement provided that the debridement is strictly treatment. If a continuing evaluation is required during the treatment, then performance by the physical therapist is required, and the determination of whether sharp debridement should be performed is made by the physical therapist.

Position Statement 15. Performance of Mobilization by a Physical Therapist Assistant

Question: Can a PTA perform peripheral and spinal mobilization in North Carolina?

Answer: This question was addressed by the NCBPTE at its March 29, 2001 meeting. GS 90-270.90(3) authorizes the PTA to perform patient-related activities “...which are commensurate with the PTA’s education and training...” The same section prohibits a PTA from interpreting and implementing referrals from licensed medical doctors or dentists, performing evaluations, or determining treatment programs, and making major modifications thereof.

The NCBPTE was clear in its determination that it would be inappropriate for a PTA to engage in spinal mobilization under any circumstances. The question of whether a PTA can engage in peripheral mobilization is less clear. Some members felt that it is difficult to perform peripheral mobilization without continuing evaluations. However, it was also recognized that PTAs have been engaged in peripheral mobilization in this State. Under any circumstances, a PTA must have the requisite knowledge and skill to engage in peripheral mobilization.

The NCBPTE was advised that since the typical PTA education program does not provide the sufficient education and training for a graduate to be able to perform peripheral mobilization, those skills must be developed by additional training before a PTA can perform peripheral mobilization in a practice setting.

Position Statement 16. Scope of Authority of the Physical Therapist Assistant to Assist the Physical Therapist with Functional Capacity Evaluations

It is the position of the North Carolina Board of Physical Therapy Examiners that a physical therapist assistant (“PTA”) is qualified and permitted by the North Carolina Physical Therapy Practice Act to assist a physical therapist (“PT”) with the performance of a Functional Capacity Evaluation (“FCE”) on a limited and restricted basis. A PTA may not perform FCE’s independently. The following principles support this position:

- The purpose of an FCE is to provide an objective measure of safe functional abilities compared to the physical demands of work.
- The performance of an FCE generally takes from four to eight hours over a period of one to two days.
- An FCE is an evaluative procedure, the performance of which is limited to PT’s.
- A PTA may assist in the practice of physical therapy, but may not perform evaluations. NCGS §90-270.24(3).
- A PT should only delegate those limited aspects of an FCE that are appropriate to the PTA’s education, experience, knowledge, and skill.
- A PTA may participate in the collection of objective data. It is the responsibility of the PT to interpret data.
- A PTA may participate in the performance of objective tests and measures that do not require evaluation or the judgment of a PT.
- Data collection, tests and measures performed to assess patient response during an FCE require a different set of skills than data collection, tests and measures performed in connection with patient intervention.
- Training and education beyond entry-level skills are required before a PTA can assist a PT with an FCE.

Conclusions

- An FCE must be performed by the PT.
- Before proceeding with an FCE, the PT must assess the patient’s medical condition and whether the tests can be performed without further injury to the patient.
- A PTA can utilize a form to ask a patient questions regarding medical history, incidents of pain or dysfunction and work history.
- If a standard form is used to obtain responses from each patient to basic questions, a PT must ask any questions generated by the patient’s responses to the basic questions.
- When assisting with the performance of an FCE, a PTA cannot perform tests of cardiovascular or pulmonary capacity, observations of integumentary changes, or assessments of musculoskeletal or neuromuscular function.
- An appropriately trained PTA may perform objective tests and measures related to strength and lifting and range of motion.
- A PTA can determine whether a patient is performing a test in a safe and correct manner.
- A PT must make all observations that require an evaluation or determination, including whether a task can be performed in the workplace, at what level a task can be performed, or how long the task can be performed.

- Any observations made by a PTA should be reported to the supervising PT.
- A PTA must document in the patient record all procedures performed by the PTA.

Position Statement 17. Utilization of the Physical Therapist Assistant to Assist the Physical Therapist With Patient Screens

It is the position of the North Carolina Board of Physical Therapy Examiners that the physical therapist assistant (PTA) is qualified and permitted by the North Carolina Physical Therapy Practice Act to assist the physical therapist (PT) with the performance of patient screens. A physical therapist assistant may not perform screens independently. The following assumptions support this position:

- The physical therapist retains the ultimate responsibility for the provision of physical therapy services.
- The purpose of a screen is to determine if an examination of a patient by a physical therapist is indicated.
- Screens may be either “hands-on” or “hands-off” procedures.
- The physical therapist should only delegate aspects of a patient screen that are appropriate to the assistant’s education, experience, knowledge, and skill according to the guidelines identified herein under: Delegation and Supervision.
- The physical therapist assistant may participate in the collection of data. It is the responsibility of the physical therapist to interpret the data.
- The physical therapist assistant may review the patient medical record to gather information to assist the physical therapist with the screen.
- The physical therapist assistant should never make a determination whether the patient needs to be seen by a physical therapist or another healthcare professional.

I hope this information is helpful to you.

Attachment 8



***Scope of Practice—Pediatric Feeding Therapy and Treatment of Tongue Tie Related Issues---
Questions for Board Consideration—Proposed Response—March 8, 2023***

In response to the questions posed to the NC Board of PT Examiners “is feeding therapy and treatment of tongue tie related issues within the scope of PT practice in NC” and related billing, the Board considered the questions at its meeting March 8, 2023.

In responding to physical therapy scope of practice questions, the Board considers Rule 21 NCAC 48C .0101, Permitted Practice, and other factors.(see rule below) After reviewing information from subject matter experts in various pediatric settings (from premature infants to school-aged children), whether pediatric feeding is routinely performed in practice and a part of entry-level and continuing education, the Board determined that aspects of pediatric feeding therapy and treatment of tongue tie related issues do meet the requirements of the NC PT Practice Act and Board Rules.

While aspects of pediatric feeding therapy such as positioning, postural related assessment and interventions, equipment assessment, and muscular strength/endurance may be within the PT scope of practice, the skill and knowledge required of physical therapists involved are considered advanced and would not be appropriate for an entry-level licensee to perform. The Board’s definition of “advanced training” can be found on the home page of the Board website under “Scope of Practice.”

Further, there are aspects of feeding therapy such as swallowing that are outside the scope of PT practice. When considering aspects of feeding therapy which are outside the scope of PT practice, additional training, continuing education, or experience would not qualify a physical therapist to perform these services. Feeding therapy teams often are multidisciplinary. According to Board Rule 21 NCAC 48C .0103 (a), Prohibited Practice, it is the responsibility of the physical therapist to refer out any aspect of pediatric feeding therapy beyond the scope of PT.

Treatment of tongue tie related issues is similarly determined to be within the scope of PT practice. As with feeding therapy, the skill and knowledge required of physical therapists involved are considered advanced and would not be appropriate for an entry-level licensee to perform. Advanced training, as previously defined by the Board, is required for physical therapists involved in the evaluation and treatment of pediatric patients with tongue tie related issues.

Since both pediatric feeding therapy and treatment of tongue tie related issues are considered advanced skills for the physical therapist, a PT student should only perform these skills under the supervision of a trained, educated, and competent physical therapist. Pediatric feeding therapy and treatment of tongue tie related issues would not be within the scope of a PTA.

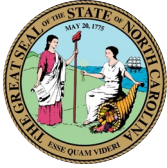
In response to the billing questions, billing and payment policy are not under the jurisdiction of the North Carolina Board of PT Examiners. The Board's recommendation would be to contact payers directly or seek information from the APTA-NC or the APTA.

21 NCAC 48C .0101 PERMITTED PRACTICE

- (a) Physical therapy is presumed to include any acts, tests, procedures, modalities, treatments, or interventions that are routinely taught in educational programs or in continuing education programs for physical therapists and are routinely performed in practice settings.

Attachment 9





NCBPTE Licensee Counts

Category	02/20/2023	02/17/2022
All Licensees		
Active Licensees	14184	13741
Dropped licensees	15852	15062
Active licensees living in NC	12774	12371
Active licensees not living in NC	1416	1370
Compact Privileges (currently active as of 2/20/23)*	353(from FSBPT)	237 (from FSBPT)
Military Temporary Permits (active as of 2/20/23)**	30	24
Dropped Compact Privileges (currently expired as of 2/20/23)	274{from FSBPT)	118 (from FSBPT)
Physical Therapists		
Active licensees	10064	9663
Dropped licensees	11930	11381
Active PTs living in NC	8991	8640
Active PTs NOT living in NC	1100	1036
Active PTs working in NC	8564	8834
Active PTs NOT working in NC	1076	1141
Active PTs living in NC with no business address	997	1565
Active PTs NOT living in NC with no business address	332	391
Physical Therapist Assistants		
Active licensees	4120	4078
Dropped licensees	3922	3681
Active PTAs living in NC	3806	3744
Active PTAs NOT living in NC	316	334
Active PTAs working in NC	3781	3930
Active PTAs NOT working in NC	349	364
Active PTAs living in NC with no business address	437	818
Active PTAs NOT living in NC with no business address	70	141
Miscellaneous		
Total Exam PTs	117	125
Total Exam PTAs	70	74
Total Endorsements PTs	269	262(active in our system now)



NCBPT E Licensee Counts

Total Endorsements PTAs	92	85(active in our system now)
Total Exam Failures	32	21(since 1/1/2022)
Total Licensees-increase of 3.22%	14184	13741

* Additional compact information:

- Compact purchases from 2/17/2022-2/20/2023=324
- Compact purchased/renewed from 2/17/2022-2/20/2023=360
- Compact purchases refunded from 2/17/2022-2/20/2023=1

** Additional military information:

- Total military applicants from 2/17/2022-2/20/2023= 106
- Total military applicants licensed from 2/17/2022-2/20/2023= 51
- Total military permits issued from 2/17/2022-2/20/2023=53

Attachment 10



NCBPTE

Memo

To: NC Board of PT Examiners

From: Kathy O. Arney, PT, Executive Director

cc: David C. Gadd, Board Attorney

Date: 03-08-23

Re: Board Authority – Board Policy – All applications – active for one (1) year

The Board has several types of applications that are part of the process for applicants to obtain licensure, permits or practice privileges. The application types referred to for the purposes of this policy are as follows:

- Initial applications*
 - Exam and Endorsement - PT and PTA – CAPTE Education
 - Exam and Endorsement - PT and PTA - Foreign-Trained Substantially Equivalent Education
 - Exam - Military trained applications- PTA - Substantially Equivalent Education
- Renewal applications*
- Revival applications
 - Payment
 - Continuing Competence
 - Endorsement
 - 500 hours
 - Exam

Some of these applications are partially electronic * and the remainder are paper-based applications.

All applications are subject to the NC Functional Record Retention Schedule (FRRS) for the purpose of appropriate record maintenance and disposal. The Board is responsible for compliance with this schedule as it pertains to the NC Board of Physical Therapy Examiners.

The schedule allows for “Agency Policy” related to the destruction of records; the “application period” needs to be defined.

Historically, while complying with prior versions of the state record retention schedule, there were fewer types of applications and NCBPTE chose to keep all parts of all applications permanently. Volume of the number of applications and space constraints for housing paper and addressing electronic storage of records make it necessary to re-evaluate record retention maintenance and destruction in context of the new NC State Functional Record Retention Schedules.

It is recommended the Board consider a motion to approve a one (1) year active application period for all types. This means, that after the one (1) year active application period, the applicant will be required to re-apply and pay any applicable fees. Records that were part of the initial file should be kept for the duration of the FRRS, then destroyed.

Certain application types may take longer than one (1) year to be completed. For example, those applicants with educational deficiencies such as international education or military training that is not substantially equivalent to the entry level CAPTE PT/PTA education required in the US or without social security numbers. To address these known potential variations from the one (1) year active application period, applicants will be encouraged to assure that all application requirements are met or can be obtained within one year prior to application to avoid the need for reapplication and paying of additional fees. This information will be posted in multiple locations on the Board website and on documents or electronic applications.

If an application is received where staff identify that the application may exceed the one (1) year active timeframe, they will be encouraged to provide information to the applicant, making them aware of the fact that required documents they may need to resubmit could be destroyed after the active application period and they should maintain an original copy for future reference and potential resubmission.

NC Board of PT Examiners verifies documents required with applications are received from primary sources. As the profession of physical therapy matures in years, so do entities that provide primary source documents (educational institutions, various credentialing agencies or testing entities). These other entities have their own record retention schedules and they may not keep documents longer than a few years, thus, applicants may need to provide an original notarized copy of a document, if all other options for primary source document submission are exhausted.

Motion: Approve a one (1) year active application period for all applications to the NC Board of PT Examiners.

Attachment 11



Memo

To: NC Board of PT Examiners

From: Kathy O. Arney, PT, Executive Director

cc: David C. Gadd, Board Attorney

Date: 03-08-23

Re: Board Authority – Delegation to staff for review and approval of routine revival applications

Licenses who do not renew by the January 3, 5:00 p.m. deadline have their licenses lapse. They may "revive" their license after that time with methods outlined in the Board rules. 21 NCAC 48G .0203. (See rule reference below) With the advent of Continuing Competence requirements in 2009, staff (Deputy Director) assisted licensees with revivals and the Executive Director signed off after reviewing routine applications. Completed applications were then sent to the licensing staff to reinstate the license in the database system and enable the license to show as active on the Board website.

Routine applications for revival would be defined as payment, continuing competence, endorsements and CAPTE accredited exam candidates without disciplinary actions or criminal convictions about which the Board must review and make a determination. The Board would also review and make decisions regarding non-CAPTE accredited exam revival candidates and those reviving by the 500 hour method.

In 2022, this process was scheduled to become an online application, but, was delayed due to other priorities. In late 2022, the new Deputy Director and staff revised the paper application and process to modernize it. The Deputy Director and Executive Director continued the previous review and sign off as previously performed.

The Executive Director recommends the Board expressly allow certain trained staff, as selected by the Executive Director, to review and approve routine revival applications as noted above for return to active status.

21 NCAC 48G .0203 REVIVAL OF LAPSED LICENSE

(a) A license that has been lapsed less than one year may be revived by payment of the **revival** of lapsed license fee and the current year's renewal fee and by completion of the **revival** form.

(b) A license that has lapsed more than one year but less than five years may be revived by completion of the **revival** form, and:

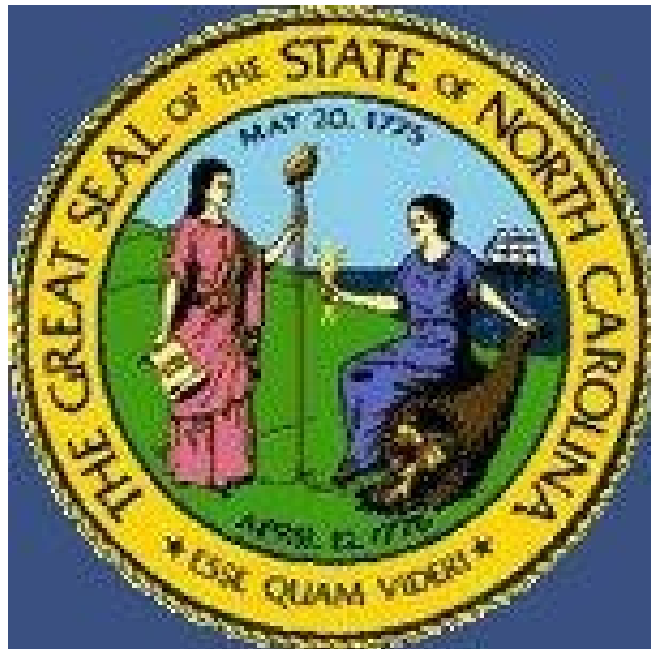
- (1) completing 30 units (if reviving a physical therapist license) or 20 units (if reviving a physical therapist assistant license) of continuing competence as provided in the rules in this Subchapter;
- (2) payment of the **revival** of lapsed license fee; and
- (3) payment of the current year's renewal fee.

(c) A license that has lapsed more than five years may be revived by completion of the application forms; and

- (1) passing the "PT exam" (if trained as a physical therapist) or the "PTA exam" (if trained as a physical therapist assistant);
- (2) compiling at least 500 hours within the period of one year in the following manner: between 50 and 200 class hours of course work (ie, refresher course, continuing education, pertinent college courses) approved by the Board as designed to demonstrate proficiency in current physical therapy theory and practice, and the remaining hours working as an aide under the supervision of a licensed physical therapist; or
- (3) endorsement of a current license in another state as provided by 21 NCAC 48B .0102.

*History Note: Authority G.S. 90-270.92; 90-270.99; 90-270.100;
Eff. February 1, 1976;
Readopted Eff. September 30, 1977;
Amended Eff. January 1, 2009; August 1, 1998; August 1, 1991; October 1, 1989; April 1, 1989; May 1, 1988;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. May 1, 2018.*

Attachment 12



**NC Board of PT Examiners
Profit and Loss YTD Comparison
July - December**

	2021	2022	VPY	Comments
Income				
PT - Compact	4,250	4,450	200	
PT - Exam	24,150	28,800	4,650	
PT - Endorsement	28,350	38,700	10,350	
PT - Renewal	582,644	611,645	29,001	Renewal Running above PY
PT Revival Fees	3,750	7,950	4,200	
Total PT Income	643,144	691,545	48,401	
PTA - Compact	900	650	(250)	
PTA - Exam	5,250	5,850	600	
PTA - Endorsement	7,950	7,800	(150)	
PTA - Renewal	171,960	192,600	20,640	Renewal Running above PY
PTA Revival Fee	2,550	3,150	600	
Total PTA Income	188,610	210,050	21,440	
Background Check Fees	18,256	22,513	4,258	
Credit Card Processing Fee	32,218	36,498	4,280	Higher Renewal Volume
Interest Income	2,917	7,407	4,490	Higher Rates and Balance
Other Income	1,466	2,747	1,281	
Total Income	898,491	982,768	84,277	
Expenses				
Staff Wages	421,278	389,282	(31,996)	Fewer Full Time Employees
Retirement Contribution	23,525	23,329	(196)	
Insurance	85,174	67,566	(17,608)	
Payroll Taxes	27,732	30,771	3,040	
Other Employee Benefits / Expense	3,379	17,772	14,393	Travel for IT Department
Total Employee Cost	561,088	528,720	(32,367)	
Contractors	112,460	75,200	(37,260)	
Professional Fees		77,864	77,864	IDX
Accounting Fees	12,756	11,999	(758)	
Legal Fees	29,371	43,417	14,046	
Total Professional Expense	154,587	208,480	53,893	
Total Board Expense	4,268	10,158	5,889	
Investigations Expense	2,608	8,130	5,521	
Telephone Expense	6,235	5,001	(1,234)	
Computer License & Services	11,350	13,725	2,375	
DP Equipment Depreciation		14,355	14,355	Timing of Booking Depreciation
Total IT Expense	17,585	33,081	15,496	
SBI - Background Fees	17,138	17,556	418	
Office Rent	34,477	50,916	16,439	Rent Annual Esculation
Office & Facilities Expense	15,901	20,711	4,809	
Office Insurance	716	14,554	13,838	Timing of Booking D&O Insurance
Bank & Credit Card Fees	17,980	20,451	2,471	
Other Expense	987	(14)	(1,002)	
Total Expenses	827,336	912,741	85,405	
Operating Income / Loss	71,155	70,026	(1,129)	
Gain / Loss Fixed Asset Disp	200		(200)	
Net Income / Loss	71,355	70,026	(1,329)	

Attachment 13



NC Board of PT Examiners
Balance Sheet
As of December 31

	2021	2022
ASSETS		
Bank Accounts	3,107,015	3,278,408
Prepaid Rent	13,515	-
Prepaid Warranty	571	-
Prepaid Expenses	27,550	32,904
Furniture & Fixtures	298,534	264,312
Accumulated Depreciation	(187,265)	(201,196)
Net Assets	111,268	63,116
Lease Payment Asset	527,114	451,812
Total Assets	3,787,033	3,826,240
Liabilities		
Accounts Payable	8,826	20,448
Payroll Liability	571	420
Accrued Vacatio Payable	108,452	79,033
Lease Liability	527,114	471,880
Total Liabilities	644,963	571,782
Equity		
Investment In Assets	81,537	-
Replacement Of Property & Equip	100,000	200,000
Reserve For Building Acquisitio	735,000	-
Unanticipated Litigation Costs	800,000	1,250,000
Information Technology Reserve	450,000	425,000
Continuing Education Reserve	50,000	50,000
Payroll Reserve	290,000	600,000
Retained Earnings	635,533	659,432
Net Income		70,026
Total Equity	3,142,070	3,254,458
Total Liabilities And Equity	3,787,033	3,826,240

Attachment 14



Board Meeting – March 8, 2023

K. Report from Deputy Director

Submitted by Ellen Roeber, PT, DPT, NCBPTE Deputy Director

I began my journey as Deputy Director here at the Board on October 5, 2022. As of January 2, 2023, I am transitioned into a full-time role. Given one of my primary job responsibilities is continuing competence which includes license revivals, I have hit the ground running. Debbie Ragan, recently retired DD, and Kathy Arney, ED, have spent hours and critical time bringing me up to speed in order to be successful in the role of DD. The following is a summary since December 2022.

Continuing Competence:

- 18 course approvals for CY 2022; 1 for 2023 with (2) just received for review and (2) awaiting additional supporting documents.
- 30 active exemptions for over 65 and no new hardship requests since last meeting; 100% follow-up with all exemptions from 2021-2023 reporting periods with 5 who did not renew their license and remainder who both submitted updated exemption for 2023-2025 AND renewed their license.
- Continue to answer numerous questions regarding continuing competence via email and voicemail from licensees; as a result, will schedule interactive webinar for this CY prior to the opening of renewal season in effort to provide education and resource for licensees.

Webinar Development:

- Goals related to webinar development:
 - 1) Create a library of on demand resources for licensees to educate licensees and improve efficiency of office staff (i.e., can direct licensees to these resources).
 - 2) Create webinar for “major topics” based on license applicants and/or licensee needs. Currently, the following are completed or planned: a) PT and PTA License Renewal; b) PT and PTA License Revival; c) Continuing Competence; and d) Applying for NC PT or PTA License.
- With David Nall and Debbie Ragan’s assistance, hosted (2) interactive webinars entitled “PT and PTA License Renewal.” Well attended and received. Only minor updates to content for the (2) but (2) done due to timing (one earlier in renewal cycle and the other later in renewal cycle) and to improve internal logistics. As a result, DD has worked with IT to create a “webinar library” space within the Board website where this and future webinars will be housed. We continue to work on details of offering “course certificates” for the live participants. Otherwise, webinar library is up and running smoothly.

Revivals:

DD helped shepherd update in-office process for all PT and PTA license revivals. Board staff task force included ED, DD, Finance/Licensing Manager, Executive Assistant, and Office Administrator.

Goals of this project as follows:

- 1) Improve efficiency (particularly of time from initial application OR submission of first supporting document to revival).
 - 2) Prevent errors during the revival process.
 - 3) Prevent loss of original application data in admin tool.
 - 4) Improve communication with revival applicants.
 - 5) Improve consistency of revival process amongst all team members.
 - 6) Prepare revival process for next phase in moving fully electronic.
-
- Since February 1, 2023, 64 revival applicants have been revived using updated process.
 - Board staff task force follow-up meeting led to further improvements after “lessons learned” compiled.
 - Early indication that updated process will meet goals.

Outreach:

- Communication with all accredited NC PT and PTA program chairs regarding educational content when related to scope of practice questions.
- Positive response to DD communication and agreement from program representatives to have Board staff participate in education of students regarding Board-related content.
 - 1) follow-up plan for DD is to identify best time/times to present information to students then create a learning module to complement the established content the ED has been delivering in person; this would allow all schools to interact with Board staff at least yearly.
 - 2) CY 2023 goal.

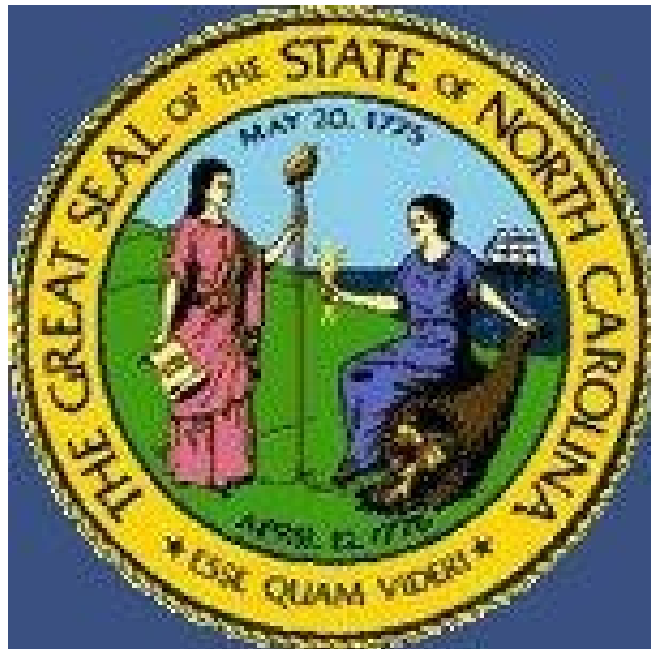
Public Protection Task Force:

- DD working on improving personal knowledge and competence in Board policies and procedures to be primary contact for PPTF members. Responsibilities include preparation of meeting agenda and supporting documents as well as responding to action items.
- First meeting as primary contact held February 22, 2023.

Other Responsibilities:

- Pursuing opportunities to become an active member of FSBPT.
 - Recently accepted role on financial committee for COMPACT
 - Registered for Regulatory Workshop March 10-12, 2023.
- Pursuing opportunities to become more knowledgeable regarding rules to assume primary responsibility for Rules Making Committee
 - Attending Rules Review Commission (RRC) meetings virtually
 - Registered for Rulemaking 101 workshop March 3, 2023
 - Training with Debbie Ragan and ED who both previously held this role for NCBPTE.
- Pursuing opportunities to become more knowledgeable regarding record retention to assume primary responsibility for the NCBPTE for record retention.
 - Attended Managing Public Records for State Agency Employees February 9, 2023
 - Training with Debbie Ragan and ED who both previously held this role for NCBPTE.

Attachment 15



IT Projects

2/30/2023

- **Continual functional updates** to both the website and Admin Tool.
- **Report Enhancements** - All Admin Tool reports were enhanced to have the download feature. Reports were rearranged and a new Lexus-Nexus report was created.
- **Renewal support**
- **Added a new Webinar Library** feature to the website
- Updates related to **SSN**. SSN is no longer visible from the Admin Tool). enhancement to Application.
- **Online Payment (Completed)** - Completed all online payments, fully integrating it to the Admin Tool.
- **Further integration with ELDD** (FBSPT automated feeds). Special changes to Exam report, license staging reports were done

Big Project

- **Person Project**. The goals of the person project is to make things simpler for licensees:
 - Unify all IDs a person has into one ID (Licenses, Permits, Compacts, Applications)
 - Provide a Dashboard where people can interact with each ID (renew license, create a new application, see payment history).
 - Add tighter security on the SSNs.

Planning

- **Online Revival** – Bring Revivals online.
- **Admin Tool Enhancements** – Upgrade its technology and security in preparation to move the Website and Admin Tool to the cloud.

External Software evaluations

- **A centralized log manager** – These products gather logs from Website, Router, Windows, Security Tools and send out alerts related to security and support. Rather than a person continually monitoring logs, this software automates the task. It can alert about Cyber Attacks, unusual and important events that you might not notice otherwise.
- **3rd Party Security monitoring** – These products let you know about the security of existing and future vendors. It helps to ensure that 3rd parties are not an additional security risk.

Attachment 16



NCPT Board IT Infrastructure Update

March 8, 2023

Completed Projects

Renewal/Revival Support – Partnered with Executive and Licensing staff in order to provide ongoing IT support to Staff members and Licensees.

Tenable Update and Security Sensor Install – Updated our Tenable Cybersecurity Virtual Machine (VM), which is used to perform scheduled vulnerability scans on our infrastructure. Partnered with NC Department of IT to install a CrowdStrike sensor on this VM, which ensures it is healthy.

KnowBe4 Cybersecurity Training – Successfully rolled out the first training module through KnowBe4, which was completed by 100% of our staff members. **CONGRATS Y'ALL!!!**

Current Projects

Reoccurring Tenable Scans – Continued partnership with NC DIT to expand the scope of scans performed by Tenable to gain further information on devices and potential vulnerabilities.

Board Member Email Addresses – Drafting best practice and procedure policies for the adoption of @ncptboard.org email addresses by the Board members. Discussing best method for roll out.

Review and Improve SharePoint – Currently review the current design and work flow being used by the staff within SharePoint, and make any necessary changes to help streamline its utilization

Pending Review/Approval

Softphone Integration – Previously acquired quote needs to be reviewed, discussed, and possibly updated. We continue to experience performance inconsistencies with the current on-premises phone system.

Centralized Log Analyzer/SEIM – This solution would allow us to centralize all logs for security services, devices, and important software, providing us with one place to review areas of concern.

Third Party Security Monitoring – This service would allow us to audit any vendor or provider before, during, and after we enter business with them. Allows us to view a history and report of their “cyber hygiene”.

Cloud Backup Solution – We have discovered that our current cloud backup solution, CrashPlan, has several limitations specifically in terms of data restoration. We have been shopping around for replacement providers.

Attachment 17



NCPT Board Member

Board Email Policy

Last Updated: February 20, 2023

1. Purpose

This policy serves to outline the requirement for and rules to govern the assignment and usage of a Board-issued email address for all active members of the North Carolina Board of Physical Therapy Examiners (NCBPTE).

2. Scope

This policy applies to all active Board members, and should be applied at their appointment, upheld during their tenure, and revoked at the end of their term of service to the Board.

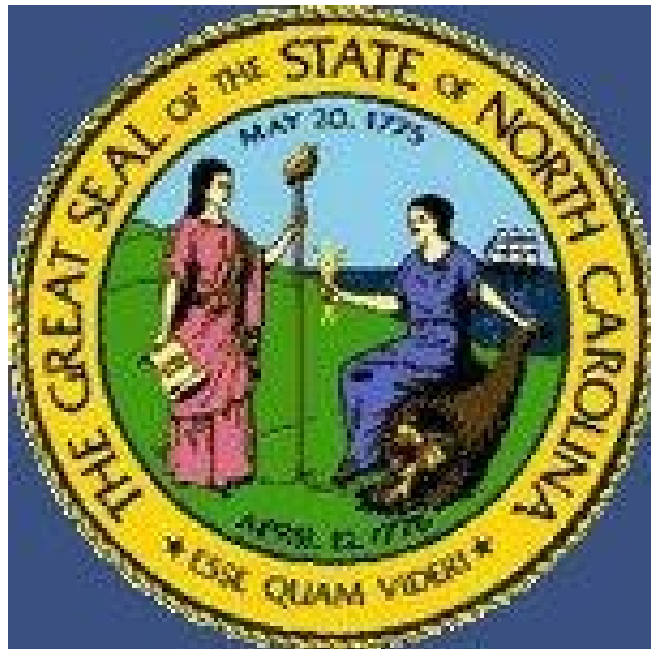
3. Policy

1. All NCBPTE Board Members must receive a Board-issued email address (example@ncptboard.org) at the beginning of their term as a Board member, which will be administered by the NCBPTE IT Department.
2. This Board-issued email address must only be used to conduct business applicable to the NCBPTE.
3. This email address, along with its mailbox contents and activity, may be subject to audits for the purposes of cybersecurity assurance and general troubleshooting.
4. Board-issued email addresses may only be assigned by a member of the NCBPTE IT Department.
5. All NCBPTE Board members must use their Board-assigned email address when conducting Board business or when using email as correspondence with Board Staff and fellow active Board members.
6. All Board members must use the Microsoft Outlook application when accessing their Board issued email address from their mobile phone.
7. Email attached documents are prohibited from being downloaded onto any personal devices, including mobile phones.
8. At the end of the Board members term, their access to the Board-assigned email address must be revoked, any applications removed from their personal devices, and its contents retained for future reference and archival.

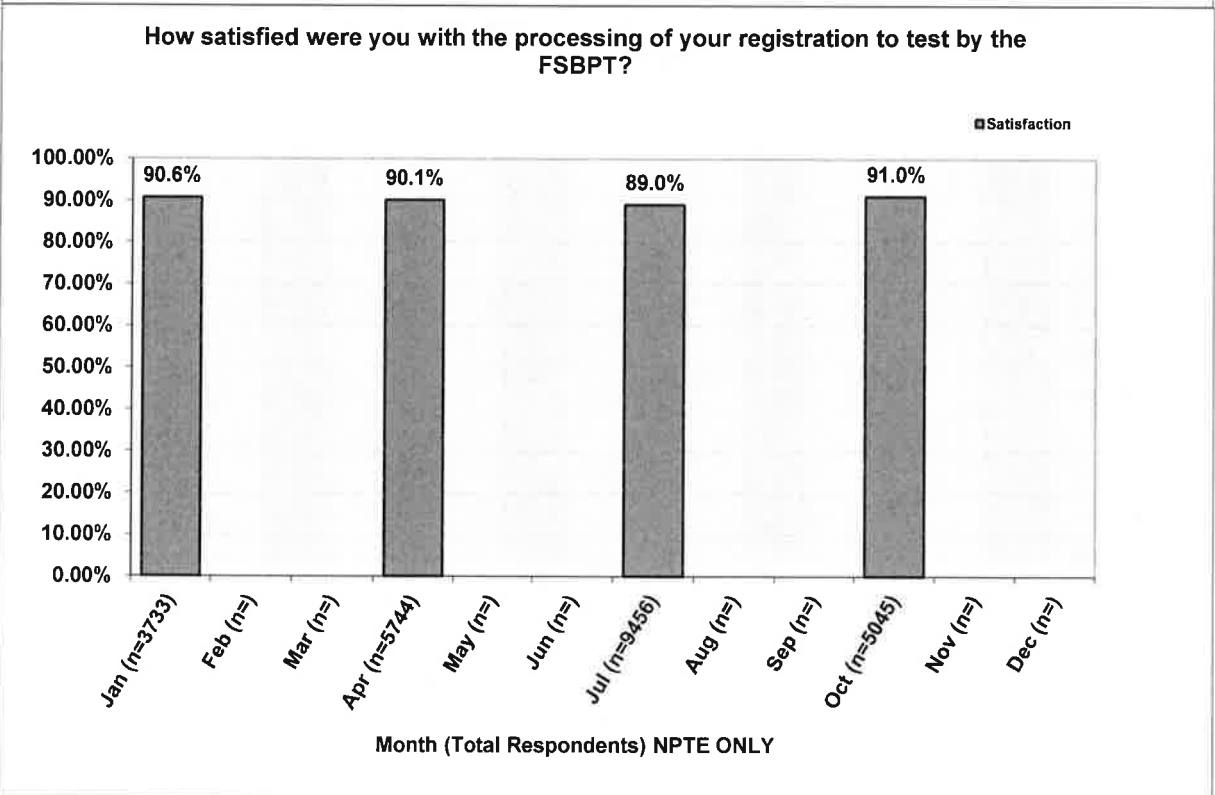
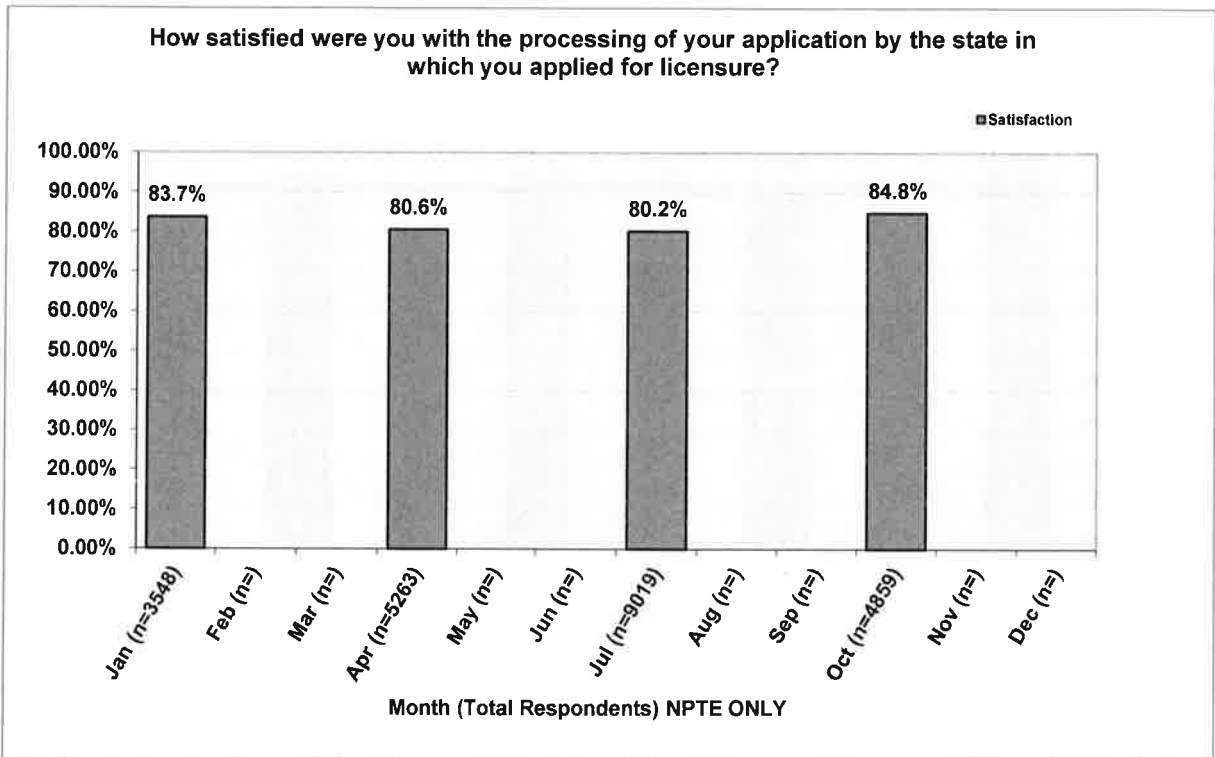
4. Future Revisions

This policy is subject to updates in accordance with changes in industry best practice or any other relevant policy.

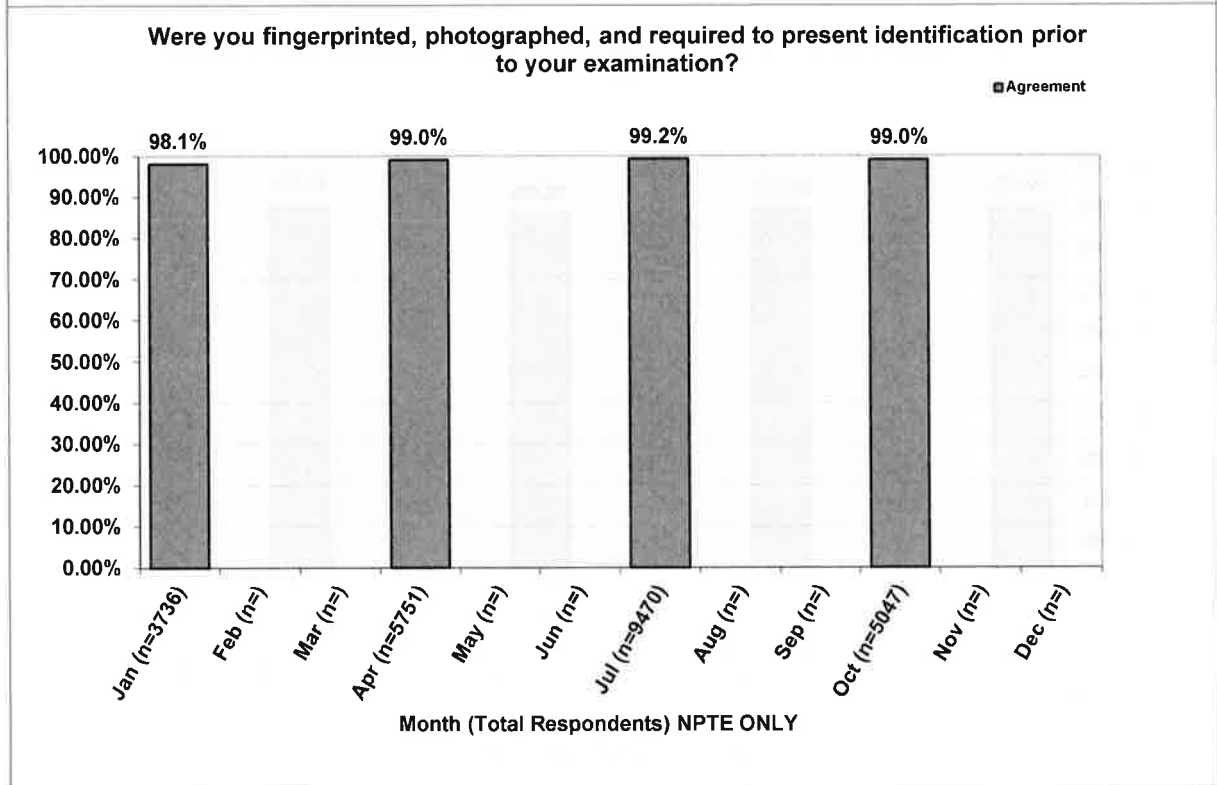
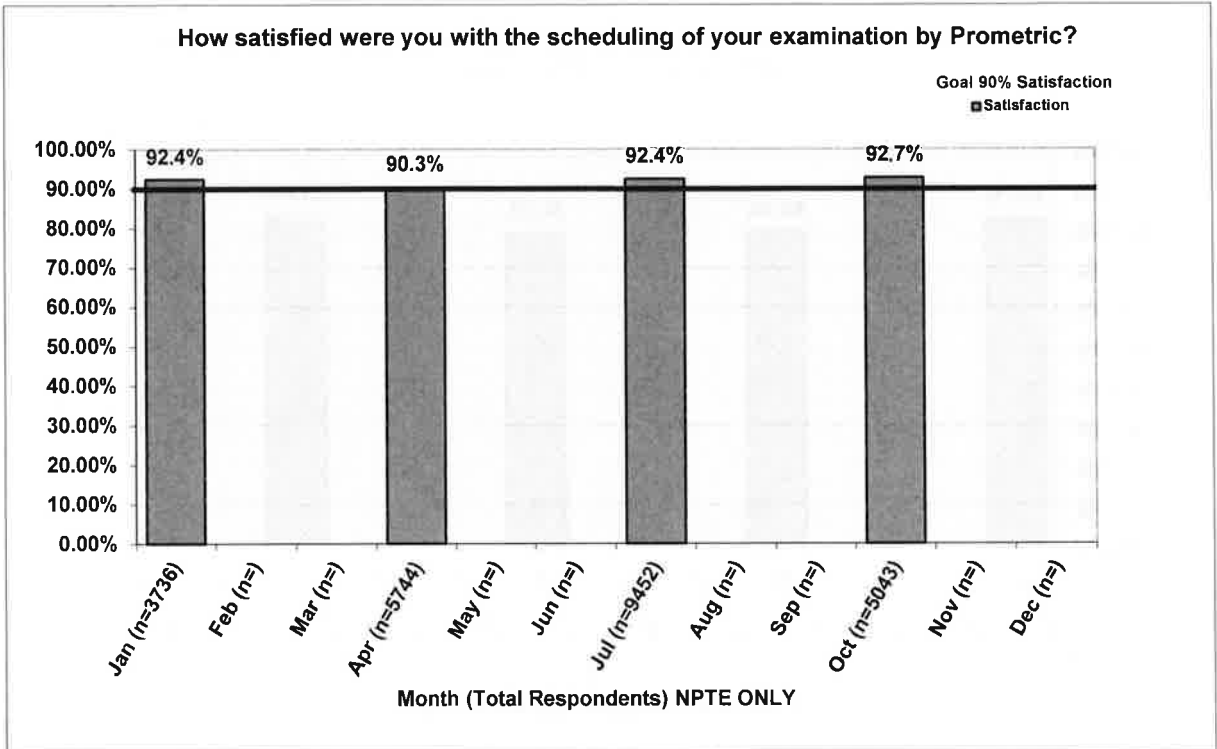
Attachment 18



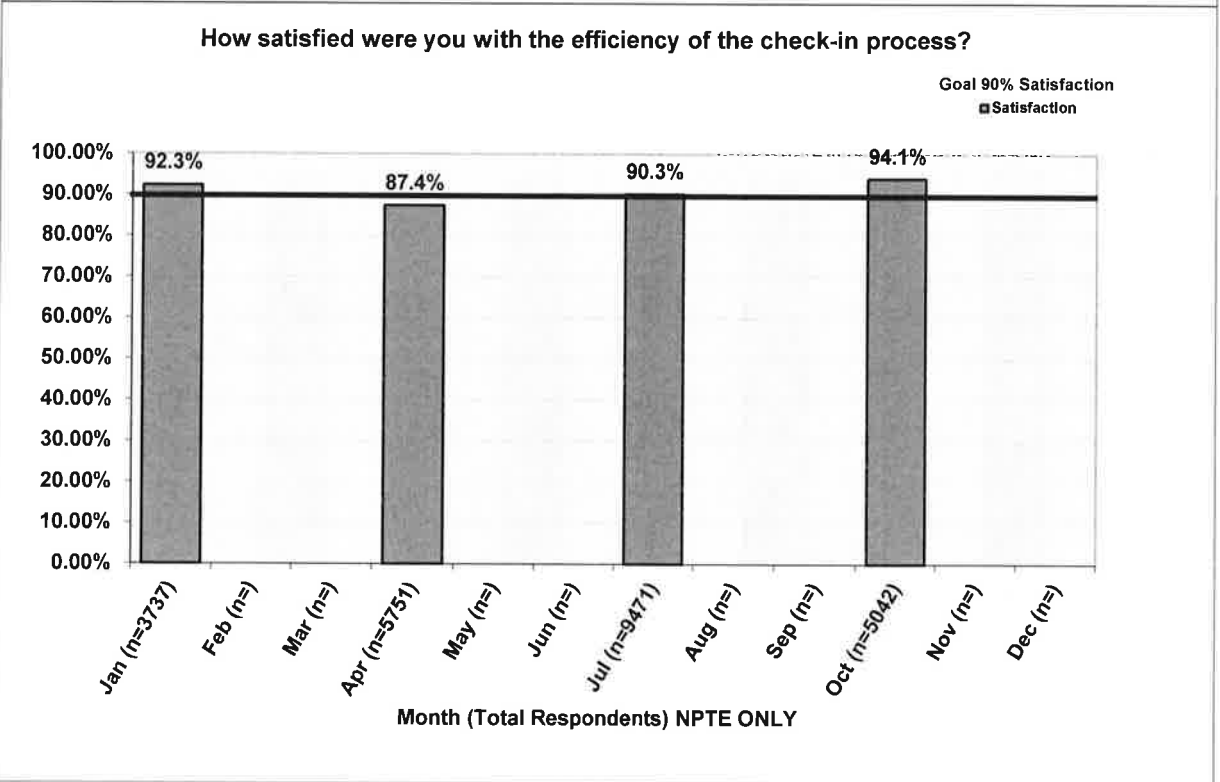
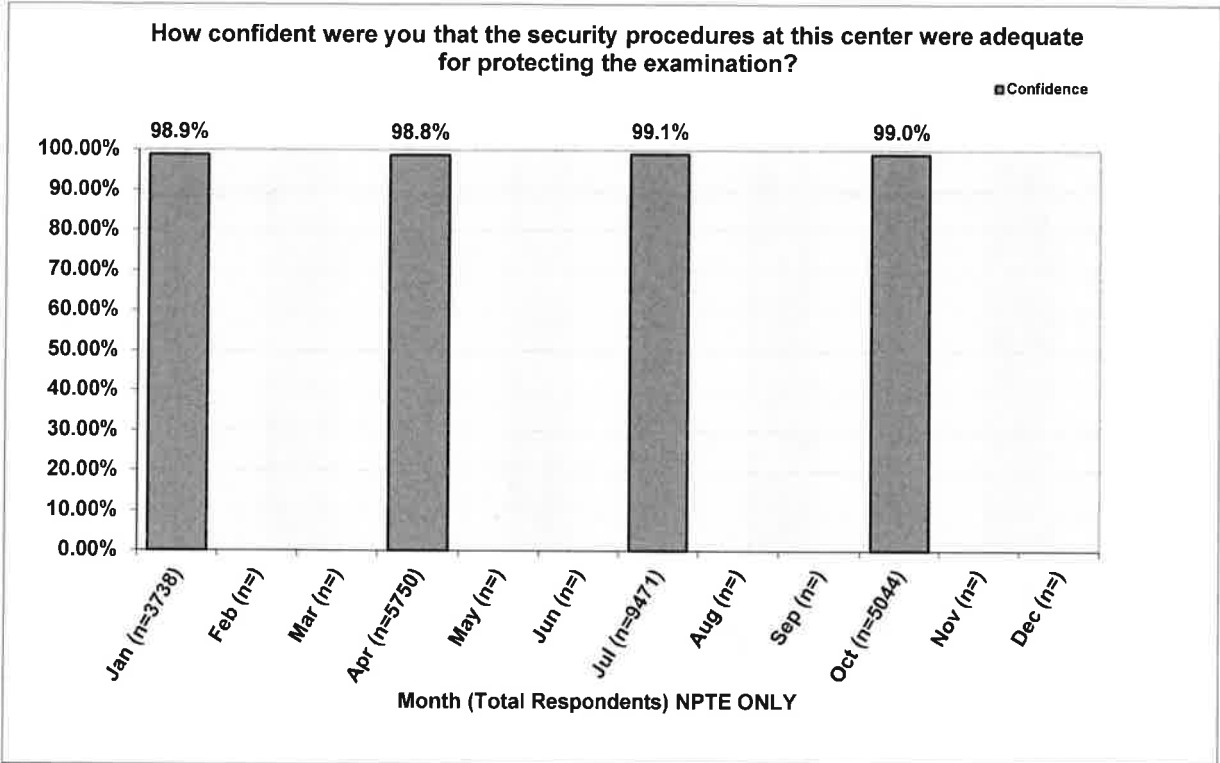
NPTE Survey Satisfaction By Month



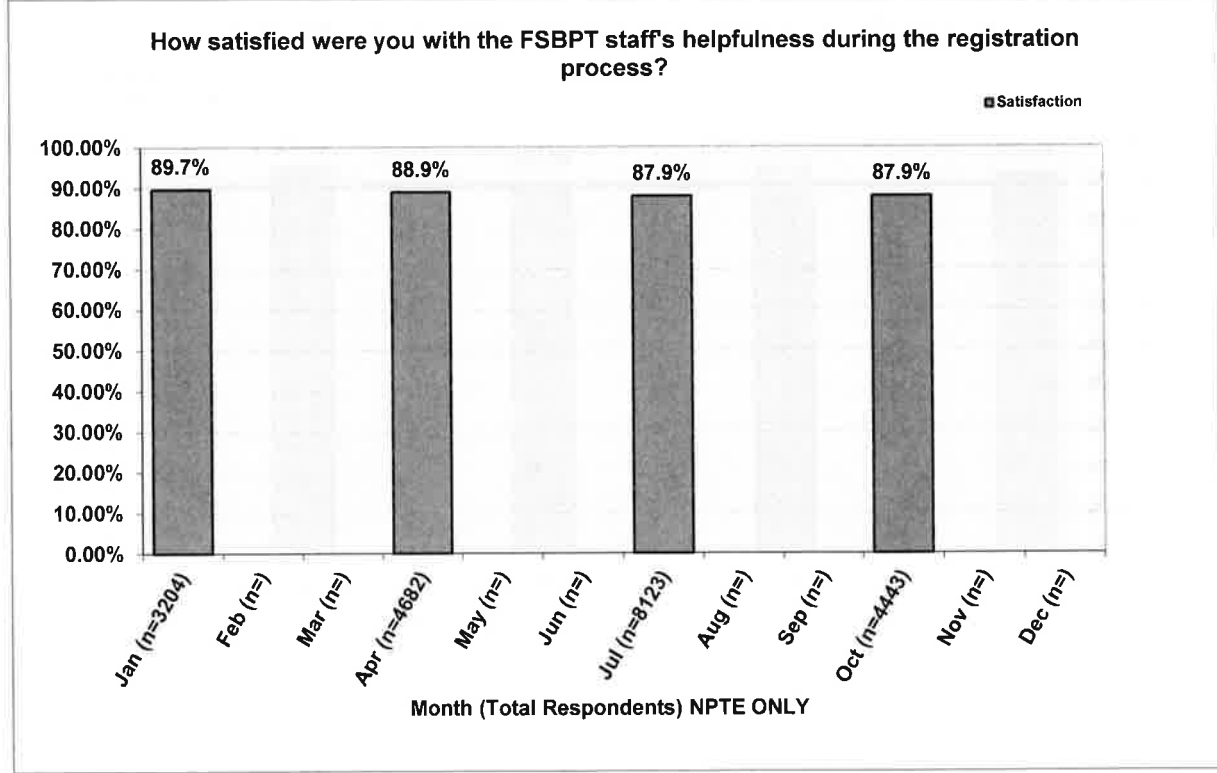
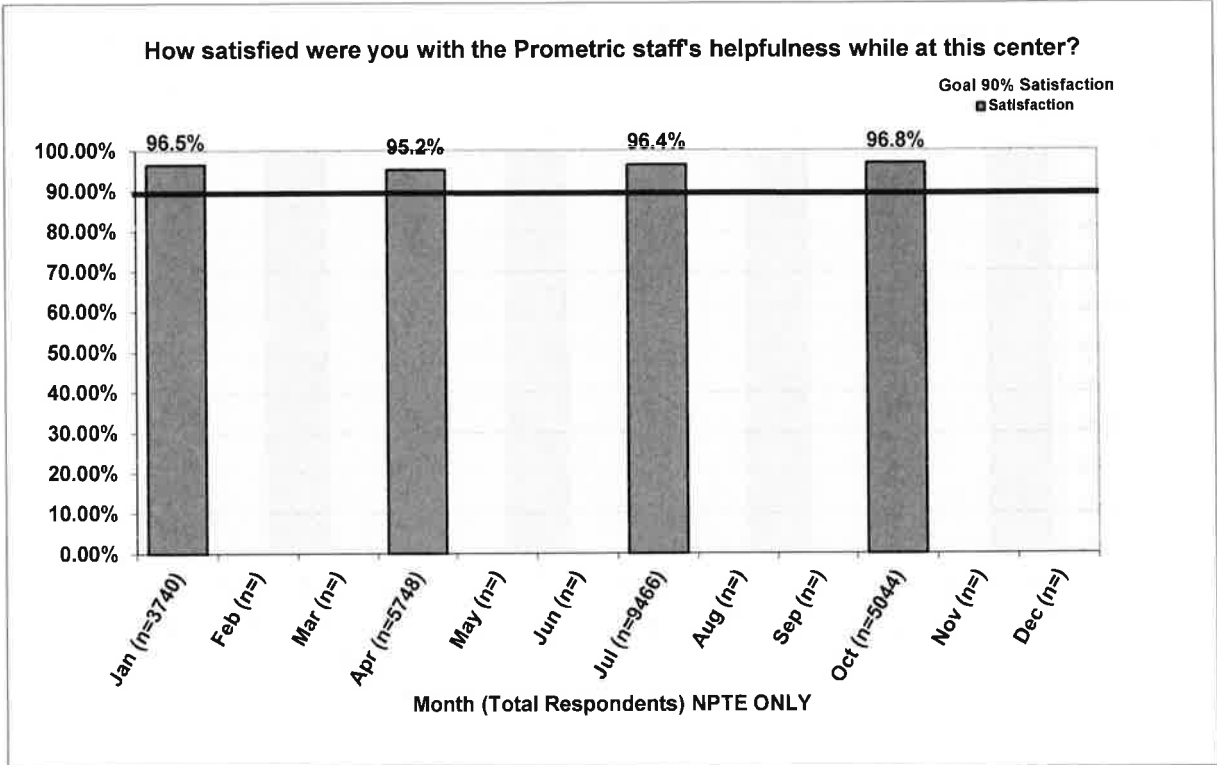
NPTE Survey Satisfaction By Month



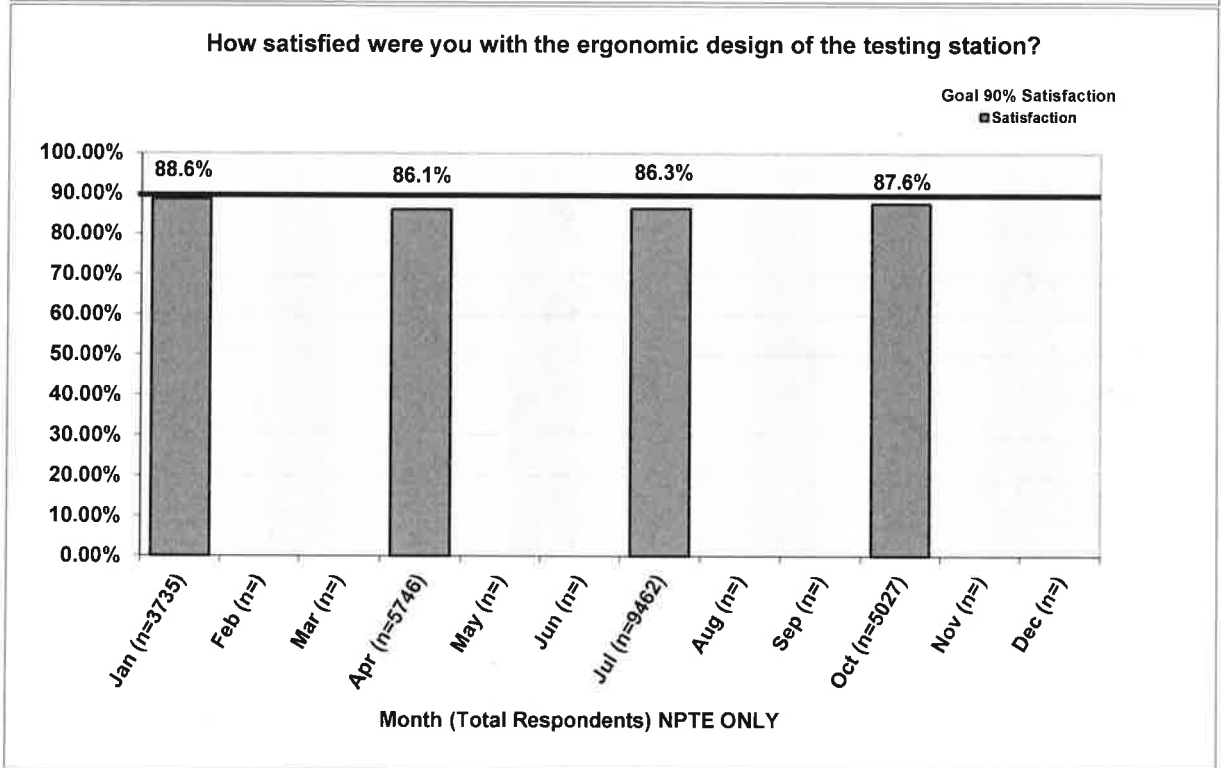
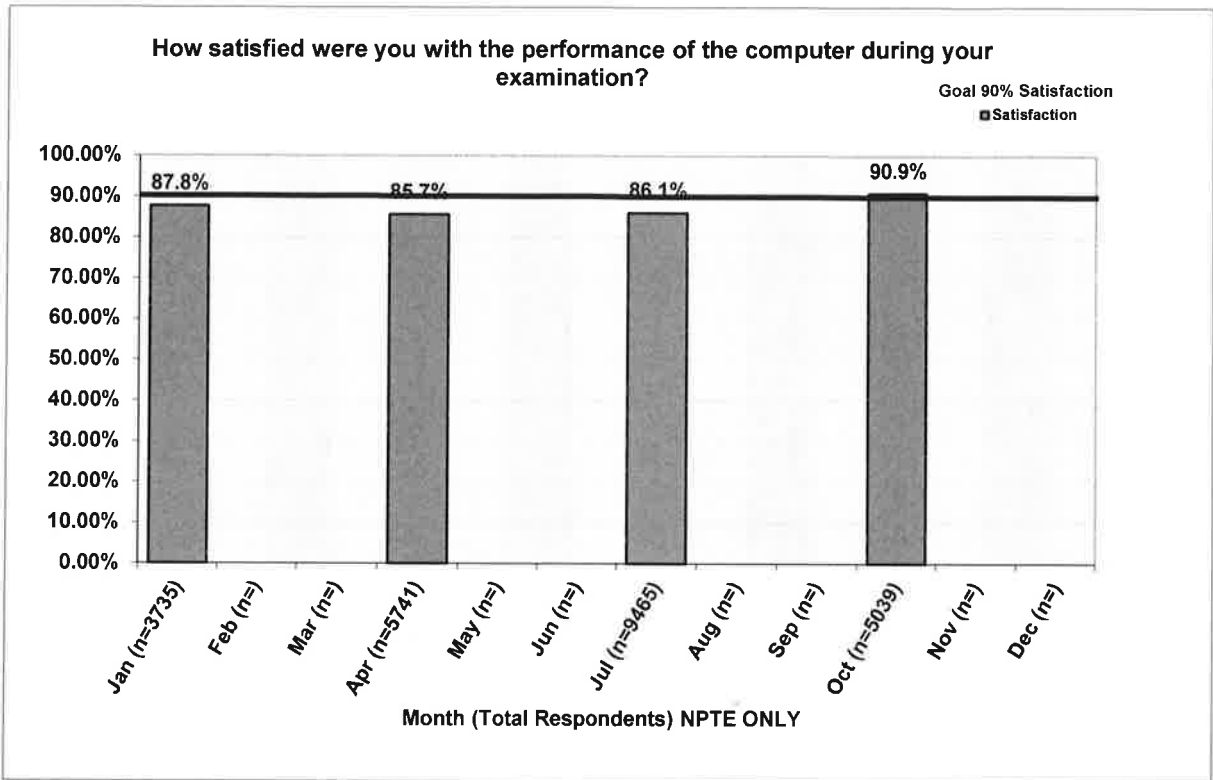
NPTE Survey Satisfaction By Month



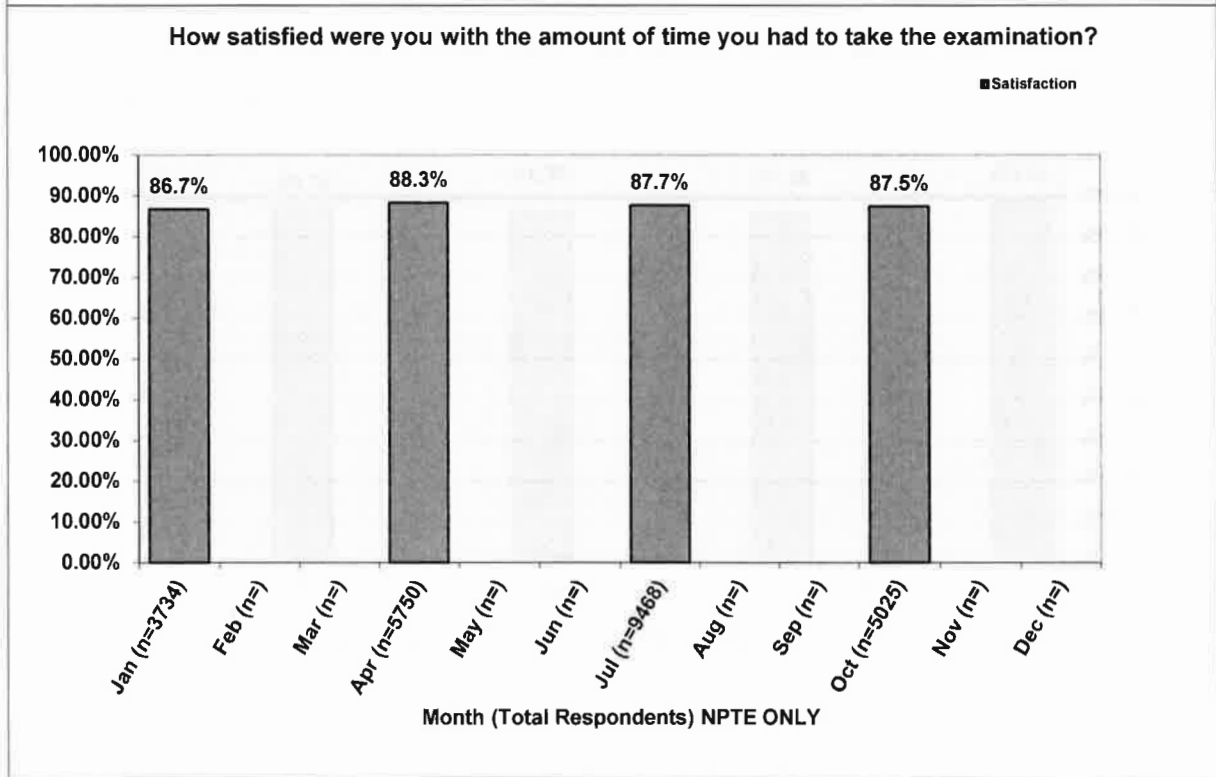
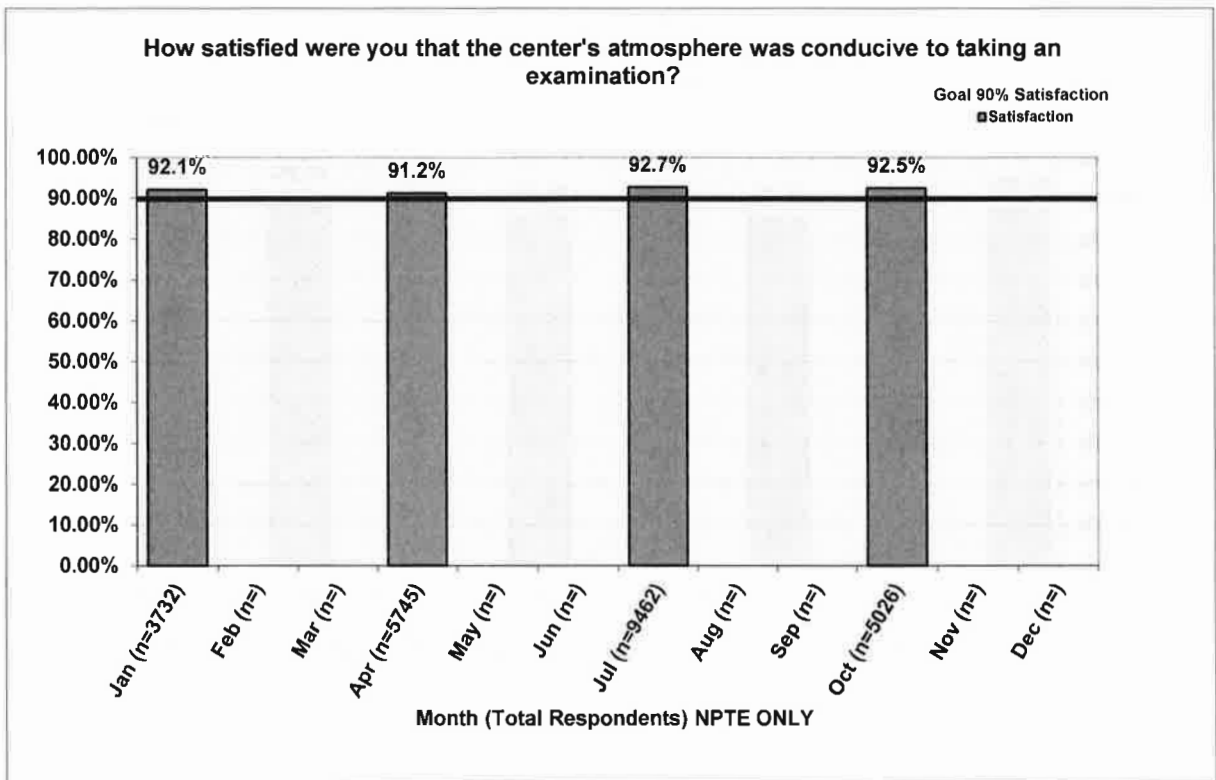
NPTE Survey Satisfaction By Month



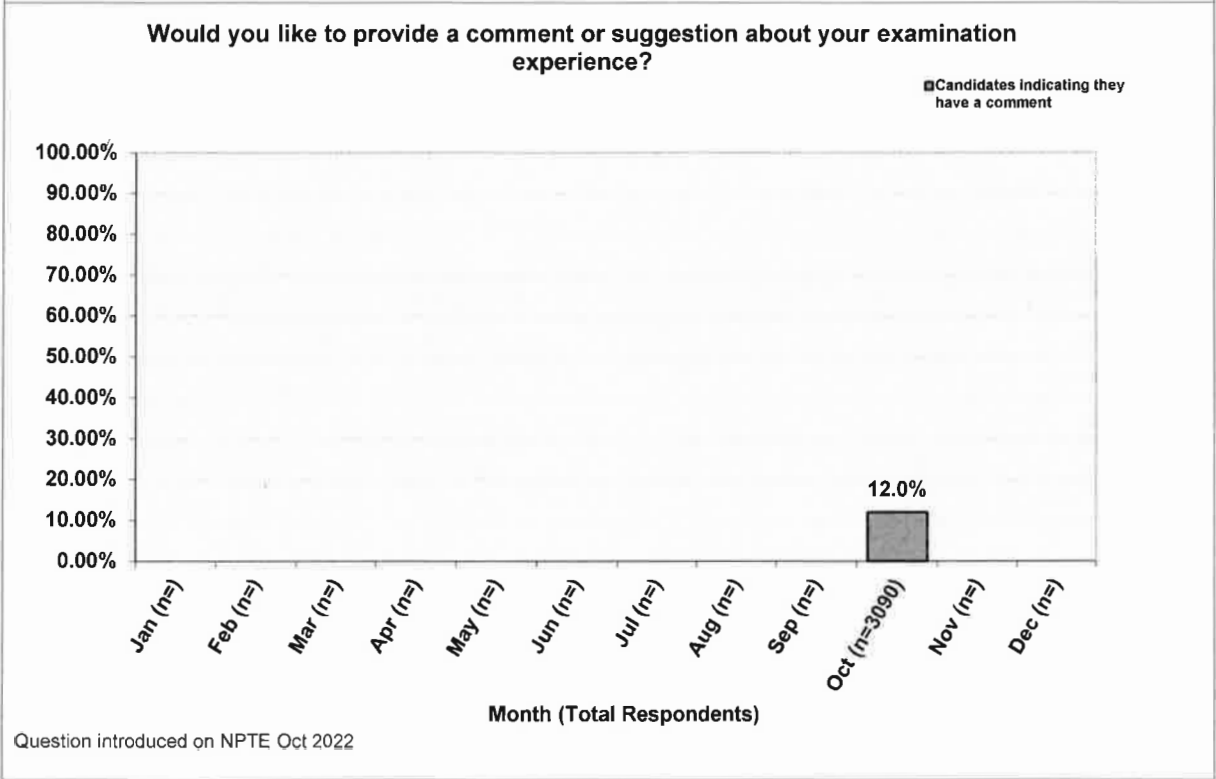
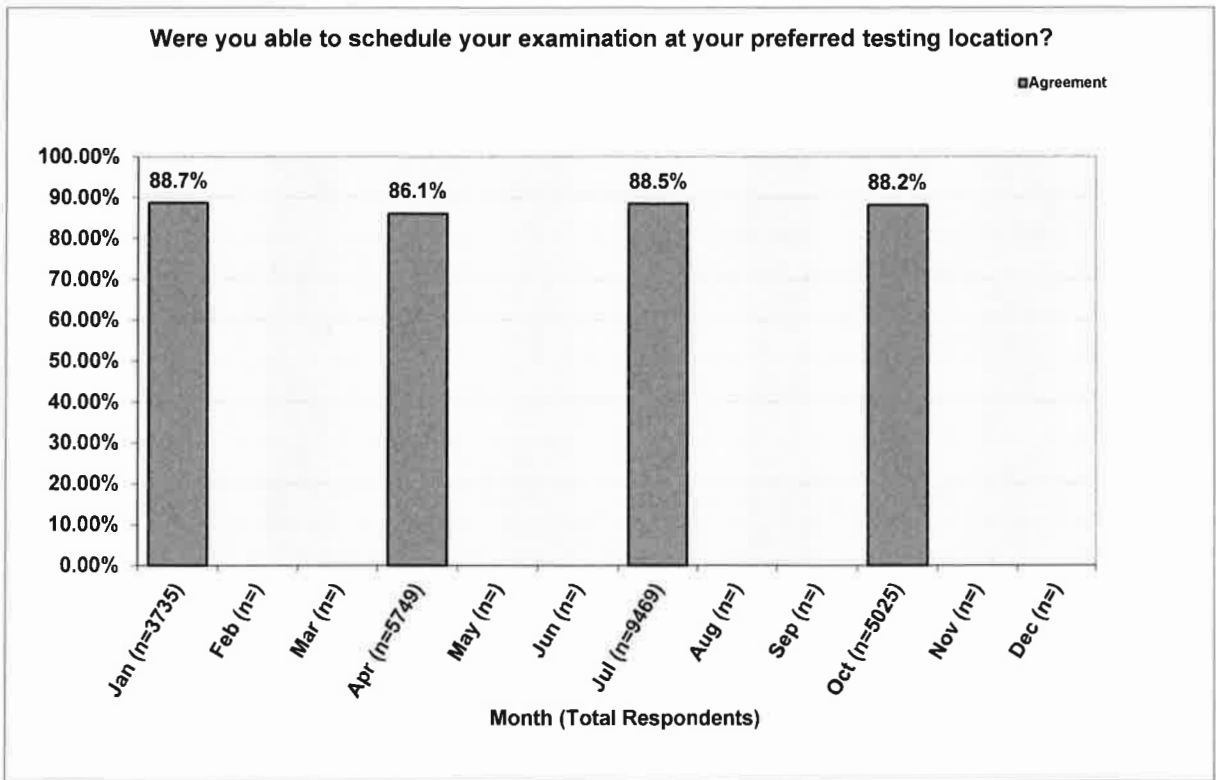
NPTE Survey Satisfaction By Month



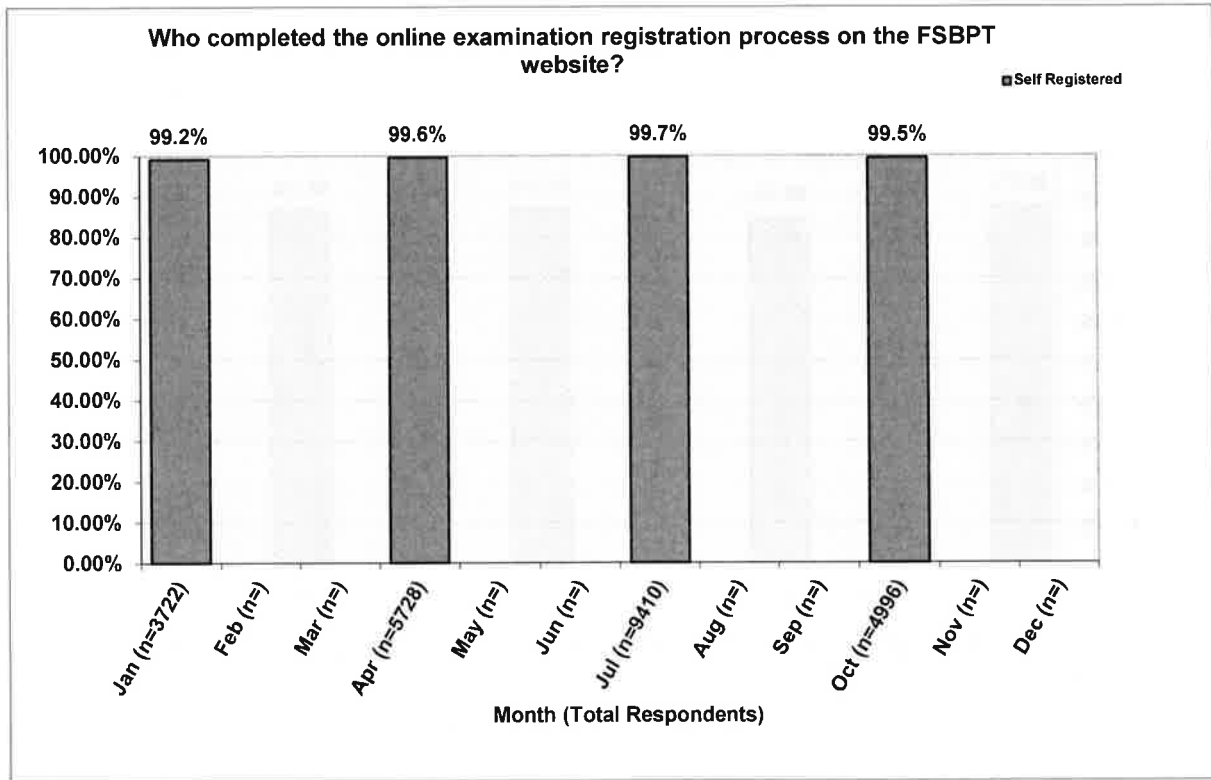
NPTE Survey Satisfaction By Month



NPTE Survey Satisfaction By Month



NPTE Survey Satisfaction By Month



Satisfaction with Application Processing by State 2022

Through December 31, 2022, **22,689** candidates completed the post-examination survey. The overall satisfaction rating for all jurisdictions on the question “How satisfied were you with the processing of your application by the state in which you applied for licensure?” is **82.33%**

The table below shows the satisfaction percentage by quarter for your jurisdiction on this question.

Satisfaction with Jurisdiction Registration Processing: NC

Quarter	Very Satisfied		Satisfied		Uncertain		Dissatisfied		Very Dissatisfied		I have not yet applied to my state/have not interacted with my state		Total	
	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	Count	%
Q1 2022	28	20.14%	66	47.48%	21	15.11%	11	7.91%	2	1.44%	11	7.91%	139	100.00%
Q2 2022	50	25.38%	104	52.79%	24	12.18%	6	3.05%		0.00%	13	6.60%	197	100.00%
Q3 2022	71	25.27%	132	46.98%	42	14.95%	22	7.83%	6	2.14%	8	2.85%	281	100.00%
Q4 2022	24	26.09%	53	57.61%	7	7.61%	4	4.35%		0.00%	4	4.35%	92	100.00%



Federation of State Boards of Physical Therapy
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Phone: 703.299.3100 Fax: 703.299.3110
Website: www.fsbpt.org

Candidate Comments Report: October 2022 NPTE

Candidates Seeking Licensure In:			North Carolina	
Licensure State	Test Center: City, State, Country	Exam Type	Candidate Name (Last, First)	Candidate Response
NC	1618: GREENVILLE, NC, USA	PT	METCALF, BAILEY	Much better experience than first exam as I didn't experience any technical difficulties with buffering to the next question.
NC	58: GREENSBORO, NC, USA	PTA	FERGUSON, MARIAH	Room temperature very low and cold, colder than other testing centers
NC	45: CHARLOTTE, NC, USA	PTA	SEVERANCE, MICHAEL	it was unclear that a secondary SIGNED photo ID was required. previous teswting with prometric did not require this
NC	27: RALEIGH, NC, USA	PTA	IBRAHIM, TATI-ANNA	The proctors for the exam where talking outside of the testing room, even though I was wearing ear plugs I was distracted several times during the exam. The lumbar section of the chair is no comfortable and I found myslef having to sit up to not lean on the bar on the back of the chair.
NC	49: COLUMBIA, SC, USA	PT	FOWLER, NATALIE	increased time to complete to allow for extra time taken needed for frequent rest breaks that took time out of exam. had to limit my anxiety reducing strategies and coping mechanisms because it would have taken up too much exam time. this was my second time taking this test. first time approved for frequent breaks during sessions to take meds, use the restroom frequently as a side effect of my diuretics, etc. the time it took for me to get up and do all that just once per session i think hurt my exam due to completely rushing the second half of exam. ability to get up and move my body to practice anxiety reducing strategies and take pills usse restroom etc would have been good. also bunch of stuff spelled wrong on my exam with occasional screen freezing taking up extra time I didnt even get to finish completeing my exam and i didnt eve get to fill in blank answers with guessees
NC	5170: FLORENCE, SC, USA	PT	KIMREY, TAMMY	The facility was fine overall, however during the exam very loud conversations could be heard from the building directly adjoining the facility. This made it extremely difficult to concentrate on the exam questions while such loud converstations (laughter, talking, etc) were being had.
NC	1608: ASHEVILLE, NC, USA	PT	MCNAMARA, KELLY	There was about a 2-3 second lag between each question which I think ate up some of my time. I still had some time leftover but it was definitely close. Also I would prefer paper and pencil for my notes over whiteboard and maker.
NC	58: GREENSBORO, NC, USA	PT	DENNER, NICOLE	continue to improve lag time. Especially as the test continues (later sections) there was a severe second to 2 second delay between screens. Which all add up and can negatively affect my ability to take test within a certain time frame
NC	45: CHARLOTTE, NC, USA	PT	COOK, ANNA	The people helping took 10 min to bring me mor paper to write on, the dry erase markers didnt work and the chairs hurt my back

