



## Letter from the Chair

by David Reed, Chair, PT, Board Chair

Whether or not we agree with the sentiment, the current relationship between regulatory bodies, the North Carolina Board of Physical Therapy Examiners included, and licensees is most often transactional in nature. Most of the time, licensees interact with the board to obtain a license and to renew the same. The work done by the board and staff between renewal periods, though often unrecognized, is vital to fulfilling the mission and charge of the NCBPTE: *To protect the safety and welfare of the public through the regulation of physical therapy by establishment and maintenance of minimum standards of practice.* In short, we are focused on protecting the public by ensuring that Physical Therapists and Physical Therapist Assistants in the state of North Carolina meet (or exceed) minimum standards of practice established by law and published board rules. This job requires year-round vigilance.

Traditionally, many regulatory bodies have taken a largely reactive approach to upholding minimum practice standards. In this case, an incident leads to harm/offense/or violation and discipline or punishment is delivered after the offense. The objectivity of this system is noble and the outcome is intended to be justice for those previous offenses. Often lacking in this system, however, is an eye to the future with questions of the systems, circumstance, and intent often pushed to the sidelines as irrelevant in the wake of harm having occurred, a violation committed, and a punishment

being due. It is exceptionally rare that I see a PT or PTA who willfully intended to harm a patient.

Our colleagues at the North Carolina Board of Nursing were among the first regulatory bodies to adopt a more proactive approach now gaining some steam in national regulatory circles – The Center for Patient Safety and Federation of State Boards of Physical Therapy included. Just Culture is a term used to describe a culture based on learning and oriented toward patient safety (Ochsner J., 2013 Fall;

*(continued on page 4)*



**North Carolina Board of Physical Therapy Examiners – (through October 19, 2017)**  
Left to Right: John Silverstein, Attorney; Crystal Morris; Paul Garcia, MD; Angela Hunter; Christopher Dunn; Stacia Britton; Stuart MacRoberts;  
Left to Right: JoDell King, Sec-Treas.; David Reed, Chair; Kathy Arney, ED



## Stepping into the Future: The Physical Therapy Licensure Compact and Reflections on Year One as NCBPTE Executive Director

*Kathy O. Arney, PT, MA, NCBPTE Executive Director*

For over four years the Federation of State Boards of Physical therapy (FSBPT), the American Physical Therapy Association (APTA), and other regulatory entities including the Council of State Governments (CGS), have worked diligently toward the creation of a physical therapy interstate compact. A Compact allows qualified licensees to obtain a privilege to practice in a participating Compact state and to practice physical therapy without the need to obtain and maintain a full licensure in that state. Compact legislation centers on regulation of physical therapy practice and provides patient access to physical therapists and physical therapist assistants through a practice privilege in participating states. House Bill 57 was proposed in the NC Legislature in February of 2017. The regulatory nature of the bill required a significant collaboration between the NC PT Board and NC Physical Therapy Association. With Board staff and Board's Attorney, John M. Silverstein, JD working in concert with NCPTA staff, Nancy Garland, JD, ED, Officers, Compact Committee, members and newly hired lobbyist, Alex Miller, this bill became law in NC on June 8, 2017, when Governor Roy Cooper signed the PT Licensure Compact legislation. Many in NC are to be congratulated on the team effort to see this come to fruition.

Along with 13 other state delegates, I attended the inaugural meeting, via Webex, of the Compact Commission on June 14, 2017. I was elected Vice Chair of the Commission and am working with other members to plan and implement the Compact. Building a foundation for something new, as we experienced during the advent of Continuing Competence requirements for renewal, is challenging work. There may be change over time, but the benefits for licensure portability among participating states to the public will begin once the first privilege is issued.

The first full Compact Commission meeting will be held November 5, 2017, at which, adoption of bylaws and rules, and processes for licensees to obtain privileges will be discussed. Mid-2018 is the estimated timeframe for issuing practice privileges in participating Compact states. To find

out more go to: [ptcompact.org](http://ptcompact.org) the official website of the PT Compact Commission. Over the next weeks and months new information will be posted as it becomes available. To obtain answers to your questions email: [info@ptcompact.org](mailto:info@ptcompact.org).

In reflecting on the first year as Executive Director of the Board, I have had the responsibility and privilege to be a part of a number of initiatives and ongoing actions of the Board. To name a few: enactment of the PT Compact and impending implementation of fingerprint and FBI criminal background checks for licensure applicants, continued navigation of an ongoing legal challenge to the NC physical therapy scope of practice, welcoming new physical therapist and physical therapist assistant educational programs to CAPTE accredited status in the state, modernizing licensing processes including expedited licensure for military members and spouses, and investigating complaints and effective responsiveness to the public we serve. The Board scope of work and responsibilities for public protection and licensing over 12,000 licenses are many and varied, not unlike the scope of physical therapy practice itself. These evolve and change in response to the standards in education and practice in physical therapy, legislative requirements, and technological advancements. In a recent conversation, I referred to the need to address and adapt or update in response to these myriad responsibilities is not unlike, "drinking out of a fire hose". The response to me was, that is unlikely to change, but the capacity to drink will increase. True words, in describing my experience of year one.

As my predecessor noted in his final reflections in last year's newsletter, a strong team is required to do this work and I am no less fortunate than he, to have an experienced, hard-working and creative team to work through both new and ongoing work challenges at the Board office. Our staff including Debbie Ragan, Cindy Kiely, Gregg Seipp, Angela Carter, Qiana Robertson and Kimberly Marousky remain committed to serving the Board and the public.



## Legislative Update

*By John M. Silverstein, Board Attorney*

In recent years, the Joint Legislative Administrative Procedures Oversight Committee (“APO”) has taken a more active role in assessing the efficacy of occupational licensing agencies (“OLA’s”). Following the issuance of a report by the General Assembly’s Performance Evaluation Division in 2014, and the 2015 United States Supreme Court decision in the case brought against the NC Board of Dental Examiners by the FTC, NC OLA’s have not only been waiting to see what specific proposals will be considered by APO, many have been proactive in both banding together and operating separately to propose legislation designed to anticipate issues of interest to legislators.

The primary example of the joint effort is House Bill 701, which passed the House in 2017, but has not passed the Senate. In its current form, this Bill would address several areas of concern identified in the PED report including:

- Consolidation of filing of reports required to be submitted by OLA’s with new data designed to provide a better view of an agency’s financial acumen and health.
- Rule-making requirements related to complaints and discipline.
- Elimination of cease and desist orders for unlicensed conduct.
- Authority for OLA’s to seek injunctive relief against unlicensed conduct.
- Resolution of jurisdictional disputes between OLA’s by the Office of Administrative Hearings.
- Requiring availability of electronic complaint submission via the OLA web site.

Another area of general concern to APO is the existence of barriers to entering occupations, and the increased cost to consumers of unnecessary

regulations. APO has attempted to assess this impact by examining regulations for the same occupations in states that border North Carolina. With specific reference to physical therapy, the introduction of House Bill 57 by the North Carolina Physical Therapy Association, which authorized the North Carolina Board of Physical Therapy Examiners to participate in the Physical Therapy Licensure Compact, was met with unqualified support in the Legislature because it addresses barriers to entry by providing portability for licensees in other states to also practice in North Carolina, as well as for North Carolina licensees to practice in other Compact states. The bill sailed through both chambers without dissent.

An unrelated amendment was added to the Compact legislation that is designed to make it easier for members of the Armed Forces and their spouses to obtain licensure quickly and inexpensively from all OLA’s. Not only in appreciation of their service to the country, but in recognition of the fact they are routinely required to move frequently, this legislation expedites the licensure process to enable them to enter practice quickly and efficiently. The NCBPTE has taken the necessary measures to ensure the requirements of this legislation are met.

There is other legislation of interest to physical therapy practitioners that is being contemplated, has been introduced, or even passed one chamber, but it is premature to discuss ramifications. Areas addressed include availability of public records, criminal background checks and telemedicine. With the greater attention to oversight of OLA’s being exhibited by APO, we must continue to monitor the priorities of the General Assembly. Stay tuned.

## Letter from the Chair *(continued from page 1)*

13(3):400-6). In practice, this means greater focus on the systems, circumstance, and intent of an offense. Where appropriate, greater focus on remediation of an issue would also be prudent in this approach to regulation. Acknowledging that the clear majority of care-providers, PTs and PTAs included, enter the field out of a sincere desire to improve the human condition, this seems a reasonable approach – to redirect or reorient mistaken intent toward best practices.

A Just Culture is the right thing for the public of the State of North Carolina. It's also the right thing for the care-givers whose care we are appointed to regulate. To be pro-active

with the intent of correcting misguided practice patterns means preventing future occurrences and the harm that potentially results. In this way, the NCBPTE fulfills its mission: *To protect the safety and welfare of the public through the regulation of physical therapy by establishment and maintenance of minimum standards of practice.* Further, the PTs and PTA practicing and working in the state of North Carolina can utilize the NCBPTE as a resource to maintain and exceed minimum standards for their practice without an incident having occurred.



## Continuing Competence – The Changing Definition of Competence

by Deborah J. Ragan, PT, DPT, NCBPTE Deputy Director

In the last newsletter, we touched on the statement by Zubin Austin, BSc.PhM, PhD in a keynote address at the FSBPT Annual Meeting on September 9, 2006: ***Rounding Square Pegs and Squaring Round Holes: The Challenge of Continuing Competence.*** His statement was:

“The challenge is to understand what ‘competence’ means from multiple perspectives- then developing standards to measure it.”

It seemed fitting to research the current national definitions and the current NCBPTE definition to better understand competence in the realm of physical therapy practice.

The FSBPT’s definition of competence (retrieved from [www.fsbpt.org](http://www.fsbpt.org)) is as follows:

- **‘Competence** is the application of knowledge, skills and behaviors required to function effectively, safely, ethically and legally within the context of the individual’s role and environment.’
- **‘Continuing Competence** is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development and implementation of a personal learning plan, and subsequent reassessment.’

According to NC Board of PT Examiners Board Rule 21 NCAC 48G .0105 (4):

- **“Continuing Competence”** means the licensee’s ongoing activities to augment knowledge, skills, behaviors, and abilities related to the practice of physical therapy.’

We also have to consider that competence can mean different things to various interested parties involved with

health care professionals, such as physical therapists or physical therapist assistants. Some of these ‘interested parties’ could include: the public, employers, legislators and governmental entities, to name a few. The public wants the assurance that the clinician responsible for their care has the knowledge and clinical skills to address their needs. Employers expect clinicians to maintain the requirements for licensure and continue to take the continuing education required to fulfill their professional responsibilities and comply with company regulations, governmental regulations, and reimbursement regulations as well. Legislators want to assure public protection, and various governmental entities want the best quality of care with the assurance it is medically necessary and cost effective.

Jurisdictions vary in the types and formats of activities that can count toward the continuing education/continuing competence requirements for license renewal. In North Carolina, according to Board Rule 21 NCAC 48G .0107 regarding the STANDARDS FOR CONTINUING COMPETENCE ACTIVITIES:

- ‘They have intellectual or practical content based on best available scientific evidence and the primary objective is to increase the participant’s professional competence and proficiency as a licensee’;
- (2) ‘They constitute learning experiences dealing with matters directly related to the practice of physical therapy or patient welfare.’

*(continued on next page)*

## Continuing Competence *(continued from page 4)*

Another component for satisfying lifelong learning, or ongoing learning, namely ‘Continuing Competence’ is the self-reflective practice exercise (or professional self assessment).

According to Board Rule 21 NCAC 48G .0109:

- Professional Self-Assessment ... is a process for a licensee to evaluate current professional practice abilities, to establish goals to improve those abilities, to develop a plan to meet those goals, and to document that the objectives are being accomplished.

How often or under what circumstances do you think this self-assessment should be done by the physical therapist or physical therapist assistant? What happens if a practitioner does not actively practice physical therapy for a number of years, due to family obligations for example, and lets his/her license lapse? At what point and by what means does the NCBPTE determine that the practitioner is competent to return to practice after a prolonged period of time, given the ever changing and expanding scope of evidence-based PT practice?

Recently, the Federation of State Boards of Physical Therapy developed a resource for regulatory boards entitled ‘Reentry of Physical Therapy Providers’. They noted considerable variation in what the various jurisdictions required, according to the chart provided in the FSBPT resource document as illustrated below (cited directly from the FSBPT Reentry of Physical Therapy Providers document 2016-05, p. 4).

Years Out Of Practice Thresholds	# Jurisdictions	CEU Required	Supervised Clinical Practice Required	Remedial Courses Required	Knowledge Evaluation Tool Used (NPTE, oPTion, etc)	Fees Required	Meet Initial Licensure Requirements
0-1 year	12	Yes				Yes	2 states after 1 yr
0-2 years	5	Yes	1 state 2 after yrs	Board discretion	3 states after 2 yrs	Yes	2 states after 2 yrs
0-3 years	12	Yes	3 states after 3 yrs	Board discretion	6 states after 3 yrs	Yes	3 states after 3 yrs
0-4 years	2	Yes	2 states after 2 yrs	Board discretion	1 state after 4 yrs	Yes	1 state after 4 yrs
0-5 years	11	Yes		Board discretion		Yes	
2-4 years	1	Yes		Board discretion		Yes	
1-5 years	3	Yes		Board discretion		Yes	
2-5 years	4	Yes		Board decides		Yes	
>5 years	1	Yes	8 states after 5 yrs	5 states require	12 states after 5 years	Yes	7 states after 5 yrs
>10 years	0		22 states 5 to 10 yrs		1 state after 10 years	Yes	

Because of these variations and the lack of a formalized model for re-entry to practice guidelines, the FSBPT has just initiated a task force called ‘Re-entry to Practice.’ The goal of this task force is to determine if a model can be developed to give jurisdictions guidelines on didactic, self-assessment, and clinical remediation to enable a clinician to determine professional competence after being absent from the profession for a number of years. They will be researching what the current practices are related to the Practice Act and Board Rules of both the physical therapy profession and other healthcare professions.

That being said, what do you think the determinants are to ensure ongoing professional competence for practice? Continuing education? Taking the NPTE again? Self- assessment? Secondly, at what point in time do you think supervised clinical practice should be required if a PT/PTA wants to return to practice after a prolonged absence?

We would welcome your thoughts, opinions, and comments on these subjects. You can email them to [dragan@ncptboard.org](mailto:dragan@ncptboard.org). Your participation is appreciated.

## Technology - working for you!

Security is always the least glamorous side of IT, but when the recent virus Petya hit, we reviewed the NCBPTE data security again. This particular virus is known for locking a person out of his/her information and systems. Gregg Seipp, NCBPTE Director of Information Technology, always works to keep every connection and application as clean as possible to reduce risk at all times. We added another backup and secure cloud based backup to our systems, created a recovery plan should our data become frozen, checked the most vulnerable ports, and reviewed our process and applications to keep your information secure!

Two new changes to the NCBPTE website are the ability to print a jurisprudence exercise certificate for documentation of continuing competence, and development of the online complaint form. The Board has always been able to provide a copy of the jurisprudence certificates, but now a copy can be generated after the browser window is closed after completion of the exercise. The online complaint form was even more complicated, but now anyone can complete this form. Once the form is submitted, it goes directly to the Executive Director. We are pleased to have these new features for the public.

Another exciting change that will be coming soon is the online application. Instead of being subject to the whims of the mail to start an application, applicants will be able to complete the initial two pages of the application online and pay online. Such a project is a large undertaking and making sure it is safe and secure is another big task.

Watch our site for new items next year as we continue our goals of protecting public safety, helping licensees and the public, and transparency.

### TECHNOLOGY-BE CAREFUL, AND BE AWARE!!

**1. If you are in a home health environment, make sure your communications with other healthcare providers involved with the patient do not include text or email if they potentially contain confidential information or contain information that should be documented as part of the medical record.**

**2. Technology has come a long way with regard to the electronic medical record and various physical therapy documentation systems. Be sure that you understand and are in control of what the system is documenting and charging for you, as you are ultimately responsible for the validity, continuity, and accuracy of the information it assimilates.**

## NCALB versus NCBPTE Lawsuit Update

**Status of NC Acupuncture Board Lawsuit:** In September 2015, the North Carolina Acupuncture Licensing Board filed a lawsuit against the North Carolina Board of Physical Therapy Examiners. The Physical Therapy Board has retained the law firm of Ellis Winters LLP to defend the Board in this case. The case was assigned to the North Carolina Business Court.

In April 2016, Judge Louis Bledsoe III dismissed the Acupuncture Board's complaint based on principles of sovereign immunity and failure to exhaust administrative remedies.

The Acupuncture Board then sought a declaratory ruling from the Physical Therapy Board related to dry needling. The Physical Therapy Board issued a declaratory ruling on June 27, 2016.

**NC Acupuncture Board Files Lawsuit (cont.):** The Acupuncture Board then filed a petition for review of the declaratory ruling in Wake County Superior Court. On August 2, 2017, Judge Bledsoe affirmed the declaratory ruling.

On August 25, 2017, the Acupuncture Board filed a notice of appeal of the August 2 ruling. The appeal will be taken to the North Carolina Supreme Court.

## Military Expedited Application Process

In order to satisfy the requirements of G.S. § 93B-15.1, the NCBPTE has developed an expedited application process for active duty military service men and women, military spouses, and veterans. These military members will not be charged an initial application fee and their application for licensure in NC by endorsement will be expedited as will the process for becoming eligible to take the NPTE. For more details, please contact [angela.licensing@ncptboard.org](mailto:angela.licensing@ncptboard.org) or call 919-490-6393.



## Foreign Educated Standards Committee Update

*Leslie Kesler, PT- former NCBPTE Board member and current FES member*

The Foreign Educated Standards Committee (FES) of the Federation of State Boards of Physical Therapy is responsible for taking measures that evaluate and provide recommendations to assure entry-level competence of foreign educated PTs and PTAs. The 2017 FES members are Charlotte Martin, LA (Chair); Alicia Rabena-Amena, CA; Sherise Smith, NV; Traci Zeh, FL; and Leslie Kesler, NC.

FES is intricately involved in the CourseWork Tools that are used to determine substantial equivalence to degrees achieved at US PT schools accredited by the Commission on Accreditation of Physical Therapy Education (CAPTE). FES assesses and improves as necessary, the current tools and definitions related to assuring the competence of the non-CAPTE educate physical therapists who want to practice in the US.

FES Committee has four guiding principles:

- 1) Regulation that is “just right”, with no unnecessary barriers while ensuring qualification of practitioners
- 2) Level the playing field for CAPTE and non-CAPTE graduates
- 3) Access to quality care is public protection

4) Jurisdictions have the right to determine laws and rules but differences should be intentional and purposeful.

After making multiple recommendations in 2016 for updates in the CWT, the FES Committee has focused in 2017 on developing a Primer to provide resources related to regulation of licensure and endorsement of non-CAPTE graduates. The Primer will be introduced at the Annual FSBPT meeting in November and is intended to help jurisdictions with navigation of the acronym-rich aspects of PT foreign education. The Primer is expected to provide brief summaries, with links for further detail in topics including: educational credentials review, course work tools (CWT), agencies that perform credential evaluations, standards for credentialing agencies, Planned Learning and Assistance Network (PLAN), the Duke University online course for foreign educated PTs, College Level Examination Program (CLEP), Model Practice Act, Supervised Clinical Practice Model and the Performance Evaluation Tool (PET), best practices for endorsement for foreign educated PTs, and Physical Therapy Licensure Compact (PTC).



## Don't forget!! It is license RENEWAL time again!

Renewals for 2018 can be entered online at [www.ncptboard.org](http://www.ncptboard.org), starting November 1, 2017. There will be **no** paper renewals unless a licensee has been disciplined. Although the deadline to renew is January 31, 2018, licensees are highly encouraged to renew by **January 15, 2018** to ensure that there are no problems with the online process. It is the licensee's responsibility to furnish the Board with a correct e-mail address. Inability to log-in will not be considered a valid reason to extend the deadline for renewal.

***If you DO NOT plan to renew your license for 2018, please notify the Board (call, email, fax, or letter).***



**Q:** *Can you provide guidance regarding PTA's and the use of instrument assisted soft tissue mobilization techniques such as lastym, Astym, etc.?*

**A:** The Board determined that these techniques are not considered entry level skill for a PTA because they are not taught in entry level PTA educational programs. If taught to PTA's in continuing educational programs, the Board determined it is up to the discretion of the supervising PT to determine if the PTA possesses the education and is competent to perform the technique and it is safe for the patient prior to delegating the intervention to be performed.

**Q:** *GyroStim equipment (not yet FDA approved) has been used to treat a variety of conditions including vestibular disorders, TBI, MODS, and provides brain stimulation for patients with cognitive functioning impairments. If a PT does runs a GyroStim, are there legal requirements the PT needs to be aware of from a licensing perspective?*

**A:** After discussing the research provided by Board staff on whether GyroStim is routinely taught in educational programs, continuing education programs for physical therapists or routinely performed in practice settings, the Board determined that physical therapy services are not being provided while using GyroStim.

**Q:** *Can a physical therapist use ultrasound for assisting with unblocking a breast duct for a lactating mother?*

**A:** While there is evidence that this therapeutic modality is utilized by physical therapists in other areas, there is insufficient evidence of its use in this State to make a determination about the procedure and its inclusion in the scope of physical therapy practice in North Carolina at this time. A cautious approach should be used if performing this procedure as part of a physical therapy plan of care. The PT must also possess the requisite knowledge, and skills, and training in women's health issues in order to safely engage in the use of ultrasound for assisting with unblocking a breast duct for a lactating mother.

**Q:** *Regarding the retention of the patient / client's physical therapy record, are there regulations in the North Carolina Physical Therapy Practice Act or Board's rules that specify the length of time that a physical therapist must keep the records?*

**A:** No. If a physical therapy practice is closing or if a physical therapist is retiring, the practice and /or the physical therapist have a responsibility to notify the patients / clients and give them the opportunity to obtain the original records or copies of the records. The U.S. Department of Health and Human Services, HIPAA regulations and / or the State of North Carolina may have specific laws governing patient records retention.



**Q:** *A PT does a SOC and notes the patient's blood pressure is elevated. The therapist contacts the MD, who orders the PT to tell the patient to increase BP medication and check BP daily for a week. Can PT take this order from MD?*

**A:** Yes.

**Q:** *If the physical therapist does a SOC and finds the patient needs a nurse, can the PT call the MD and order a nurse?*

**A:** The PT can call the MD and recommend a nurse. A PT cannot order a nurse.

**Q:** *The therapy staff at my place of employment has been told that we may asked to gather urine samples and/or culture and swab for samples. This just seems a little out of our scope of practice as therapist. Especially in the home health setting when there may or may not be witnesses to this task which could lead to a situation of improper conduct allegations waged against a therapist should a patient interpret things differently.*

**A:** Based on the description of tasks described above in home health, licensees engaged in that practice setting can be expected to be requested to perform acts that are outside their normal scope of physical therapy practice. It should be clear to the patient that activities you perform outside of the scope of PT practice are not physical therapy nor will they be billed for as physical therapy. In addition, whether the task is a finger stick or a urine sample, the dual questions to be answered for each test or function the licensee is asked to perform, is: 1. Whether it is exclusively within the scope of practice for a different profession, and if not, (2) Whether a licensee can be trained to adequately perform it. In most cases, it is not an inquiry as to whether the task is within the scope of physical therapy practice, but a question whether it can be performed by the licensee while the licensee is on the premises to treat the patient. Even though it is not physical therapy, it may be a simple test that does not require the knowledge and skill of a licensee of another profession to perform.

**Q:** *Can a Physical Therapist Assistant hold the position of Rehab Manager or Rehab Supervisor/Coordinator in the hospital setting? Is it allowed by the NC PT Board Rules?*

**A:** It would not be a violation of the NC PT Practice Act or Board's Rules for a PTA to be a Rehab Manager or Rehab Supervisor/Coordinator in the hospital setting. While it is not a violation, often a PTA in a managerial position administratively supervising PTs can be placed in a difficult position regarding the responsibility for making decisions in the best interests of the patient. The Board regularly receives complaints alleging PTAs in managerial positions exceed their scope of practice.

**Q:** *Can a foreign PT graduate apply for a PTA license by exam in North Carolina?*

**A:** The NC Practice Act and Board's rules require that an applicant for physical therapist assistant licensure (both domestic and foreign) has graduated from a physical therapist assistant education program accredited by an agency recognized by either the US Office of Education or the Council on Postsecondary Accreditation. Graduation from a PT curriculum would not qualify at this time.



**Q:** *I graduate in December and do not take my exam until the end of January. Am I allowed to practice physical therapy upon graduation prior to taking my exam?*

**A:** The answer is no. A new graduate who wants to work in a physical therapy service before licensure must work as a PT aide.

**Q:** *I have worked for states that require new grads a minimum of a year or so working in a supervised environment prior to allowing a PT to work in Home Health. Do you know if NC has a similar rule at all?*

**A:** There are no requirements in NC in either the NC PT Practice Act or Board's rules that require minimum number of years of practice or supervised practice to work in any specific setting.

## Announcements

### SILVER ANNIVERSARY

The Board is pleased to recognize Cindy Kiely, Director of Administration, for her many years of service to the NCBPTE. As of 8/1/2017, she has been employed by the Board for 25 years!

Congratulations Cindy!

### 40TH ANNIVERSARY

Our esteemed Board attorney, John Silverstein, Esquire, has been with the NCBPTE for 40 years. The NCBPTE continues to greatly benefit from his guidance and expertise and look forward to his leadership for many years to come.

### FSBPT OUTSTANDING SERVICE AWARD

David Reed, PT, NCBPTE Chair, is the honored recipient of this year's award. We celebrate this outstanding national achievement. It is truly well deserved!

### CATHERINE WORTHINGHAM FELLOWS AWARD

We are pleased to announce that Ben F. Massey, Jr., PT – former NCBPTE Executive Director was honored as one of the 2017 Catherine Worthingham Fellows of APTA.

### NCBPTE has a 5 star rating



The NCBPTE is one of 17 jurisdictions that as of 7/1/2017 have a 5 star rating for the consistency, timeliness, and completeness of the information submitted to the FSBPT Exam, Licensure and Disciplinary Database (ELDD). The maintenance and integration of the information submitted and compiled in this database helps each jurisdictions further their mission of public protection and safety.

5 star state boards are those that report information accurately, timely, and consistently.

# Please note that as of August 1, 2017, the renewal fee is \$120.00 for all licensees.

21 NCAC 48F .0102 FEES

(a) The following fees are charged by the Board:

- (1) application for physical therapist licensure, one hundred fifty dollars (\$150.00);
- (2) application for physical therapist assistant licensure, one hundred fifty dollars (\$150.00);
- (3) renewal for all persons, one hundred twenty dollars (\$120.00);
- (4) revival of license lapsed less than five years, thirty dollars (\$30.00) plus renewal fee;
- (5) transfer of licensure information fee, including either the examination scores or licensure verification or both, thirty dollars (\$30.00);
- (6) retake examination, sixty dollars (\$60.00);
- (7) certificate replacement or duplicate, thirty dollars (\$30.00);
- (8) licensee list or labels or any portion thereof for physical therapists, sixty dollars (\$60.00);
- (9) licensee list or labels or any portion thereof for physical therapist assistants, sixty dollars (\$60.00); and
- (10) processing fee for returned checks, maximum allowed by G.S. 25-3-506.

(b) The application fee is not refundable.

(c) Payment of application fees listed in Subparagraphs (a)(1) and (2) of this Rule may be made by certified check, cash, credit card, or debit card.

*History Note: Authority G.S. 90-270.26; 90-270.29; 90-270.33; Eff. February 1, 1976; Readopted Eff. September 30, 1977; Amended Eff. August 1, 1998; October 1, 1995; October 1, 1994; November 1, 1991; August 1, 1991; Temporary Amendment Eff. October 1, 1999; Amended Eff. August 1, 2017; July 1, 2013; December 1, 2006; August 1, 2002; August 1, 2000.*

## North Carolina Board of Physical Therapy Examiners

Board Orders / Consent Orders / Other Board Actions Oct 2016 – Nov 2017

### **Deuel, Leana O., PT** (Warning)

**Location:** Raleigh, NC, Wake County

**License #:** P10494

**Conduct:** Failure to complete documentation in a timely manner.

**Discipline:** Warning and reimburse the Board for the costs of the investigation. (Effective – February 1, 2017)

### **Enoh, Elizabeth E., PT** (Warning)

**Location:** Raleigh, NC, Wake County

**License #:** P8689

**Conduct:** Documenting and billing for more time than spent with patient care

**Discipline:** Warning, reimburse the Board for the costs of the investigation and complete a course including documentation and billing. (Effective – February 1, 2017)

### **Williams, Angela Belinda, PTA** (Warning)

**Location:** Windsor, Bertie County

**License #:** A4479

**Conduct:** Abuse of a resident in a nursing home.

**Discipline:** Warning and reimburse the Board for the cost of the investigation. (Effective date– May 2, 2016)

### **Tyson, Mieshelle B.** (Warning)

**Location:** Whiteville, NC, Columbus County

**License #:** A2970

**Conduct:** Billing or charging for services or treatment not performed

**Discipline:** Warning and reimburse the Board for the costs of the investigation. (Effective - July 15, 2017)

### **May, Fatma P.** (Warning)

**Location:** Asheville, NC, Buncombe County

**License #:** P11430

**Conduct:** Billing or charging for services or treatment not performed

**Discipline:** Warning, reimburse the Board for the costs of the investigation and complete a coding and billing course. (Effective - July 15, 2017)

## Discipline Related to Continuing Competence

None to report



### Juanita Marie Turner- Employed with the NC Board of PT from 2000 - 2015

Marie was employed with the NC Board of Physical Therapy Examiners as a Licensing Specialist for 15 years from 2000-2015. On November 20, 2016, Marie lost her battle with ALS. Marie was a wonderful person and a valued employee with the NC Board of Physical Therapy. Marie was truly the sunshine of the office, always smiling, thinking of others, even as she struggled with ALS. Those of us who have been fortunate enough to know and work with Marie have lost a dear friend. We will always hold her dear to our hearts.

*NC Board of PT Examiners*

## 2017 NCBPTE Holiday Schedule

Board Office will be closed	Day(s) of Week	Date(s)
Veteran's Day	Friday	November 10, 2017
Thanksgiving Day	Thurs & Fri	November 23 & 24, 2017
Christmas	Mon, Tues, and Wed	December 25, 26, & 27, 2017

## 2018 NCBPTE Holiday Schedule

Board Office will be closed	Day(s) of Week	Date(s)
New Year's Day	Monday	January 1, 2018
Martin Luther King's Day	Monday	January 15, 2018
Good Friday	Friday	March 30, 2018
Memorial Day	Monday	May 28, 2018
Independence Day	Wednesday	July 4, 2018
Labor Day	Monday	September 3, 2018
Veteran's Day (observed)	Monday	November 12, 2018
Thanksgiving Day	Thurs & Fri	November 22 & 23, 2018
Christmas	Mon, Tues, and Wed	December 24, 25, & 26, 2018



## DID YOU KNOW...

**The NCBPTE is very active and involved on task forces and committees at the Federation of State Boards of Physical Therapy (FSBPT). North Carolina is well represented at the national level!**

- Kathy Arney, PT-NCBPTE Executive Director is currently the Vice-Chair of the Compact Commission which was formed June 8, 2017. She is currently serving on the Minimum Data Set Task Force.
- David Reed, PT- NCBPTE Chair- He currently serves on the FSBPT Ethics and Legislation Committee.
- Cindy Kiely, Director of Administration is currently on the FSBPT License Verification Task Force.
- Debbie Ragan, NCBPTE Deputy Director is currently on the FSBPT Return to Practice Task Force.
- Leslie Kesler, PT, former Board member, is currently on the FSBPT Foreign-Educated Standards Committee.

### **Business Entities/Corporate Information**

The types of business entities physical therapists can utilize in providing physical therapy services, and the initials that can be used to describe these entities are, according to NC General Statutes §55B-5, §55B-(6), §55B-2(6), §57C-2-01(c), and §59-45(b):

- An "Inc." or "Co." can be formed, but not a "P.A." or "P.C."
- A "L.L.C." or a "L.L.P." would be permitted, but a "P.L.L.C." or a "P.L.L.P." would not be permitted.

Please [click here](#) for additional details.

### **Use of Clinical Designator, PT and PTA**

In North Carolina, the preferred clinical designator for a physical therapist is PT and for a physical therapist assistant is PTA. It is not LPT, RPT, or LPTA.

Please [click here](#) for additional details.

**North Carolina  
Board of Physical  
Therapy Examiners**

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**Legal Counsel**

John M. Silverstein, Esquire

**North Carolina  
Board of Physical  
Therapy Examiners**

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Fax: 919-490-5106  
E-mail: [karney@ncptboard.org](mailto:karney@ncptboard.org)  
Web page: [www.ncptboard.org](http://www.ncptboard.org)

**Calendar of Events**

*\* Dates are tentative / please confirm by contacting the Board office (800-800-8982) -  
Updated – October 16, 2017*

Nov 1, 2017 (Wed)	Annual License Renewal begins. Online renewals may be completed Renewal access on the home page of the Board’s website, <a href="http://www.ncptboard.org">www.ncptboard.org</a>
Nov 16, 2017 (Thurs)	Investigative Committee Meeting *- (08:00 a.m. – 1:00 p.m., Satsky and Silverstein Law Firm, Raleigh, NC, <a href="http://www.satskysilverstein.com">www.satskysilverstein.com</a> ).
Dec 13, 2017 (Wed)	<b>Board Meeting</b> *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, <a href="http://www.sienahotel.com/">http://www.sienahotel.com/</a> ).
Jan 4, 2018 (Thurs)	Investigative Committee Meeting *- (08:00 a.m. – 1:00 p.m., Satsky and Silverstein Law Firm, Raleigh, NC, <a href="http://www.satskysilverstein.com">www.satskysilverstein.com</a> ).
	Rules Subcommittee Meeting *- (1:00 p.m. – 3:30 p.m., Satsky and Silverstein Law Firm, Raleigh, NC, <a href="http://www.satskysilverstein.com">www.satskysilverstein.com</a> ).
Mar 14, 2018 (Wed)	<b>Board Meeting</b> *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, <a href="http://www.sienahotel.com/">http://www.sienahotel.com/</a> ).
June 6, 2018 (Wed)	<b>Board Meeting</b> *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, <a href="http://www.sienahotel.com/">http://www.sienahotel.com/</a> ).
Sept 12, 2018 (Wed)	<b>Board Meeting</b> *- (8:30 a.m. - 4:30 p.m., Siena Hotel, 1505 E. Franklin Street, Chapel Hill, NC, <a href="http://www.sienahotel.com/">http://www.sienahotel.com/</a> ).

**Physical Therapy Compact  
Commission – Calendar**

*\* NCBPTE Delegate attends these meetings – See “Compact Commission News”  
at [www.ncptboard.org](http://www.ncptboard.org) or [ptcompact.org](http://ptcompact.org) for additional information*

Nov 5, 2017 (Sunday)	Compact Commission - Santa Ana Pueblo, NM
Nov 2017 (Date TBD)	Executive Board - WebEx
Dec 2017 (Date TBD)	Compact Commission - WebEx
Oct 28, 2018 (Sunday)	Compact Commission - Reston, VA

**21 NCAC 48G .0112 Costs for Continuing Competence Activities**  
*(Effective January 1, 2009)*

- (a) There is no cost for approval of continuing competence activities offered by approved sponsors.
- (b) For a non-Approved provider seeking approval of a continuing competence activity offered to licensees in this State, the cost is one hundred fifty dollars (\$150.00) per activity.
- (c) For a licensee seeking approval of a continuing competence activity that is not offered by an approved sponsor, the cost is twenty-five dollars (\$25.00).

**N.C. Licensure Statistics**

*(As of October 4, 2017)*

	Licensed	Reside	Work
PTs	8,560	7,192	7,005
PTAs	3,858	3,411	3,272

# The Ben F. Massey, Jr. Student Scholarship



**This scholarship was created by the NCBPTE, in collaboration with NCPTA Scholarship and Loan, to honor the years of service Ben F. Massey, Jr. devoted to the profession of physical therapy and to public protection. All proceeds will go directly and in full to support the educational needs of North Carolina PT and PTA students. Click [here](#) to read the Proclamation in honor of Ben Massey, Jr. on the Occasion of his Retirement from the North Carolina Board of Physical Therapy Examiners.**

To donate, [please click here](#)

**If donating by cash or check, please direct contributions to:**

Randall Lazicki, PT, DPT  
Board of Directors, Treasurer  
NCPTA Scholarship and Loan Fund, Inc.  
238 Joseph Alexander Drive  
Fuquay Varina, NC 27526