

**REGULAR SESSION MEETING MINUTES**  
**June 27, 2006**

**MEMBERS PRESENT:** Helene Fearon, P.T., President  
Joni Kalis, P.T., Vice President  
Mark Cornwall, P.T., Ph.D., Secretary  
Merlin Gossman, Member  
Randy Robbins, Member

**MEMBERS ABSENT:**

**OTHERS PRESENT:** Heidi Herbst Paakkonen, Executive Director  
Peggy Hiller, P.T., Program Compliance Specialist (Investigator)  
Carol Lopez, Licensing Administrator  
Melissa Cornelius, Assistant Attorney General

**CALL TO ORDER – 9:00 a.m.**

The meeting was called to order at 9:00 a.m.

**1. Review and Approval of Draft Minutes:**

**May 23, 2006; Regular Session Meeting**

Ms. Fearon introduced the agenda item and moved to approve the minutes as drafted. Ms. Kalis seconded the motion. The motion carried by a unanimous vote.

**June 13, 2006; Special Session Meeting**

Ms. Fearon introduced the agenda item and moved to approve the minutes as drafted. Mr. Robbins seconded the motion. The motion carried by a unanimous vote.

**COMPLAINTS AND INVESTIGATIONS**

**2. Initial Review of Complaint:**

**#05-18; Paul Hospenthal, P.T.**

Ms. Fearon introduced the complaint and announced that the Board would meet in Executive Session for purposes of obtaining legal advice from Board counsel. Upon concluding the Executive Session, the Board resumed the meeting in public session. Ms. Hiller summarized the complaint filed by A.K, a former patient of Mr. Hospenthal, who alleged in an e-mail communication that while she was his patient they engaged in a consensual sexual relationship that began when she was 16 and continued sporadically for several years. If true, the allegations may be a violation of:

- **A.R.S. § 32-2044 (1)** “Violating this chapter, board rules or a written board order.”
- **A.R.S. § 32-2044 (10)** “Engaging in sexual misconduct. For the purposes of this paragraph, “sexual misconduct” includes: (a) Engaging in or soliciting sexual relationships, whether consensual or nonconsensual, while a provider-patient relationship exists.”

- **A.R.S. § 32-2044 (12)** “Failing to adhere to the recognized standards of ethics of the physical therapy profession.”
  - ***Code of Ethics Principle 1*** Physical therapists respect the rights and dignity of all individuals.
  - ***Guide for Professional Conduct 1.3. Patient Relations*** “Physical therapists shall not engage in any sexual relationship or activity, whether consensual or nonconsensual, with any patient while a physical therapist/patient relationship exists.”

Ms. Hiller noted that A.K.’s physical therapy records indicate that A.K. was a patient of Mr. Hospenthal’s during the time frame that the alleged relationship existed. In his written response to the complaint, Mr. Hospenthal affirms that he provided physical therapy treatment to A.K., but that they had a friendly but professional relationship. He acknowledged that he had helped her with a school science project that involved her spending some time at his home testing the water in his fish tank, and that on a few occasions she did some minor housekeeping for him for pay. Mr. Hospenthal did admit that he and A.K. had a “close personal relationship” which occurred after she was no longer a patient and while she was a college student in another state when she was visiting Scottsdale. Mr. David Derickson, attorney for Mr. Hospenthal, requested and was granted permission to address the Board. Mr. Derickson stated they are serious about defending Mr. Hospenthal against the allegations. He asked that the Board make the determination that Mr. Hospenthal had turned over A.K.’s physical therapy records promptly and in compliance with the Board’s subpoena; he also noted that he had attended the interviews that Ms. Hiller had held with selected members of Mr. Hospenthal’s staff. Mr. Derickson requested that the Board dismiss the allegations of interfering with an investigation and of failing to file a timely change of address, and address separately the sexual misconduct allegation. Ms. Hiller summarized for the Board the events concerning Mr. Hospenthal declining to immediately release A.K.’s patient records on January 7, 2006 when the subpoena had been personally delivered by her on January 6, 2006. She noted that she was advised by Mr. Mark Hospenthal, Director of Business Administration for the Desert Institute of Physical Therapy, that they records would not be released until Mr. Derickson had opportunity to review them for “privilege”. She also relayed to the Board the failure on the part of Mr. Hospenthal to notify the Board of his change of residential address which was learned only when the Board attempted to notify him of the complaint and the letter was returned as undeliverable. The Board noted that these allegations, if true, may constitute violations of:

- **A.R.S. § 32-2044 (18)**: “Interfering with an investigation or disciplinary proceeding by failing to cooperate, by willful misrepresentation of facts or by the use of threats or harassment against any patient or witness to prevent the patient or witness from providing evidence in a disciplinary proceeding or any legal action.”
- **A.R.S. § 32-2044 (23)** “Failing to report to the board a name change or a change in business or home address within thirty days after that change.”

Ms. Fearon moved to separate the allegations of interfering with a Board investigation and failing to notify the Board of a change of address from consideration of the rest of the complaint. Mr. Gossman seconded the motion. The motion carried by a unanimous vote. The Board discussed the issue of whether Mr. Hospenthal failed to cooperate with the investigation in the form of not immediately responding to the subpoena and not maintaining a current address with the Board. Ms. Cornelius advised the Board that in matters of civil litigation, the person served with the subpoena is granted some time with which to comply. However, the Board’s statutes do allow the Board to compel immediate release. She surmised that Mr. Derickson may not have had that understanding, but once he had opportunity to review the Board’s statutes, he realized he must direct his client to turn them over and the records were then released. Mr. Derickson stated that he had to have an opportunity to review the subpoena to determine whether it

confirms with the law. He reiterated his understanding that a person is allowed time to respond to a subpoena, and he chose to invoke privilege. Ms. Kalis moved to issue an advisory letter to Mr. Hospenthal concerning his failure to notify the Board of his change of address. Ms. Fearon seconded the motion. The motion carried by a unanimous vote. The Board then discussed ordering Mr. Hospenthal to submit to a psycho-sexual evaluation. The Board also discussed the fact that sending the complaint to either a formal or an informal hearing would allow the licensee to obtain a copy of the investigative record. Dr. Cornwall moved to issue an Order requiring Mr. Hospenthal complete an evaluation by a psycho-sexual evaluator pursuant to A.R.S. §32-2045(5), with the appointment to be made within 2 weeks of the Order's effective date and the report to be received by the Board office by August 11, 2006. Ms. Fearon seconded the motion. The motion carried by a unanimous roll call vote. Ms. Fearon moved complaint #05-18 be remanded to an informal hearing. Ms. Kalis seconded the motion. The motion carried by a unanimous vote. Board directed staff to invite Dr. David Enstrom and A.K. to the informal hearing as witnesses to be interviewed.

### **3. Initial Review of Complaint (Continuation):**

#### **#05-21; Alina McCampbell, P.T.A.**

Ms. Fearon announced the complaint and Ms. Hiller summarized the complaint report noting that the initial review of this complaint began on May 25, 2006. The complaint was filed by two former co-workers who stated that Ms. McCampbell lacked competence to perform her duties as a P.T.A., and that she was inattentive to patients, in some cases allowing them to fall during treatment, and that she billed for "group therapy". If true, the allegations may constitute a violation of:

- **A.R.S. § 32-2044 (1)** "Violating this chapter, board rules or a written board order."
- **A.R.S. § 32-2044 (5)** "Engaging in the performance of substandard care by a physical therapist assistant, including exceeding the authority to perform tasks selected and delegated by the supervising licensee regardless of whether actual injury to the patient is established."
- **A.R.S. § 32-2044(20)** "Failing to maintain adequate patient records. For the purposes of this subsection, "adequate patient records" means legible records that comply with board rules and that contain at a minimum an evaluation of objective findings, a diagnosis, the plan of care, the treatment record, a discharge summary and sufficient information to identify the patient."
- **A.R.S. § 32-2043 (I)** "A physical therapist assistant must document care provided but may do so without the co-signature of the supervising physical therapist if the therapist complies with the requirements of subsection G and H."

Ms. McCampbell stated in her response to the complaint that she possesses the knowledge and competence to work safely with her patients, that she follows the plan of care for each patient, and that she diligently discusses with her supervising physical therapist each patient's condition and status. Ms. Hiller acknowledged that Ms. McCampbell submitted three letters of support from current co-workers that were not submitted to the Board in time to include with the investigative report. Ms. McCampbell requested and was granted permission to address the Board. Ms. McCampbell advised the Board that it has been difficult to respond to the complaint allegations due to the fact that they are non-specific. She stated that she refutes the allegations of the complaint, that her primary concern is the welfare of her patients, and that she is always willing to improve her skills. Ms. Michelle Haney, P.T., one of the physical therapists who supervises Ms. McCampbell, was also allowed to make a statement to the Board concerning the case. Ms. Haney reiterated to the Board that she is confident in Ms. McCampbell's abilities as a physical therapist assistant. She confidently delegates treatment tasks to her, and she has never observed any of the incompetencies that the complaint alleged. Ms. Raney Bullington, the

rehabilitation director for Desert Sky Health & Rehabilitation Center where Ms. Haney and Ms. McCampbell are employed, stated that Ms. McCampbell is a team player, she is willing to learn new skills, and she is dependable, reliable, enthusiastic and professional. Ms. Bullington informed the Board that Ms. McCampbell communicates well with her supervisors, and she is a valuable member of the rehabilitation team. The Board asked Ms. McCampbell how patients are scheduled to be treated by her. Ms. Campbell stated that when she arrives each day, she notes which patients are on her schedule, she then meets with the supervising physical therapist to discuss the patient, as well as discusses with the other staff members (e.g. nurses and care staff) the patients' respective conditions. Ms. McCampbell stated that when Ms. Janice Morse was her supervising physical therapist, she felt she would receive no communication or direction from her. The Board noted that many of the patients are cardiac patients, and Ms. McCampbell stated that it is one of her goals to obtain additional training in this area, as well as the area of "aging minds" given the type of patients treated at the facility. Ms. Haney advised the Board that because all of the patients are treated in the gym, the equipment is also located there so that whenever a patient exhibits some indications of cardiac or respiratory problems, they can be evaluated quickly, which Ms. McCampbell is capable of doing. Ms. Haney stated that she appreciates that Ms. McCampbell is an aggressive physical therapist assistant, and her patients benefit as a result. The Board asked Ms. McCampbell whether she is documenting the results of certain tests such as pulse oximetry; she stated that she is now doing so. Ms. Haney also described for the Board the protocols that were followed during patient staffing sessions that include Ms. McCampbell. Ms. Bullington recalled an incident when the complainant, Ms. Morse, complained to her that Ms. McCampbell was inattentive to her patients. Ms. Bullington stated that the concerns were addressed with Ms. McCampbell and that a discussion was also held concerning recording more complete treatment notes such as measurements noting when tests were not performed on a particular patient. The Board questioned whether Ms. McCampbell was provided with certain boundaries with respect to the patients' conditions; Ms. Haney stated that her expectation is that her physical therapist assistant monitors the patient, but appropriately stops treatment if the patient is exhibiting distress. She is confident that Ms. McCampbell possesses the abilities to recognize when a patient is in distress and when treatment should be stopped so the patient can be assessed. Ms. Haney noted that the supervising physical therapist is always near enough to the gym to respond if necessary. The Board referred to the investigative report and asked why the patient T.B. was seen by Ms. McCampbell for 19 of 23 visits, but was never evaluated by a physical therapist even though his condition never changed. Ms. McCampbell replied that T.B. is a Parkinson's patient whose treatment goal was ambulation. The Board questioned whether the physical therapist should have reevaluated the patient during this time. Ms. Haney and Ms. Bullington responded to the Board's question concerning how patients are scheduled by noting that scheduling is typically a group activity with multiple people providing input. The Board commented that Mr. Dennis Nestor, P.T. frequently does not date his treatment notes. The Board discussed with Ms. Haney whether the scheduling system at Desert Sky Rehabilitation was appropriate. Ms. Haney stated that if she felt that the schedule was not appropriate, it would be changed. The Board questioned Ms. Janice Morse, P.T., the complainant who was connected to the meeting via telephone, concerning whether she would ever modify the schedule if she felt that Ms. McCampbell should not be treating a certain patient or patients. Ms. Morse stated that she did not ever supervise Ms. McCampbell and that, to her knowledge, she was never the only physical therapist present at the facility while Ms. McCampbell was there. Ms. Bullington responded to the Board's questions concerning whether any patients or families complained about Ms. McCampbell by indicating that she never recalled any such complaints. She explained that at this time a physical therapist is present all day in the facility, and that this therapist controls the patient scheduling. Ms. Morse reiterated to the Board that she is still convinced that Ms. McCampbell is unsafe and that she recalled 4 patients going to

the floor while Ms. McCampbell was either gazing off during their treatment sessions, or because she had failed to use a gait belt with these patients. The Board reviewed the possible jurisdiction under which the allegations were investigated – A.R.S. §32-2044(5), §32-2044(20) and §32-2043(I). The Board concurred that the records don't support a finding of a violation of §32-2044(20). The Board expressed concerns about the operation of the facility such that the supervising physical therapists are allowing Ms. McCampbell to function more as a physical therapist than as a physical therapist assistant. The Board commented that the delegation lines are blurred in that clear and convincing documentation does not exist to support that delegation of tasks is occurring, but that it does not appear that Ms. McCampbell herself is in violation of the law. Dr. Cornwall moved to dismiss all complaint allegations against Ms. McCampbell. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

#### **4. Initial Review of Complaint:**

##### **#05-22; Michelle Haney, P.T.**

Ms. Fearon introduced the complaint and Ms. Hiller summarized the allegations concerning Ms. Michelle Haney. The complaint was opened in response to companion complaints filed by former co-workers at Desert Sky Health & Rehabilitation Center which alleged that Ms. Alina McCampbell, P.T.A. lacks the competence to work safely and appropriately with rehabilitation patients and that Ms. Haney failed to provide adequate supervision of Ms. McCampbell. One allegation filed stated that patients treated in a group setting by Ms. McCampbell were charged for individual treatments. One complainant alleged that Ms. Haney failed to document discharges on her Desert Sky patients in April and May 2005. If true, the complaint allegations may be a violation of:

- **A.R.S. § 32-2044 (1)** “Violating this chapter, board rules or a written board order.”
- **A.R.S. § 32-2044(6)** “Failing to supervise assistive personnel, physical therapy students or interim permit holders in accordance with this chapter and rules adopted pursuant to this chapter.”
- **A.R.S. 32-2043(A)** “A physical therapist is responsible for patient care given by assistive personnel under the physical therapist’s supervision. A physical therapist may delegate to assistive personnel and supervise selected acts, tasks or procedures that fall within the scope of physical therapy practice but that do not exceed the education or training of the assistive personnel.”
- **A.R.S. § 32-2043(H)** “For each patient on each date of service, a physical therapist must provide and document all of the therapeutic intervention that requires the expertise of a physical therapist and must determine the use of physical therapist assistants and other assistive personnel to ensure the delivery of care that is safe, effective and efficient.”
- **A.R.S. § 32-2043(J)** “A physical therapist’s responsibility for patient care management includes accurate documentation and billing of the services provided.
- **A.R.S. § 32-2043(F)** “A physical therapist is responsible for managing all aspects of the physical therapy care of each patient. A physical therapist must provide: 3. The documented discharge of a patient, including the response to therapeutic interventions at the time of discharge.”
- **A.R.S. § 32-2044(20)** “Failing to maintain adequate patient records. For the purposes of this subsection, “adequate patient records” means legible records that comply with board rules and that contain at a minimum an evaluation of objective findings, a diagnosis, the plan of care, the treatment record, a discharge summary and sufficient information to identify the patient.”

In her written response to the complaint, Ms. Haney stated that she interacts appropriately with Ms. McCampbell and that she is on site in the facility at all times supervising and monitoring the certificate holder at all times. She refuted that anyone provides treatment in group setting at

Desert Sky Rehabilitation, and stated that documentation is prepared before the end of each day. Ms. Hiller assured the Board that discharge summaries were found for all of the patient records that she reviewed. In response to the Board's questions, Ms. Haney stated that she felt the hiring process appropriately screened Ms. McCampbell and confirmed that she was a P.T.A. when she began working at Desert Sky. The Board asked whether Ms. Haney could state what activities were being performed by Ms. McCampbell, and she replied that she could as she was monitoring all of the patients and their treatments. Ms. Haney recalled one of the incidents where it was alleged that Ms. McCampbell allowed a patient to fall. She indicated that the patient R.V. had suddenly become dizzy while Ms. McCampbell was treating him; she stated she propped him on her leg until she could get there with the wheelchair. Ms. Haney noted that R.V. was ambulating almost independently when not in therapy, so the fall was highly unusual. Ms. Haney advised the Board that discharge summaries were always prepared within 1-2 days following the actual discharge. She stated that any patient returning to care after a hospitalization is again evaluated by a physical therapist – typically the previous treating physical therapist. The Board discussed with Ms. Haney her responsibilities pursuant to A.R.S. §32-2043; Supervision, patient care management to know her physical therapist assistant's knowledge and skills and abilities for purposes of delegating treatment tasks. Additionally, the Board noted two areas in the facility policies and procedures manual that require revision – specifically the inappropriate use of the term “group treatment”, and no mention of the requirement of a discharge summary. The Board reviewed the possible jurisdiction for this complaint and discussed whether a violation of law could be established. Ms. Kalis moved the complaint be dismissed. Mr. Robbins seconded the motion. The Board then discussed whether Ms. Haney as the supervising physical therapist is truly delegating treatment tasks to Ms. McCampbell given the lack of documentation to establish parameters for the physical therapist assistant and the fact that the treatment records fail to indicate whether periodic evaluations were performed by her. The Board wondered whether Ms. Haney is actually managing the care of the patients, as opposed to simply observing Ms. McCampbell and merely discussing with her the status and treatment plans of the patients. The Board discussed how the concerns related to A.R.S. §32-2043(H). The appearance is that Ms. McCampbell is utilized more as a physical therapist as opposed to being appropriately utilized as a physical therapist assistant. Ms. Kalis withdrew the original motion. Ms. Fearon moved to issue an advisory letter to encompass the Board's concerns relative to §32-2043(A) and (H). Ms. Kalis seconded the motion. The Board reviewed the patient records to assess the extent to which Ms. Haney was the supervising physical therapist for Ms. McCampbell. The Board discussed the purpose of an advisory letter and how this case may relate to the alleged conduct of other physical therapists identified in the records who supervised Ms. McCampbell. The motion carried by a unanimous vote. Dr. Cornwall offered a motion to open a complaint against Dennis Nestor, P.T. and Ms. Kim Wright, P.T. under the jurisdiction of A.R.S. §32-2044(6), §32-2044(20), §32-2043(A) and §32-2043(H). Ms. Kalis seconded the motion. The motion carried by a unanimous vote.

## **5. Review and Consideration of Administrative Law Judge's Recommended Decision and Order:**

### **Julie Parish, P.T.**

Ms. Fearon introduced the agenda item and Ms. Cornelius advised the Board that the formal hearing concerning this case was held on May 24, 2006 and the recommendation issued by the Administrative Law Judge was fair and accurate. She asked that the Board consider adopting the recommendation as issued by Administrative Law Judge, Brian Tully. Ms. Cornelius noted that the licensee managed to come into compliance with the Board's continuing competence requirements for licensure renewal, but that she failed to meet the established deadlines for purposes of demonstrating compliance. The Board reviewed the recommended Order and

discussed that it includes terms of a 30-day suspension and a civil penalty of \$500. Ms. Fearon moved the Board adopt the recommended findings of fact; Ms. Kalis seconded the motion. The motion carried by a unanimous vote. Ms. Fearon moved the Board adopt the recommended conclusions of law; Mr. Robbins seconded the motion. The motion carried by a unanimous vote. Ms. Fearon moved the Board adopt the recommended Order. Ms. Kalis seconded the motion. The roll call vote was unanimous.

**SUBSTANTIVE REVIEWS OF APPLICATIONS FOR LICENSURE & CERTIFICATION**

**6. Substantive Review and Possible Action on the Following Applications for Physical Therapist Licensure:**

|                   |                       |                     |
|-------------------|-----------------------|---------------------|
| Jillian M. Bauer  | Todd L. Benz          | Abby M. Berger      |
| Mark R. Bragas    | Melissa E. Chamberlin | Tina M. Engel       |
| Robin L. Frazee   | Lacey M. Hardesty     | Carolyn B. Heriza   |
| Lauren Y. Hughes  | Jennifer Lam          | Laurie L. Martin    |
| Matthew J. Millet | Rebecca M. Newton     | Christine A. Wilson |
| Daniel G. Wilson  |                       |                     |

Ms. Fearon introduced the agenda item for purposes of conducting a substantive review of the application files for the listed applicants. Dr. Cornwall disclosed that Ms. Bauer was formerly his student, but that relationship no longer exists and he is able to vote on her application without bias. Ms. Kalis moved to grant licensure to the listed applicants. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**7. Substantive Review and Possible Action on the Following Applications for Physical Therapist Assistant Certification:**

|                   |                       |                    |
|-------------------|-----------------------|--------------------|
| Amber S. Delpilar | Michelle D. MacDonald | Kevin McCrane      |
| Jennifer S. Olson | Julie L. Pies         | Lynley C. Stillman |
| Heather C. Warren |                       |                    |

Ms. Fearon introduced the agenda item for purposes of conducting a substantive review of the application files for the listed applicants. Dr. Cornwall moved to grant certification to the listed applicants. Ms. Kalis seconded the motion. The motion carried by a unanimous vote.

**8. Substantive Review of and Possible Action on the Following Applications for Physical Therapist Licensure (Foreign Educated, Graduates of Program Not Accredited by CAPTE):**

**a. Review for Determination of Substantially Equivalent Education and Possible Action on Approval to Take National Physical Therapist Examination**

**Marie Danhelkova**

Ms. Fearon read the name of the applicants and the Board noted that she was educated in the Czech Republic. The Board concurred that her credential evaluation report indicates that her general education credit are clearly deficient. Dr. Cornwall moved the Board find that her education is not substantially equivalent to that of a graduate of a U.S. accredited program, that she be allowed to complete the deficient credit hours by completing college level coursework, and that she be denied approval at this time to take the National Physical Therapy Examination. Ms. Fearon seconded the motion. The motion carried by a unanimous vote.

**Peter Hartmann**

Ms. Fearon read the name of the applicant, and the Board reviewed Mr. Hartmann's credential evaluation report which indicated that he lacks the equivalent of 24.28 semester credit hours in general education. Ms. Kalis moved the Board find that his education is not substantially equivalent to that of a graduate of a U.S. accredited program, that he be allowed to complete the deficient credit hours by completing college level coursework, and that he be denied approval at

this time to take the National Physical Therapy Examination. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**Zsazsa Punay**

Ms. Fearon read the name of the applicant and the Board noted that her credential evaluation report indicated that she had met the required hours of both general and professional education. Ms. Kalis moved to find her education substantially equivalent to that of a graduate of a U.S. accredited program, and that she be granted approval to take the NPTE. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**Anju Sharma**

Ms. Fearon read the name of the applicant and the Board discussed her credential evaluation report which indicated deficiencies in her general education coursework. Ms. Kalis moved the Board find that her education is not substantially equivalent to that of a graduate of a U.S. accredited program, that she be allowed to complete the deficient credit hours by completing college level coursework, and that she be denied approval at this time to take the National Physical Therapy Examination. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**b. Review for Determination of Substantially Equivalent Education and for Approval of Supervised Clinical Practice Period (SCCP) Proposal and Interim Permit**

**Hazel A. Costales**

Ms. Fearon read the name of the applicant and the Board concurred that her credential evaluation report indicates that her education meets the Board's requirements. The Board also reviewed the proposal submitted by the applicant describing a clinical supervised practice period. Ms. Lisa Wade, P.T. is the proposed supervisor, and she meets the Board's qualifications to serve in this capacity. Ms. Kalis moved to find her education substantially equivalent to that of a graduate of a U.S. accredited program, to issue her an interim permit and to approve her supervised clinical practice period. Dr. Cornwall seconded the motion. The motion carried by a unanimous vote.

**Christine Verceles**

Ms. Fearon read the name of the applicant and the Board reviewed and discussed her credential evaluation report which indicated that Ms. Verceles' education meets the requirements of the Board. The Board then reviewed the supervised clinical practice period proposal submitted by the applicant identifying three individuals as the proposed supervisors – Alyssa Bauersmith, P.T., Wendi Jabs, P.T. and Stephanie Enders, P.T. – with the period to be completed at Yuma Regional Hospital. Ms. Kalis moved to find her education substantially equivalent to that of a graduate of a U.S. accredited program, to issue her an interim permit and to approve her supervised clinical practice period. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**c. Review of Request for Approval of Supervised Clinical Practice Period (SCCP) Proposal and Interim Permit**

**Sheenam Arora**

Ms. Fearon read the name of the applicant, and Ms. Lopez advised the Board that Ms. Arora had applied for licensure in Michigan while her application was pending in Arizona; she took and passed the NPTE for that state and was issued a license by the Michigan Board on June 2, 2006. However, Ms. Arora informed Ms. Lopez that she intends to complete the licensure process in Arizona, and she has submitted a proposal to complete a supervised clinical practice period at LifeCare Center in Scottsdale with Shirly Meyerowitz, P.T. to serve as her supervisor. Ms. Kalis moved to issue her an interim permit and to approve her supervised clinical practice period. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**Mary Gloan Macareg**

Ms. Fearon read the name of the applicant, and the Board reviewed the supervised clinical practice period proposal submitted by Ms. Macareg requesting the Board approve her supervised



clinical practice period at Physicians Physical Therapy with Tamara Galloway, P.T. as her supervisor. Ms. Kalis moved to issue Ms. Macareg an interim permit and to approve her supervised clinical practice period. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**Amanda MacNally**

Ms. Fearon read the name of the applicant, and the Board reviewed the supervised clinical practice period proposal submitted by Ms. MacNally in which she requested the Board approve her supervised clinical practice period at Carondelet Hospital in Tucson under two supervisors – Judy Beal, P.T. and Craig Taber, P.T. Ms. Kalis moved to issue Ms. MacNally an interim permit and to approve her supervised clinical practice period. Mr. Gossman seconded the motion. The motion carried by a unanimous vote.

**BOARD BUSINESS AND REPORTS**

**9. Executive Director's Report:**

**a. Financial Report:** No additional information to report.

**b. Board Staff Activities:** No additional information to report.

**c. FSBPT Initiatives and News:** The Board directed Ms. Herbst Paakkonen to invite Ms. Chris Larson, P.T. to present information on piloting the Practice Review Tool to the Board in the fall.

**d. Rules Revision Update:** No additional information to report.

**e. Legislative Update:** Ms. Herbst Paakkonen advised the Board that the 47<sup>th</sup> Arizona State Legislature finally concluded its second regular session on June 22, 2006. Therefore, the effective date of Laws Chapter 196 is September 21, 2006. She reported that the office continues to receive telephone calls and e-mails inquiring into the effective date, and that some of the individuals making the inquiries have been given incorrect information or have made mistaken assumptions concerning that date. Ms. Herbst Paakkonen noted that the relatively late effective date presents the Board with some advantages in terms of educating licensees and certificate holders about the statutory changes, writing administrative rules, and delaying the effects of the unfunded mandate components of the legislation.

**10. Discussion and Possible Action Concerning Rule Writing Task Force Appointments and Meeting Update.**

Ms. Herbst Paakkonen informed the Board that she had notified everyone who had been nominated to serve on the task force of the Board's decision with respect to whether they had been appointed. The date of that meeting will be either Thursday, July 20 or Friday, July 21 depending on the members' availability. She called to the Board's attention the rough draft of a chart she modeled after the one created by Chris Larson, P.T. (Director of Professional Standards for the FSBPT) that attempts to capture the rules revision discussion that occurred during the Board's special session meeting on June 13, 2006. Ms. Herbst Paakkonen asked that the Board notify her of errors or omissions in this first draft. The Board directed Ms. Herbst Paakkonen to sign a contract with Jeanne Hann, contract rule writer for the Arizona Department of Administration, for purposes of working with the Board on revising articles 3 and 4 of the administrative rules.

**11. Discussion and Possible Action Concerning Association for Play Therapy Conferring RPT and RPT-S Credentials**

Ms. Fearon introduced the agenda item and Ms. Herbst Paakkonen advised the Board that the jurisdictions were recently notified by FSBPT that the Association for Play Therapy is conferring the titles "RPT" and "RPT-S" to certain mental health professionals who meet the qualifications established by that Association. Pursuant to A.R.S. §32-2042(C), the term "RPT" is protected.

The Board discussed with Ms. Cornelius whether its statutes grant the Board authority to issue a Cease and Desist order to an entity that confers a protected term to certain individuals. Ms. Cornelius stated that the Board lacks that specific authority, but the Board could refer the matter to county prosecutors for prosecution, or seek a court injunction. The Board directed Ms. Herbst Paakkonen to issue a letter to the Association citing the illegal use of this term, to cite the statute, and to request a written response. The Board will determine future action based on that response.

**CALL TO THE PUBLIC**

None.

**ADJOURNMENT**

The meeting adjourned at 12:10 p.m.

Prepared by,

Heidi Herbst Paakkonen  
Executive Director

Approved by,

Dr. Mark Cornwall, P.T., Ph.D.  
Secretary