

JANICE K. BREWER
Governor

LISA AKERS, PT, MS
President



CHARLES D. BROWN
Executive Director

ARIZONA STATE BOARD OF PHYSICAL THERAPY
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REGULAR SESSION MEETING MINUTES
February 25, 2014

MEMBERS PRESENT:

Lisa Akers, PT, MS; President
Melinda Richardson, PT, MA; Vice President
Michael S. Clinton, CPA; Secretary
Fredric B. Zook, Ph.D. Public Member
Al D' Appollonio, PT, MBA; Member
Peggy Hunter, PTA, CLT; Member
James E. Miller, PT, DPT; Member

(Arrived Late) 8:50 a.m.

OTHERS PRESENT IN PERSON:

Charles D. Brown, Executive Director
Paula Brierley, Licensing Administrator
Karen Donahue, Senior Investigator
Veronica Cardoza, Office Manager
Mona Baskin, Assistant Attorney General

CALL TO ORDER – 8:32 a.m.

Ms. Akers called the meeting to order at 8:32 a.m. (A recording of the meeting is available through the Board Office)

1) Review and Approval of Draft Minutes

- a) January 28, 2014 Regular Session Meeting Minutes

Ms. Akers moved to approve January 28, 2014 minutes. Mr. Clinton seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained							
Absent					X		

b) January 28, 2014 Executive Session Meeting Minutes 9:07 a.m. to 9:13 a.m.

Ms. Richardson moved to approve January 28, 2014 Executive Session Meeting minutes. Ms. Akers seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained							
Absent					X		

c) January 28, 2014 Executive Session Meeting Minutes 9:33 a.m. to 9:57 a.m.

Ms. Akers moved to approve January 28, 2014 Executive Session minutes. Mr. Clinton seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained							
Absent					X		

d) February 10, 2014, Special Meeting Minutes

Ms. Akers moved to approve Special Meeting Minutes as amended. Ms. Richardson seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained							
Absent					X		

e) February 10, 2014, Executive Session Meeting Minutes 8:06 a.m. to 8:13 a.m.

Ms. Akers moved to approve Executive Session Meeting Minutes. Ms. Richardson seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained							
Absent					X		

2) CONSENT AGENDA: REVIEW, CONSIDERATION and ACTION

a) Applications for Licensure and Certification

i) Review, Consideration and Approval of Applications of Physical Therapist Licensure upon Receipt of Passing Scores on the NPTE/AZLAW and Final Transcript.

Amico, Joseph	Anderson, Kristi	Auer, Ashley
Badder, Allan	Bowers, Stacy	Brehm, Jolie
Brownell, Belinda	Carlson, Corina	Carlson, Tyler
Carpenter, Kristin	Clifton, Delisa	Doll, Kira
Edwards, Lauren	Fizer, Jodi	Flynn, Angelica
Galbraith, Dorinda	Hunt, Melinda	Kilcullen, Jillian
Libecco, Haley	Linde, Brittany	Nagler, Ashley
Nelson, Stephen	Nickolas, Jessica	Rattanapote, Melody
Reay, Erika	Reece, Adam	Rodriguez, Joshua
Saad, Bianca	Schmaltz, Craig	Taylor, Don
Ward, Vanessa	Williams, Jennifer	Williams, Jordan

ii) Review, Consideration and Approval of Applications for Physical Therapist Assistant Certification upon Receipt of Passing Scores on the NPTE/AZLAW and Final Transcript.

Burk, Russell	Halvey, Robbie	Hofman, Julie
Howe, John	Jackson, Shannon	MacIntyre, Emily
Madrigal, Karen	Merrow, Holly	Neustifter, Robert
Quisenberry, Samantha	Ruiz, Marissa	Valentine, Amy
Wallstrom, Lisa	Walter, Christopher	Sherwood, Lisa

iii) Review, Consideration and Approval of Applications for Physical Therapist with Documentation Related to Disclosure on “Personal Information” Section of the Application.

Baker, Jerry	Buckley, Evan	Cizek, Heather
Ivy, Stephanie	Paterson, Kristian	Ramos, Paul
Schlitz, Stacy	Seibel, Steven	Taylor, Caitlyn
Kepner, Lacey		

iv) Review, Consideration and Approval of Applications for Physical Therapist with Documentation Related to Disclosure on “Personal Information” Section of the Application.

Brown, Lucas

No Board Member requested anybody to be pulled from list.

Ms. Akers moved to license or certify all applicants listed upon receipt of passing NPTE/AZLAW and receipt of final transcripts. Ms. Richardson seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							

Abstained							
Absent					X		

Consent Agenda Ends

4) COMPLAINTS, HEARINGS, INVESTIGATIONS and COMPLIANCE

b) Initial Review, Discussion and Action on Complaint

i) Complaint #13-39, Kay Wing, PT

Ms. Wing was present and was not represented by legal counsel. Ms. Donahue summarized complaint for the Board. K.C. (complainant) was present and was not represented by legal counsel. K.C. addressed the Board and answered questions asked of him by the Board. Ms. Hunter moved to dismiss complaint. Mr. D’ Appollonio seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X		X	X
Nay							
Recused							
Abstained					X		
Absent							

ii) Complaint #13-43, Winnie Chin, PT

Ms. Chin was present and was represented by legal counsel, Mr. Chelle. Ms. Donahue summarized complaint for the Board. Mr. Chelle addressed the Board. Ms. Chin addressed the Board and answered questions asked of her by the Board. Mr. D’ Appollonio moved to dismiss the complaint. Dr. Miller seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

a) Informal Hearing and Possible Action on Complaint:

i) Complaint #13-29; Brandy Sanders

Ms. Sanders was present and was represented by legal counsel, Ms. Karvis. Introductions were made. Ms. Akers swore in all parties involved. Mr. Brown gave an allegation summary to the Board. Ms. Karvis addressed the Board on Ms. Sanders behalf. Ms. Karvis and Ms. Sanders answered questions asked of them by the Board. Following the questioning of all witnesses present and review of all evidence provided the Board entered deliberations. Following discussion, Ms. Richardson moved to accept Findings of Facts as follows:

3. Respondent engaged in the performance of substandard care by a physical therapist due to a deliberate or negligent act or failure to act regardless of whether actual injury to the patient is established.

A. All patients who are coded in the schedule as receiving physical therapy services are treated by or under the direction of Respondent. Dr. Grant, in his interview, indicated that only the manual therapy aspect of care was being performed by Respondent and the other interventions by technicians or massage therapists, under Ms. Sander’s supervision.

- B. A one hour or one half hour appointment for the massage therapists to engage in assistive stretching was scheduled PRIOR to Ms. Sander's completion of an initial evaluation.
- i. July 1, 2013 Patient DF and SMT
 - ii. July 2, 2013 Patient BF and CP
 - iii. July 3, 2013 Patient CM and MO
 - iv. July 8, 2013 Patient TK
 - v. July 9, 2013 Patients AS, MM and RF
 - vi. July 10, 2013 Patient MS
 - vii. July 15, 2013 Patients RE, LH and ZE
- C. July 3, 2013, two (2) initial evaluations for patients CM and TC are scheduled concurrently at 2:00 pm.
- D. July 5, 2013, Respondent concurrently has scheduled 4 patients. Patient AM for an initial evaluation and patients CS, DH and PH for follow-up treatment.
- E. July 9, 2013 Ms. Sanders engages in three (3) initial evaluations (patients MM, RF and AS) and four (4) follow-up appointments (patients JF, RL, CS, MC) within 75 minutes.
- F. In all patient records reviewed, another physical therapist would have been unable to assume the patient's care at any point in the course of therapeutic intervention.
- G. Many of the therapeutic interventions that are billed therapeutic exercise appear to be duplicate as pertaining to the therapist assisted stretching.
- H. Patient CH initial evaluation indicates that injury was sustained due to a fall. Respondent fails to document assessment of balance.
- I. In all patient records many of the specific muscles, as identified in the description of treatment, were not assessed for muscle length/strength prior to initiation of treatment.
- J. Patient CH, deep muscle stimulator and therapist assisted stretching throughout the plan of care was performed on the glenohumeral joint and surrounding muscles without assessment of ROM of the glenohumeral joint or length test of the surrounding muscles and thus does not justify treatment intervention.
- K. A re-evaluation of patient BH was not documented after 14 visits, 2 months of physical therapy services.
- L. Patient AT: DX is lumbar pain without radicular symptoms
- i. Strength measurements are identified for neck flexion/extension, deltoid, biceps, wrist flexion/extension and interossei. It is unclear why Respondent chose to test these muscles when the chief complaint is in the lumbar spine.
 - ii. Respondent documents bilateral positive Milgram's test for radicular symptoms, when the subjective report indicates no radicular symptoms present.
 - iii. Respondent documents that she finds joint dysfunction in the cervical, thoracic and ilio-femoral joints. The documentation does not support that these regions were evaluated.
 - iv. Respondent documents initiation of the performance of thera-band cervical protocol throughout the episode of care when the chief complaint and reason for seeking services was for lumbar symptoms.
 - v. Deep Muscle Stimulator identified stretching to the UE muscles. The UE was not the source of symptoms nor was the UE evaluated in the initial evaluation.
- M. Ms. Sander's statement in her written response was not be congruent with the records review.
- i. "The treatment plan that each patient receives is individualized and designed to meet their needs and achieve their goals."
- N. Respondent confirms in her interview that she performed/delegated interventions for muscles and structures that she did not assess.
4. Respondent failed to supervise assistive personnel, physical therapy students or interim permit holders in accordance with this chapter and rules adopted pursuant to this chapter."
- a. Respondent confirms that the services provided by her and under her supervision are billed utilizing her NPI and license number.

- b. Dr. Grand confirms that certified chiropractic/massage therapists perform 30-60 minutes of passive therapeutic exercises and stretch sessions that are coded and billed 97110 under Ms. Sander's license.
 - c. Ms. Hudson in her interview and Dr. Grant in his interview individually confirm that the physical therapist only performs the manual therapy aspect of the treatment.
 - d. Ms. Hudson in her interview confirms that the patients went from station to station for stretching.
 - e. Dr. Grant confirms in his interview the when a patient is scheduled to receive physical therapy services, all of the services performed on that date are perform by or under the direction of Respondent.
 - f. Patient CH, Respondent delegated care to more than 2 assistive personnel on:
 - 1. July 9, 2013
 - 2. July 16, 2013
 - g. Patient BH, Respondent delegated care to more than 2 assistive personnel on:
 - 1. July 3, 2013
 - 2. July 8, 2013
 - 3. July 15, 2013
 - h. Patient AT, Respondent delegated care to more than 2 assistive personnel on:
 - 1. July 8, 2013
 - 2. July 12, 2013
 - i. Respondent in her interview confirmed:
 - 1. Technicians perform all documentation
 - 2. She supervised up to 4 assistive personnel, non-PTA's.
 - j. Respondent was not be providing specific delegation and supervision for each patient to the technicians or massage therapists during the course of treatment, even though treatment is being provided by the technicians. The "station" system of treatment be designed for a patient to move from station to station with oversight by technicians, with performance of identical exercises or stretches at each station.
5. Respondent failed to adhere to the recognized standards of ethics of the physical therapy profession.
- 2.1 "A physical therapist shall place the patient's/client's interest(s) above those of the physical therapist.
- 2.2 "A physical therapist has an obligation to provide accurate and truthful information."
- 4.1(A) "A physical therapist shall make professional judgments that are in the patient's/clients best interests."
- 4.1(B) "Regardless of practice setting, a physical therapist has primary responsibility for the physical therapy care of a patient and shall make independent judgments regarding that care consistent with accepted professional standards."
- 4.1(E) "Upon accepting a patient/client for physical therapy services, a physical therapist shall be responsible for: the examination, evaluation, and diagnosis of that individual; the prognosis and intervention; re-examination and modification of the plan of care; and the maintenance of adequate records, including progress reports. A physical therapist shall establish the plan of care and shall provide and/or supervise and direct the appropriate interventions."
- 4.2(A) "The supervising physical therapist has primary responsibility for the physical therapy care rendered to a patient/client."
- 7.1(D) "When a physical therapist's judgment is that a patient will receive negligible benefit from physical therapy services, the physical therapist shall not provide or continue to provide such services if the primary reason for doing so is to further financial self-interest of the physical therapist or his/her employer. A physical therapist shall avoid overutilization of physical therapy services.
- A. July 1, 2013 patients DF and SMT are scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

B. July 2, 2013 patient BF and CP are scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

C. July 3, 2013 patient CM and TC are scheduled to have an initial evaluation performed. Both evaluations are scheduled for 14:00 (2:00pm). CM arrives in the waiting room at 13:43(1:43pm) and TC arrives and scans card in waiting room at 13:58 (1:58). This indicates that Respondent was performing two (2) initial evaluations concurrently.

D. July 3, 2013 patients CM and MO are scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

E. July 5, 2013 patients AM, CS, DH, and PH are all scheduled and arrive for 12:00 noon appointment for physical therapy. AM is an initial evaluation. The schedule indicates that Respondent is performing an initial evaluation with an additional 3 patients receiving follow-up services at the same time.

F. July 8, 2013 patient TK is scheduled for a physical therapy evaluation and one hour therapy with the massage therapist. The one hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

G. July 9, 2013 the schedule indicates the following scheduled appointments:

- I. 11: 30am MM initial evaluation (11:44am arrival)
- II. 12:00 noon RF initial evaluation (11:27am arrival)
- III. 12:00 noon JF follow-up appointment (12:00 arrival)
- IV. 12:00 noon RL follow-up appointment (12:06pm arrival)
- V. 12:00 noon CS follow-up appointment (12:12pm arrival)
- VI. 12:30pm MC follow-up appointment (12:22pm arrival)
- VII. 1:00pm AS initial evaluation (12:57pm arrival)
- VIII. Respondent engages in three (3) initial evaluations and four (4) follow- up appointments within 75 minutes.

H. July 9, 2013 patient AS, MM and RF are scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

I. July 10, 2013 patient MS is scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

J. July 15, 2013 patients RE, LH and ZE are scheduled for a physical therapy evaluation and half hour therapy with the massage therapist. The half hour therapy was scheduled prior to the completion of the physical therapy evaluation. As such, it would have been impossible for Respondent to know that part of her plan of care would have been delegation to the massage therapist as she had not completed the initial evaluation.

K. Most of the daily intervention notes were documented by technicians without input from Respondent.

L. Respondent failed to adequately delegate care of her patients or supervise physical therapy services provided by technicians.

M. Respondent confirms in her interview that each patient performed the same exercises each visit.

- N. Respondent failed to produce billing information for services provided, was unaware of the services that were billed for each patient on each date of service.
- O. Respondent provided/delegated interventions for impairments that were not assessed.
- P. Respondent confirms in her interview that “Patients are transferring to me because they are out of Chiropractic benefits and can continue care under my license.”
6. Respondent charged unreasonable or fraudulent fees for services performed or not performed
- A. Respondent failed to adequately delegate care of her patients or supervise physical therapy services performed by technicians, however all services were billed as physical therapy under Respondent NPI number.
- B. Respondent failed to produce billing information for services provided and was unaware of the services that were billed for each patient on each date of service.
- C. For the records reviewed, the billing is not justified in the patient record for physical therapy services provided and/or supervised.
- D. Many of the therapeutic interventions that are billed as 97110 appear to be duplicate with therapist assisted stretching components.
- E. The majority of the daily billing (\$196.00) for each patient for each date of service, following the evaluation is identical:
- Two (2) units of 97110 – therapeutic exercise
 - One (1) unit of 97110- therapeutic exercise
 - One (1) unit of 97140- manual therapy
- F. Respondent was not providing specific delegation and supervision for each patient to the technicians or massage therapists during the course of treatment, even though treatment is being provided by the technicians. The “station” system of treatment was designed for a patient to move from station to station with oversight by technicians, with performance of identical exercises or stretches at each station.
- G. Respondent confirms in her interview that “Patients are transferring to me because they are out of Chiropractic benefits and can continue care under my license.”
7. Respondent failed to maintain adequate patient records. For the purposes of this paragraph, “adequate patient records” means legible records that comply with board rules and that contain at a minimum and evaluation of objective findings, a diagnosis, the plan of care, the treatment record, a discharge summary and sufficient information to identify the patient.
- H. Respondent confirms in her interview that technicians documented all daily intervention notes.
- I. For the records reviewed, the treatment provided is almost identical in each visit with standardized sentences that generally describe treatment interventions.
- J. For the records reviewed for the initial evaluations:
- Prognosis is not documented
 - The physical therapist’s interpretation of the results of the examination is not documented.
 - Most goals were not measureable.
- K. The daily intervention notes were a series of automated paragraphs with minor changes to the patient subjective assessment, the subjective assessment was not obtained or documented by a physical therapist, but a technician.
8. Respondent provided treatment unwarranted by the condition of the patient or treatment beyond the point of reasonable benefit.
- A. For the records reviewed, the documentation indicates that the patient’s treatment was identical or nearly identical for all treatment visits.
- B. Respondent was not be providing specific delegation and supervision for each patient to the technicians or massage therapists during the course of treatment, even though treatment is being provided by the technicians. The “station” system of treatment was designed for a patient to move from station to station with oversight by technicians, with performance of identical exercises or stretches at each station.
- C. Respondent confirms in her interview that “Patients are transferring to me because they are out of Chiropractic benefits and can continue care under my license.”

- a. Length testing of the supraspinatus, infraspinatus, teres minor, subscapularis, deltoids, teres major, rhomboids, levator scapulae and upper trapezius are not documented as being assessed.
- 4. Manual Therapy (15 minutes)
 - a. Specific technique, duration, intensity not documented.
 - b. Assessment of SCM, levator scapulae, upper trapezius, scalene, spenius capitus, semispinalis, teres minor/major, latissimus dorsi, rhomboids, suboccipitals, and erector spinae are not documented.
- d) Patient AT
 - 1. Joint dysfunction in the cervical, thoracic and ilio-femoral joints are not documented as being assessed.
 - 2. Documents therapeutic exercise to increase strength. All tested muscles were documented at 5/5 strength.
 - 3. Pre-cor Stretch Trainer (15 minutes)
 - a. Muscle length of the muscles identified were not assessed.
 - 4. Thera-band Cervical Protocol (15 minutes)
 - a. Patient is being treated for DX of Lumbar Pain. This treatment was not appropriate for this patient following examination of signs and symptoms.
 - b. Cervical spine was not assessed.
 - 5. Deep Muscle Stimulator (15 minutes) with 15 minutes of Therapist assisted stretching.
 - a. Identifies stretching to: supraspinatus, infraspinatus, teres minor, subscapularis, deltoids, teres major, rhomboids, levator scapulae and upper trapezius.
 - b. UE was not assessed in the initial evaluation
 - c. Treatment was not appropriate for patient's evaluation signs and symptoms.
 - 6. Manual Therapy (15 minutes)
 - a. Identified to restore joint integrity and reduce muscle adhesions which are not documented in the initial evaluation.
 - b. Specific technique, duration, intensity is not documented.

Ms. Hunter seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

Ms. Akers moved to accept the following Conclusions of Law:

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(1) (Violating this chapter, board rules or a written board order.)

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(4) (Engaging in the performance of substandard care by a physical therapist due to a deliberate or negligent act or failure to act regardless of whether actual injury to the patient is established.)

The conduct and circumstances explained in the Findings of Fact above constitute a violation of 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.)

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(12) (Failing to adhere to the recognized standards of ethics of the physical therapy profession.)

2.1 "A physical therapist shall place the patient's/client's interest(s) above those of the physical therapist.

2.2 "A physical therapist has an obligation to provide accurate and truthful information."

4.1(A) “A physical therapist shall make professional judgments that are in the patient’s/clients best interests.”

4.1(B) “Regardless of practice setting, a physical therapist has primary responsibility for the physical therapy care of a patient and shall make independent judgments regarding that care consistent with accepted professional standards.”

4.1(E) “Upon accepting a patient/client for physical therapy services, a physical therapist shall be responsible for: the examination, evaluation, and diagnosis of that individual; the prognosis and intervention; re-examination and modification of the plan of care; and the maintenance of adequate records, including progress reports. A physical therapist shall establish the plan of care and shall provide and/or supervise and direct the appropriate interventions.”

4.2(A) “The supervising physical therapist has primary responsibility for the physical therapy care rendered to a patient/client.”

7.1(D) “When a physical therapist’s judgment is that a patient will receive negligible benefit from physical therapy services, the physical therapist shall not provide or continue to provide such services if the primary reason for doing so is to further financial self-interest of the physical therapist or his/her employer. A physical therapist shall avoid overutilization of physical therapy services.

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(13) (Charging unreasonable or fraudulent fees for services performed or not performed.)

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(20) (Failing to maintain adequate patient records. For the purposes of this paragraph, “adequate patient records” means legible records that comply with board rules and that contain at a minimum and evaluation of objective findings, a diagnosis, the plan of care, the treatment record, a discharge summary and sufficient information to identify the patient.)

The conduct and circumstances explained in the Findings of Fact above constitute a violation of A.R.S. §32-2044(22) (Providing treatment unwarranted by the condition of the patient or treatment beyond the point of reasonable benefit.)

Mr. Clinton seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

Ms. Hunter moved to go to Executive Session. Dr. Miller seconded the motion. After review and discussion the motion carried unanimously.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

Executive Session began at 10:00 a.m.
Executive Session ended at 10:05 a.m.

The Board recessed at 10:10 a.m.

The Board returned to Regular Session at 10:25 a.m.

3) Review, Consideration and Action for Licensure and Certification

a) Substantive Review of Documentation Related to Disclosure on “Personal Information” Section of Application

(1) Physical Therapist Assistant Applications and Approval to take the NPTE and the AZLAW (Jurisprudence) Exam and Possible Certification.

(a) Anderson, Kyle

Mr. Anderson was present and was not represented by legal counsel. Ms. Akers moved to allow to test and to certify upon receipt of passing score and final transcript. Mr. D’ Appollonio seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

(b) Milstead, Deborah

Ms. Milstead was present and was not represented by legal counsel. Ms. Akers moved to allow to test and to certify upon receipt of passing score and final transcript. Dr. Miller seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

(c) Van Horne, Chelsyanne

Ms. Van Horne was not present and was not represented by legal counsel. Ms. Akers moved to allow to test and to certify upon receipt of passing score and final transcript. Dr. Miller seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

(2) Physical Therapist Assistant Application Related to Disclosures on “Personal Information” Section of Application.

(i) Camantigue, Francis

Mr. Camantigue was not present and was not represented by legal counsel. Ms. Akers moved to certify. Dr. Miller seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

b) Review of and Possible Action on Applications for certification from Applicant Requesting ADA Accommodations.

(1) Sloan, Scott

Mr. Sloan was not present and was not represented by legal counsel. Ms. Akers moved to allow the ADA Accommodations to included time and a half, with a separate room. Ms. Richardson seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

c) Review of and Possible Action on Application for licensure from Applicant previously licensed in Arizona.

(1) Hevner, Melissa

Ms. Hevner was present and was not represented by legal counsel. Ms. Hevner addressed the Board and answered questions asked of her by the Board. The Board discussed Ms. Hevner's revocation of her previously held Arizona license and the fact that Ms. Hevner had not taken any steps to address the concerns of the matters related to the revocation and had not paid the civil penalty from the case. Ms. Richardson moved to deny license. Mr. Clinton seconded the motion. Following review and discussion the vote carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

d) Substantive Review of documentation Related to Final Clinical Practice Instrument and possible licensure of previously licensed physical therapist.

(1) Becker, Erin

Mr. Becker was not present and was not represented by legal counsel. Ms. Richardson moved to license pending receipt of passing score. Ms. Akers seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

4) COMPLAINTS, HEARINGS, INVESTIGATIONS and COMPLIANCE

- b) Initial Review, Discussion and Action on Complaint
 - iii) Complaint #13-47; Noel Alfonso, PTA

Mr. Alfonso was present and was not represented by legal counsel. Ms. Donahue summarized complaint for the Board. Mr. Alfonso addressed the Board and answered questions asked of him by the Board. Ms. Richardson moved to go into Executive Session. Mr. D' Appollonio seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

Executive Session began at 11:55 a.m.
Executive Session ended at 11:58 a.m.

Ms. Akers moved for a Consent Agreement to include: Probation of 90 days, with the possibility of early termination if all requirements are met satisfactorily, a \$250.00 fine to be paid within 90 days, the Jurisprudence Exam to be taken within 90 days, Mr. Alfonso is to give a pre-approved presentation to 25 PTA students about the laws of Physical Therapy, 10 hours of Board approved Community Service. Ms. Richardson seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

- c) Review of Consent Agreement and Possible Action of Request for Termination of Board Order
 - i) Complaint #13-20; Troy Meiners, PT

Mr. Meiners was present and was not represented by legal counsel. Ms. Donahue summarized complaint for the Board. Dr. Zook moved to approve early termination of Board Order. Dr. Miller seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

iv) Complaint #14-01; Jeffrey Look, PT

Mr. Look was not present and was not represented by legal counsel. Dr. Zook moved to dismiss. Mr. D'Appollonio seconded the motion. Following review and discussion the motion failed.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye				X			X
Nay	X	X	X		X	X	
Recused							
Abstained							
Absent							

Ms. Akers moved for a non-disciplinary advisory letter. Ms. Richardson seconded the motion. Following review and discussion the motion passed.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X				X	X
Nay			X	X	X		
Recused							
Abstained							
Absent							

d) Review, Discussion and Action on Consideration to Open A Complaint

i) Catherine Odorfer, PT

Ms. Odorfer was not present and was not represented by legal counsel. Ms. Akers moved to open a complaint. Ms. Richardson seconded the motion. Following review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

5) BOARD BUSINESS AND REPORTS

a) Executive Director's Report

i) Financial Report

- ii) Review of Board Process for Approving Substance Abuse Evaluators/Monitors and Probation Monitors
- iii) Legislation
- iv) Rule Activity
- v) FSBT

Mr. Brown reviewed the written report for the Board. Mr. Brown noted expected expenditures in the Board financial trend report and requested the Board’s input on his intent to begin the Board’s FY 2014 Incentive program for employees. In addition, Mr. Brown stated he planned to request bids to help with the Board’s 5 year rule Review. The Board discussed both matters and concurred with Mr. Brown’s spending plan for the remainder of FY 2014. No other action was requested or taken on the ED Report.

b) Review, Discussion, and Action on Legislation, Senate Bill 1154; Dry Needling Standards

Mr. Brown provided a summary of SB 1154 and its impact on the Board to include a requirement to establish standards for Dry Needling training and education through Rules. Mr. Brown stated that Senator Ward, the sponsor of the bill, had requested stakeholders including the Board to provide her with language for a definition to be included in the bill.

Cynthia Driskell, PT representing the Arizona Physical Therapy Association (AzPTA) addressed the Board and stated they supported SB 1154 as a compromise to solve the greater issues concerning Dry Needling, but that the AzPTA did not feel additional regulations on Dry Needling specifically is necessary. In addition, the AzPTA did not support the adding of a definition to the bill language.

Dr. Chuck McDevitt addressed the Board representing himself. Dr. McDevitt is a physical therapy patient and supported of the use of the modality Dry Needling by physical therapists. Dr. McDevitt stated he has meet with multiple legislators regarding SB 1154 and that a definition is wanted and he provided the Board with a copy of the definition he recommends.

Mr. Brown presented the definition the Board used in its December 17, 2013 Dry needling discussion points for discussion and recommended possible changes. The Board entered discussion regarding Dry Needling and her comments from Peg Hiller, PT regarding the definition language presented by Mr. Brown. Ms. Donahue addressed the additions suggested by Mr. Brown.

Sean Flannagan, PT addressed the Board and supported a definition being put forward from the Board. Mr. D’Appollonio moved the Board enter Executive Session to seek legal advice. Ms. Hunter seconded the motion. Following review and discussion the motion carried.

Vote	Mr. D’Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

The Board entered Executive Session at 1:50 P.M.
The Board reentered regular Session at 1:56 P.M.

Ms. Akers began the discussion regarding providing a definition for consideration of including it in SB 1154. Ms. Akers supported the Board providing its own definition for consideration since it appeared a definition would be included in some form. The Board discussed the different definitions presented. The Board, by means

of consensus, instructed Mr. Brown to provide Senator Ward with the definition included in the Board's December 17, 2013 Dry Needling Discussion Points as the Board's recommended definition with no changes.

6) CALL TO THE PUBLIC

Sean Flannagan, PT addressed the Board in support of modifying the definition of Dry Needling to include neuromuscular conditions. No other person came forward to address the Board in a Call to the Public.

Ms. Akers moved to adjourn the meeting. Ms. Richardson seconded the motion. After review and discussion the motion carried by unanimous vote.

Vote	Mr. D'Appollonio	Ms. Akers	Ms. Hunter	Dr. Zook	Dr. Miller	Ms. Richardson	Mr. Clinton
Aye	X	X	X	X	X	X	X
Nay							
Recused							
Abstained							
Absent							

Meeting adjourned at 2:26 p.m