THE PHYSICAL THERAPY MINIMUM DATA SET
What is it?

- A set of data elements to be collected on all licensees in regular intervals
An appropriate supply of physical therapists and physical therapist assistants is vital to ensure that access to care at the highest quality is available to those who require it.

The current healthcare environment is characterized by substantial change, and it is critical to know and predict health care workforce.
- Understanding who we are and what we do
- How do physical therapists fit into new delivery models
- Primary care providers
Why?

- Identification of workforce needs
  - Is there a shortage of therapists or a mal-distribution?
  - Are there access gaps?
  - What about the future?

- Workforce planning
  - Educational planning
    - Class size
    - Number of educational programs
  - Rural employment incentives
  - International health care workers and immigration
  - Federal Legislation
  - Telehealth
It is Not a New Concept

States already collecting workforce information

☐ North Carolina
☐ Oregon
☐ Minnesota
☐ Others?
It is a Critical Regulatory Issue

- Assuring that the health care consumers in your jurisdiction can access quality care now and into the future.
- We are not alone:
  - Physicians
  - Pharmacists
  - Nursing
  - OT
  - Physicians Assistants
  - Social Workers
  - Psychologists
  - Psychiatrists
  - Dentists
  - Dental Hygienists
Motion:

The delegate assembly supports and encourages the FSBPT member jurisdictions to work with FSBPT staff, HRSA and other appropriate entities to define the components of a minimum dataset (MDS) of licensed physical therapists and physical therapist assistants and develop a database that includes the components of this MDS.
A Tri-alliance

- Federation of State Boards of Physical Therapy
- American Physical Therapy Association
- Federal Government: Health Resources Services Administration
# Minimum Data Set Task Force

March 2013

<table>
<thead>
<tr>
<th>FSBPT</th>
<th>APTA</th>
<th>HRSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kathy Arney PT</td>
<td>Melissa Cere PT</td>
<td>Christina Hosenfield</td>
</tr>
<tr>
<td>Carlton Curry Esq</td>
<td>Michael Hmura PT</td>
<td></td>
</tr>
<tr>
<td>Jim Heider</td>
<td>Mike Landry PT</td>
<td></td>
</tr>
<tr>
<td>Stephanie Lunning</td>
<td>Sheila Schaffer PT</td>
<td></td>
</tr>
<tr>
<td>Jessica Sapp</td>
<td>Patrick Tarnowski PT</td>
<td></td>
</tr>
<tr>
<td>Mark Lane PT,</td>
<td></td>
<td>Mark Goldstein</td>
</tr>
<tr>
<td>Seif Mahmoud</td>
<td></td>
<td>Nancy White</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Staff</td>
</tr>
</tbody>
</table>

*Note: np stands for non-physician.*
Purpose

- Determine the Minimum Data Set needed in order for the professional association, licensing boards and the state and federal government to project, plan for and address physical therapy work force needs.
- Identify challenges and opportunities in collecting this minimum data set by state licensing boards
- Provide input into the development of a MDS database.
The Physical Therapy Minimum Data Set (recommended)

- Three Sections
  - Demographics
  - Education, Training & Licensure
  - Employment
The Recommended Physical Therapy Minimum Data Set

<table>
<thead>
<tr>
<th>Section</th>
<th>Data Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographics</td>
<td>Name</td>
</tr>
<tr>
<td></td>
<td>Unique Identifier</td>
</tr>
<tr>
<td></td>
<td>Birthdate</td>
</tr>
<tr>
<td></td>
<td>Sex</td>
</tr>
<tr>
<td></td>
<td>Race/Ethnicity</td>
</tr>
<tr>
<td>Education, Training &amp; Licensure</td>
<td>Entry Degree</td>
</tr>
<tr>
<td></td>
<td>Year of Graduation</td>
</tr>
<tr>
<td></td>
<td>State (US only) or Country of Education</td>
</tr>
<tr>
<td></td>
<td>PT Licenses Held</td>
</tr>
</tbody>
</table>
## The Recommended Physical Therapy Minimum Data Set (cont.)

<table>
<thead>
<tr>
<th>Section</th>
<th>Data Element</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>Employment status</td>
</tr>
<tr>
<td></td>
<td>Hours in direct patient care per week</td>
</tr>
<tr>
<td></td>
<td>Weeks worked in past year in direct patient care</td>
</tr>
<tr>
<td></td>
<td>Location of direct care sites</td>
</tr>
<tr>
<td></td>
<td>Practice settings</td>
</tr>
<tr>
<td></td>
<td>Future employment plans in next 5 years</td>
</tr>
</tbody>
</table>
MDS Task Force Recommendations

- Provider unique identifiers: there may need to be multiple types of identifiers so we can be compliant with jurisdiction requirements.

- Provide resources to states to minimize additional work load or need for additional hardware and software.

- The collection of data should be part of the renewal process if possible.

- Different renewal time frames: 1, 2 and 3 year (NY is the only jurisdiction that has a 3 year renewal)
MDS Task Force Recommendations (cont.)

- All at once versus throughout the year
- Provide flexibility in building the data base; Data base should be able to include whatever additional data a jurisdiction may want beyond the MDS so specific reports can be generated for that jurisdiction
- When possible, pre-populate the fields that are common to multiple data bases so that licensees do not have to answer the same questions more than once.
MDS Task Force Recommendations (cont.)

- MDS should include both PTs and PTAs
- Incorporate the MDS data into the FSBPT’s ELDD in order to combine duplicate elements
- The Task Force should continue to exist through the creation of the system and at least the first data collection cycle in order to continue to provide input into the development, implementation and communications related to the PT MDS Database.
Important Details

- Who Will Have Access to the Data?
  - FSBPT & its members
  - APTA
  - HRSA

- Only de-identified information will be shared with these entities

- FSBPT will house the information and develop, support and maintain the data systems.
Next Steps

- Develop the infrastructure to house and maintain the data
- Work with each jurisdiction to implement
What Can You Do Now?

- Discuss with your licensing boards
- Determine what you need to do to add the data elements to your renewal forms; if possible begin adding any new data elements
- Determine any other barriers to implementation in your jurisdiction
- Discuss with other licensing professions to see what they are doing and how they have overcome barriers
- Respond to an upcoming survey from FSBPT
Discussion

- **Roadblocks**
  - Use of a unique identifier
  - Statutory limitations
    - Florida scenario
  - State resource limitations
  - Other(?)

- **Opportunities**
  - Collaboration with other professions
  - Other (?)
Resources Available

  - Physical Therapy Minimum Data Set
  - Rationale for data elements
  - PowerPoint presentation
  - Article on the importance of the MDS

- SHEP Center Seminar Series
  - Physical Therapy Minimum Data Set
  - Rationale for data elements
  - PowerPoint presentation
  - Article on the importance of the MDS
If I'd known they wanted me to use all this info— I would never have asked for it!