

THE PHYSICAL THERAPY MINIMUM DATA SET

What You Need to Know

What is it?

 A set of data elements to be collected on all licensees in regular intervals



Why?

- 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-distrubution?
 - 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

 - Physicians Assistants

- Social Workers
- Psychologists
- Psychiatrists
- Dentists
- Dental Hygienists



2012 FSBPT Delegate Assembly Motion

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 ServicesAdministration



Minimum Data Set Task Force March 2013

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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

Section	Data Element
Demographics	Name
	Unique Identifier
	Birthdate
	Sex
	Race/Ethnicity

Section	Data Element
Education, Training & Licensure	Entry Degree
	Year of Graduation
	State (US only) or Country of Education
	PT Licenses Held

The Recommended Physical Therapy Minimum Data Set (cont.)

Section	Data Element
Employment	Employment status
	Hours in direct patient care per week
	Weeks worked in past year in direct patient care
	Location of direct care sites
	Practice settings
	Future employment plans in next 5 years

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

- https://www.fsbpt.org/RegulatoryTools/index.asp
 - Physical Therapy Minimum Data Set
 - Rationale for data elements
 - PowerPoint presentation
 - Article on the importance of the MDS
- SHEP Center Seminar SeriesPhysical Therapy Minimum Data Set
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Additional Comments/Questions

