



*This article is based on a presentation by Charles D. Brown, Executive Director, Arizona Board of Physical Therapy; Heidi Herbst Paakkonnen, MPA, Continuing Competence Programs Manager, Federation of State Boards of Physical Therapy; Adrienne D. Price, RN, BA, MSN, Executive Director, Georgia Board of Physical Therapy; Corie Tillman Wolf, J.D., Executive Director, Virginia Board of Physical Therapy; and Talia Weinberg, PT, Board Member, Kentucky Board of Physical Therapy, at the 2017 FSBPT Annual Meeting.*

## **Now Trending: aPTitude & oPTion, and How Continuing Competence Can Go Viral in Your Jurisdiction #publicprotection #toolsyoucanuse**

While oPTion and aPTitude are optional tools offered by the Federation of State Boards of Physical Therapy (FSBPT), use of both will greatly increase the aptitude of physical therapists (PTs), physical therapist assistants (PTAs), and boards.

oPTion is an online, self-directed, assessment tool for physical therapists launched by FSBPT in early 2016. It provides a unique opportunity for takers to compare their knowledge to general practice entry-level knowledge through a series of patient scenarios.

aPTitude is a free continuing competence resource for licensees and students, vendors of continuing competence and continuing education (CC/CE) activities, and jurisdiction licensing boards.

### **Assessing One's oPTions**

oPTion uses realistic case scenarios that describe clinical situations and multiple-choice questions that emphasize clinical application of knowledge necessary for safe, effective practice. Scenarios include the age, gender, and presenting problem or current condition of a patient, and may also include past medical history, physical therapy examination results, description of physical therapy interventions, and other information.

As a key feature, oPTion provides references and a rationale that explains the correct choice for each question. The rationale is available whether the PT answers the question correctly or incorrectly. At the conclusion of oPTion, instead of a pass/fail standard, results will indicate one of four levels of performance. Each performance level describes the typical knowledge, skills, and abilities possessed by a physical therapist who performs at that level.

The references supplied in conjunction with the answers serve as a valuable source of information for PTs to follow up with and use for guidance in their planning of future continuing competence activities, allowing them to focus on areas that can help them move to a higher

performance level.

FSBPT encourages member boards to recognize oPTion as a qualifying continuing competence activity, since there is value in a periodic reassessment of knowledge. Self-assessment is part of a cycle that informs the PT moving forward and helps them to stay competent and improve their practice.

Many states already award licensees continuing competence credits for completing oPTion. In most cases, these boards have done so under the category of online education and have defaulted to the duration of three hours, three units, or three contact hours, depending on the jurisdiction's terminology. Some states are also awarding more than three credits for completion of oPTion. California awards six credits, West Virginia awards eight credits, and Mississippi awards 15. Colorado offers 10 credits, but limits it to once every 10 years.

More than half the jurisdictions do not offer credit for completion of oPTion. FSBPT is willing to work with any jurisdiction interested in offering credit for oPTion.

### **Cop an aPTitude**

In 2017, FSBPT surveyed jurisdictions on their use of aPTitude. Of the 31 jurisdictions that responded, 71% indicated that they promote aPTitude to their licensees. The promotion is done through individual contact (47%), through newsletters or bulletins (35%), through website links (32%), and through presentations (21%).

Perhaps more exciting is that 68% of responding jurisdictions currently use aPTitude, including 47% for compliance reporting. Since FSBPT launched aPTitude in late 2010, more than 33,000 PTs, PTAs, and students registered to use the system.

Another 15% reported that they are revising their rules to fully implement aPTitude and 12% are using it in post-audit compliance reporting to address deficiencies. Nine percent are promoting it in anticipation of future full implementation.

The survey also asked what challenges jurisdictions face in using aPTitude. One quarter of the responses indicated a lack of authority. To completely implement it, jurisdictions need to change a statute or a rule.

### **Georgia is All In**

Prior to its 2015 renewal period, Georgia used the traditional audit process implemented by most boards. A small percentage of licensees were selected for audit when they applied for renewal and were required to submit their documentation (by fax, email, or mail) to the board. This process was extremely time consuming for both board staff and the licensee.

One could argue that the process supported a culture of non-compliance. Because the board only audited a small percentage of licensees, licensees might gamble that they wouldn't be selected for the audit. In most cases, they were not selected for CE audit and they were able to get by for that particular biennium.

The Georgia board was eager to require all licensees to report compliance through aPTitude because it helped them to work smarter and not harder. Before implementing the requirement,

Georgia first needed to amend its rules and spend time communicating the new requirement to its licensees. The outreach campaign included email blasts to licensees, posting information on the website, and holding public hearings and informational meetings. The Georgia board also engaged FSBPT to help notify licensees of what was to come.

aPTitude also helped the board analyze the types of CEs licensees are taking. The system also allows licensees to improve their record-keeping and take ownership of their professional and licensing obligations.

Georgia found aPTitude to be easily accessible and user-friendly. Licensees could easily identify whether or not they met the continuing education requirements for the renewal cycle and it made auditing and tracking simple for the board.

Under the rules adopted by the board, licensees are required to create an aPTitude account. This requirement also applies to applicants for an initial Georgia license. New applicants use their applicant number with the letters GA as their “license” number when creating their Georgia license in aPTitude. Once the license is issued, it is the licensee’s responsibility to update the information to be their actual license number.

Licensees are required to upload their completion documents, whether it be certificates, outlines, or other documents, into aPTitude. As a result of this change, Georgia now audits 100% of licensees. In the board’s first renewal cycle with the aPTitude requirement, the board identified almost 20% of its licensees were out of compliance with the CE requirements. The board anticipates a better compliance in future renewal periods because licensees know the board has the capability to audit all.

Through the use of aPTitude, the board was able to not only identify who didn't complete their CE's, but also those who had the required 30 hours, but didn't meet the mandatory ethics and jurisprudence requirements. Since the Georgia model includes the mandatory ethics and jurisprudence requirements, it is easier for licensees to see that, although they completed the required 30 hours, they missed the four hours in ethics and jurisprudence.

Lessons learned included establishing a mechanism for licensees to record deficient CEs for the previous cycle and better communication of changes in the CE requirements to FSBPT to ensure the model in aPTitude accurately reflects the current requirements.

### **Virginia Promoting with Future Implementation Potential**

The Virginia Board of Physical Therapy received a presentation on aPTitude from FSBPT in November 2014. Following the FSBPT presentation, the board communicated about aPTitude to licensees. In addition to including the information in the board’s newsletter and including a link to aPTitude on the website, information about aPTitude is routinely included in presentations to PT and PTA students and professional organizations.

Although Virginia will use information uploaded to aPTitude if a licensee is selected for the CE audit, the board does not require that licensees use aPTitude and share their information. Even though it is entirely voluntary, growth in the number of Virginia licensees using aPTitude has been steady. In May of 2015, approximately 400 individuals in Virginia had an aPTitude account. By August 2017, just two years later, about 1,000 Virginia licensees had signed up, with about

800 sharing their information with the board. Although growing, it still only represents about 9% of Virginia's 11,300 PTs and PTAs.

Still, Virginia sees many opportunities to better use the tool. Like the experience in Georgia, increasing aPTitude participation would take a huge load off the staff and the board during the CE audit process.

Because the Virginia board is in an umbrella agency with 13 other health professions boards, it can point to the success of other boards that use aPTitude-like systems. For example, the National Association of Long Term Care Administrator Boards recently launched its own similar CE tracking system. The existence of other boards using similar tools makes it easier for the PT board to consider expanding the usage of aPTitude.

### **Arizona is also Promoting**

Similar to Virginia, Arizona optionally lets licensees report CE compliance through aPTitude. Although the board was interested in requiring use, similar to Georgia, legal counsel informed the board that it could not mandate that licensees utilize the system. As a result, the board worked with the Assistant Attorney General to identify creative ways to encourage licensees to voluntarily use aPTitude.

To promote use of aPTitude, the board has featured it on its website for several years. Website visitors see information about aPTitude directly below the details about continuing competence. Still, because of the limits of its process, only about 5 or 10% of licensees are regularly audited. There is neither time nor staff to do more. By law, everybody chosen for the audit must be notified in writing by certified mail. In the audit notice, licensees are informed that they can choose to upload their information to aPTitude in lieu of completing the paper audit notice that must be mailed back to the board.

Even though it is voluntary, nearly 600 Arizona licensees have chosen to upload and share their information. Because Arizona cannot mandate use, there are peaks and valleys with registrations. During renewal time, licensees see the value in aPTitude and want to use it. However, outside of the renewal periods, since it's not being mandated, registration falls.

In addition to the information posted on the board's website, the board's executive director does presentations to every PT and PTA school within the state. A common element of these sessions includes the common violations that the board handles. In Arizona, the most common violation is a PT failing to meet the continuing competence requirements. When the executive director discusses the paper-based audit, he also includes information about aPTitude, which the students think is a great idea. Even though Arizona has multiple categories of continuing competence, the board's aPTitude model addresses these categories, which makes it easier for licensees to keep track of their activities.

One of the current governor's big initiatives is to make every single state service in Arizona be available online. As a result, the next time the board plans to revise the continuing competence rule, they will try to require licensees to use aPTitude by showing the governor that there's an online service that costs the state and the licensee nothing, but gets the job done.

### **Kentucky Uses aPTitude for a Specific Focus**

The Kentucky PT Board conducts its CE audit immediately following the completion of renewal cycle. In addition to a random audit of 5% of all PTs and PTAs, there is a targeted audit of any PT or PTA who is found to be deficient during the previous audit cycle, or who failed to timely complete the current jurisprudence examination.

In March of 2011, FSBPT presented to the Kentucky Board outlining the value and functionality of aPTitude. Following that presentation, the board pledged its assistance in promoting aPTitude as a resource tool for its licensees to track their continuing competence activities. As part of that effort, newsletter articles promoting aPTitude appeared in August 2011, January 2014, June 2015, October 2016, and March 2017.

2013 turned out to be an incredibly messy audit year. It took forever. People didn't answer the audit notice, board staff couldn't find addresses for people, and licensees were submitting mixed up, unapproved courses. As a consequence, the board approved mandatory use of aPTitude and sharing of information with board staff to demonstrate compliance for all licensees determined to be deficient in satisfying their continuing competence requirements, beginning with the 2015 audit.

Implementing this change did not require a change in the rules or statute. Kentucky simply added it to its remediation settlement language.

### **In Summary**

Both oPTion and aPTitude have the potential to further protect the public. oPTion keeps PTs up-to-date on their areas of weakness and provides resources to mitigate those weaknesses. aPTitude, when fully used, can help a board replace random audits with 100% audits. But even used as a remedial tool, it better tracks those who have run afoul of the laws or rules.



**Charles D. Brown** is Executive Director of the Arizona Board of Physical Therapy and Director of the Federation of State Boards of Physical Therapy. He graduated in 2008 from Grand Canyon University with a Bachelor of Science in Business Administration. He is also a former Marine. Chuck has worked in the licensing and regulating of healthcare providers since 2001. During his time with the Arizona Boards he has served at the levels of Investigator, Deputy Director, and Executive Director. Chuck actively participates in the CBA and served as Chair and Vice Chair from 2010-2011. He has served as Chair of the Exam Administration Committee and as a member on the Education Committee, Finance Committee, as well as other task forces and focus groups.



**Heidi Herbst Paakkonnen**, MPA, is the Continuing Competence Programs Manager for the Federation of State Boards of Physical Therapy. Heidi joined FSBPT as its Continuing Competence Programs Manager in 2011. She previously served for eight years as the Executive Director of the Arizona Board of Physical Therapy and two years as the Executive Director of the Arizona Physical Therapy Association. Her 15 years of physical therapy regulatory and public policy experience includes writing and implementing requirements; program development; enforcement and auditing; volunteer development and support; promoting awareness; and quality assessment. Heidi earned her Masters Degree in Public Administration from the University of Wyoming.



**Adrienne D. Price, RN, BA, MSN**, is the Executive Director of Healthcare 2 at the Professional Licensing Boards Division of the Georgia Office of Secretary of State. Healthcare 2 consists of seven licensing boards, one of which is the Georgia State Board of Physical Therapy. Adrienne received her Bachelor's Degree in Liberal Arts from Mercer University in Macon, Georgia, and her Associate Degree in the Science of Nursing from Macon State College. She is a licensed Registered Nurse and obtained an MSN from the University of Phoenix.



**Corie E. Tillman Wolf, J.D.**, has served as the Executive Director of the Virginia Boards of Funeral Directors and Embalmers, Long-Term Care Administrators, and Physical Therapy since August 2016. Prior to this role, Corie worked for more than eight years as an Assistant Attorney General in the Office of the Attorney General. In the Health Professions Unit, she prosecuted administrative disciplinary and licensing cases and appeared regularly before the boards within the Department of Health Professions. As the Statewide Facilitator for Victims of Domestic Violence, she collaborated with stakeholders from numerous state and local agencies and organizations on ways to improve the response to and prevention of domestic and sexual violence. Before her tenure as an Assistant Attorney General, Corie worked in private practice as a family law attorney, clerked for a local Circuit Court judge, and served as a Special Assistant to the Secretary of Public Safety in the Office of the Governor. Corie received her undergraduate degree from the University of Virginia and her Juris Doctorate from George Mason University School of Law.



**Talia Weinberg, PT**, has served on the Kentucky Board of Physical Therapy since 2015 and is currently the Chair of the Board. Her career primarily has been in Lexington, KY, in numerous settings, including industrial, inpatient, outpatient, home health, rehab, management, and case review.

FSBPT®, aPTitude® and oPTion® are registered trademarks of the Federation of State Boards of Physical Therapy.