

OREGON BOARD OF PHYSICAL THERAPY

BOARD MEETING AGENDA

Sept 22, 2023 8:00 AM - until end of business

Portland State Office Building – Room 1A

Members of the public may attend the public portions of this meeting in person or remotely by registering via the link posted on our website at: <https://www.oregon.gov/pt/Pages/meetings.aspx>

I Call to Order -- Public Session

a. Roll Call

II **Executive Session** – The Board is expected to enter executive session immediately after roll call pursuant to ORS 192.660(2)(f)(h) and (L).

III Call to Order -- **Public Session (ANTICIPATED START 12:30 PM)**

A **Board Motions** - *Board actions as result of Executive Session.*

B **Consent Agenda Items** – *These items are being presented as a consent agenda; the Board members review the consent agenda items ahead of the meeting and will adopt the items as a single motion unless specific items are flagged for discussion and/or individual motion.*

- 1 Board Meeting Minutes, Draft—July 19/21, 2023.
- 2 Ratification of PT/PTA Licenses & Temp Permits issued Jul 1st, 2023 – Aug 31st, 2023.
- 3 Executive Director’s Report for September 2023.

C **Public Comments**

The Board welcomes public comments. At this point in the meeting, the Board Chair will ask if anyone attending would like to make comment—speakers will be asked to identify themselves for the record when speaking.

D **Board Member/Committee/Delegate Reports**

- 1 *New Board Member Appointments*
- 2 *PT Compact Commission and FSBPT Delegate Updates*
- 3 *Strategic Plan Progress Review*
- 4 *Open Roundtable*

E **Board General Discussion & Action Items**

- 1 **Report to Board** – *Rule Advisory Committee follow-up report on rules related to applicants who are graduates of non-CAPTE accredited programs.*
- 2 **Presentation** – *FSBPT Model Practice Act (MPA) Workgroup will present crosswalk of the MPA to Oregon Statute.*
- 3 **Presentation** – *Overview of Oregon Medical Board requirements related to medical chaperones.*
- 4 **OBPT 2024 Board Meeting Schedule** – *Review and Approval of Proposed 2024 Meeting Dates.*

F **Other Business**

IV **Adjournment**

This proposed agenda subject to last minute changes without prior notice. A request for an interpreter or other accommodations for persons with disabilities should be made at least 48 hours before the meeting to 971-673-0200 or physical.therapy@oregon.gov

Oregon Board of
Physical Therapy
Board Meeting

Call to Order



A - Board Motions as Result of Executive Session



B – Consent Agenda

- July Minutes
- Ratification Report
- Director's Report



**Oregon Board of Physical Therapy
Board Meeting Minutes
July 19 and July 21, 2023**

Wednesday, July 19

Board Members Present: Erica Shanahan, PTA, Chair; Hoku Okumura, PT, Vice Chair; Erin Crawford, PT; Sandra Hahn; Becca Reisch, PT; Michael Rennick, PT; Susan Reynolds, PT.

Board Members Absent: None (one position vacant).

Staff: Michelle Sigmund-Gaines, Executive Director; Sherri Paru, PT, Clinical Advisor/Investigator, Gayla Goodwin, Licensing Coordinator, Sarah Casey, Operations and Policy Analyst.

Staff Absent: None.

Legal Counsel: Angie Hunt, AAG.

PUBLIC (OPEN) SESSION

Chair Shanahan convened the Board into Public Session at 4:05 PM for the purpose of roll call. No members of the public were present.

EXECUTIVE (CLOSED) SESSION

After roll call, the meeting was convened into Executive Session at 4:07 PM pursuant to ORS 192.660(2)(f) and ORS 192.660(2)(L).

At 7:03 PM, Chair Shanahan adjourned Executive Session.

Friday, July 21

PUBLIC (OPEN) SESSION

Chair Shanahan convened the Board into Public Session at 8:30 AM.

Board Members Present: Erica Shanahan, PTA, Chair; Hoku Okumura, PT, Vice Chair; Erin Crawford, PT; Sandra Hahn; Becca Reisch, PT; Michael Rennick, PT; Susan Reynolds, PT.

Board Members Absent: None (one position vacant).

Staff: Michelle Sigmund-Gaines, Executive Director; Sherri Paru, PT, Clinical Advisor/Investigator, Gayla Goodwin, Licensing Coordinator, Sarah Casey, Operations and Policy Analyst.

Staff Absent: None

Legal Counsel: Angie Hunt, AAG.

Members of the Public Present: Noel Tenoso, PT; Jessica Lumba, PT.

Board Motions:

Case PT 761-05/22

Motion by Member Reynolds to close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 787-12/22

Motion by Member Reynolds to issue an interim order pursuant to ORS 688.140(3)(g).
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 799-03/23

Motion by Member Reynolds of finding of violation of ORS 688.140(2)(a)(j) and OAR 848-045-0020(2)(b)(c).
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 809-05/23

Motion by Member Reynolds to close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 810-05/23

Motion by Member Reynolds to close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 814-06/23

Motion by Member Reynolds to close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 817-07/23

Motion by Member Reynolds to issue license and close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Case PT 813-06/23

Motion by Member Reynolds to issue license and close case.
Motion seconded by Member Okumura.
Motion passed unanimously by a vote of 7-0.

Consent Agenda Items

The following items were presented as a consent agenda. Board members reviewed the items prior to the meeting.

- 1 Board Meeting Minutes, Draft—May 19, 2023.
- 2 Ratification of PT/PTA Licenses & Temp Permits issued May 1, 2023 – June 30, 2023.

3 Executive Director's Report for July 2023.

4 Summary Report: Developing Culturally Responsive Regulation.

Director Sigmund-Gaines highlighted a few items. The audited financials were only available through May in time for the meeting. The final numbers for June and the overall 21-23 biennium will be reported at the next Board Meeting. The other statistical data on the Director's report does go through June. Also, noted was that we are expecting a significant upgrade to our licensing system which is expected for September/October. In addition, the prior biennium external audit will be starting in October.

Member Reynolds moved to approve the consent agenda items as written. Member Okumura seconded the motion. Motion passed unanimously by a vote of 7-0.

Public Comments

None.

Board Member/Committee/Delegate Reports

Director Sigmund-Gaines noted that the PT Compact Commission recently changed their administrative rules now allowing any administrative staff member to serve as the PT Compact Delegate rather than only the Director.

Member Reynolds moved to elect Sherri Paru as the PT Compact Delegate for Oregon. Member Okumura seconded the motion. Motion passed unanimously by a vote of 7-0.

Strategic Plan Progress Review: Aside from the updates provided in the Director's report, it was noted that due to other work and the recent Leadership Issues Forum (LIF) meeting, two project items have been on hold. We have not been able to coordinate follow-up with the Board of Medical Imaging or further our work with the Educational Pathway Committee. We expect to pick up with these discussions in the late fall. The Rules Advisory Committee for the Non-CAPTE accredited rules review will be discussing the Model Practice Act that was presented at the LIF meeting as they continue their work.

Open Roundtable:

Member Rennick shared input regarding the use of ultrasound. He stressed that in future meetings with the OBMI, we should clarify that the application is not for diagnosis but rather to use as a guide for rehabilitation.

Board General Discussion & Action Items

Review of Delegated Authority

Director Sigmund-Gaines reviewed the proposed changes to the delegative authority letter regarding the issuance of a confidential advisory letter pertaining to the failure to disclose. Member Reynolds moved to adopt the proposed amendment to the delegated authority license application approval policy as written. Member Okumura seconded the motion. Motion passed unanimously by a vote of 7-0.

2023 Legislative Session Update

Director Sigmund-Gaines reviewed the 4 bills from our previous list that made it through the legislative session. These include: HB 2618, HB 2240, HB 2805 and SB 11. The Board was reminded that our next opportunity for an agency legislative concept request would not be until

2025.

Board Annual Best Practices Review

Director Sigmund-Gaines led the members through two assessment tools. The 1st one is required by all semi-independent agencies. The second assessment is the Board Assessment Resource (BAR) Tool created by the FSBPT. This process led to productive discussion and identified opportunities of where we could explore other ways to make improvements. A favorable response was given for both assessments.

General Discussion

Chair Shanahan shared her experience at the LIF meeting and expressed the benefit of having discussions with the other jurisdictions. Topics presented at the meeting included the NPTE passing rates and upcoming changes to the exam, re-entry to practice, workforce data, telehealth and the use of artificial intelligence (AI) in the practice of physical therapy.

One day of the workshop was a review of the revised Model Practice Act published at the end of 2022. Director Sigmund-Gaines added the FSBPT will be providing a recap of the LIF presentations to share.

Noel Tenoso, PT attended the Model Practice Act session as the APTA Oregon representative. He is looking forward to seeing what changes may occur because of the updates. Director Sigmund-Gaines noted that together with Chair Shanahan and Noel, they will be continuing the Crosswalk exercise, which is comparing the Model Practice Act to our current statutes and rules and bringing the results to the next Board Meeting for their review. If either organization has interest in pursuing any legislative changes, then we will discuss the pathways to take those changes to a legislative concept for the 2025 session.

Also noted were 2 additional topics discussed at the meeting. The Sexual Misconduct and Boundary Violations Committee is developing additional materials pertaining to sexual misconduct and trauma as well as looking at the term protection and digital practice, or AI in particular. We anticipate having more discussions regarding this at future meetings.

Other Business

Director Sigmund-Gaines advised the Board that the Governor appointment for the second public Board Member is scheduled for the week after our September in-person Board meeting. It was asked if members would have any conflicts with changing the meeting to Oct 6. After discussion, it was determined that it would be best to keep the meeting as scheduled.

Meeting Adjourned at 10:21 AM.

Oregon Board of Physical Therapy

Ratification Report: New Licenses and Temporary Permits Issued 7/1/2023 - 8/31/2023

| License Number | Legal First Name | Legal Last Name | License Effective Date | License Method | License Status | License Type | Initial Registration Date |
|----------------|------------------|-----------------|------------------------|----------------|------------------|--------------|---------------------------|
| 10186 | Allison | Blatter | 7/5/2023 | Endorsement | Active | PTA | 7/5/2023 |
| 65023 | Jamal | Edwards | 7/5/2023 | Endorsement | Active | PT | 7/5/2023 |
| 10187 | Amber | Vanderzanden | 7/5/2023 | Exam | Temporary Permit | PTA | 7/5/2023 |
| 10188 | Patricia | Boyle | 7/10/2023 | Endorsement | Active | PTA | 7/10/2023 |
| 65024 | Kyle | Grambihler | 7/10/2023 | Exam | Active | PT | 7/10/2023 |
| 65025 | Caroline | Gackenbach | 7/10/2023 | Endorsement | Active | PT | 7/10/2023 |
| 65028 | Stephanie | Kim | 7/11/2023 | Endorsement | Active | PT | 7/11/2023 |
| 65027 | Mark | Truskowski | 7/11/2023 | Endorsement | Active | PT | 7/11/2023 |
| 65026 | John | Gralyan | 7/11/2023 | Endorsement | Active | PT | 7/11/2023 |
| 10183 | Lindsay-Morgan | Dawson | 7/13/2023 | Exam | Active | PTA | 6/27/2023 |
| 10184 | Carly | Petesz | 7/13/2023 | Exam | Active | PTA | 6/27/2023 |
| 10181 | Jennifer | Oechsner | 7/13/2023 | Exam | Active | PTA | 6/26/2023 |
| 10180 | Tara | Hansen | 7/13/2023 | Exam | Active | PTA | 6/26/2023 |
| 10182 | Mikayla | Crompton | 7/13/2023 | Exam | Active | PTA | 6/26/2023 |
| 10189 | Aura | Spann | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10192 | Joshua | Olson | 7/14/2023 | Endorsement | Active | PTA | 7/14/2023 |
| 10198 | Amy | LeBeau | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10194 | Natalie | Pace | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10199 | Razvan | Nedelcu | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10196 | Taylor | Shellabarger | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10195 | Anne | Huffman | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10190 | Andrew | Felderman | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10193 | Addie | Flemmer | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10197 | Caitlin | McMillan | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 10191 | Iliana | Rauda Gaona | 7/14/2023 | Exam | Active | PTA | 7/14/2023 |
| 65029 | Briana | Baxley | 7/14/2023 | Exam | Active | PT | 7/14/2023 |
| 65030 | Kaitlin | Haight | 7/18/2023 | Endorsement | Active | PT | 7/18/2023 |
| 10200 | Claudia | Crozier | 7/18/2023 | Exam | Active | PTA | 7/18/2023 |
| 65033 | Hannah | Wahl | 7/19/2023 | Exam | Active | PT | 7/19/2023 |
| 65032 | Manuel | Arruffat | 7/19/2023 | Endorsement | Active | PT | 7/19/2023 |
| 65031 | Parker | Folliard | 7/19/2023 | Endorsement | Active | PT | 7/19/2023 |
| 10201 | Kimiree | Smith | 7/19/2023 | Exam | Active | PTA | 7/19/2023 |
| 10202 | Kaitlyn | Brooks | 7/19/2023 | Exam | Active | PTA | 7/19/2023 |
| 9587 | Eric | Vandereyken | 7/19/2023 | Endorsement | Active | PTA | 4/1/2018 |
| 10203 | Raelin | Friese | 7/20/2023 | Endorsement | Active | PTA | 7/20/2023 |
| 65035 | Matthew | Smith | 7/20/2023 | Endorsement | Active | PT | 7/20/2023 |
| 63657 | Taylor | Eckel | 7/20/2023 | Exam | Active | PT | 5/19/2020 |
| 8895 | Tamara | Buck | 7/20/2023 | Endorsement | Active | PTA | 11/13/2012 |

Oregon Board of Physical Therapy

Ratification Report: New Licenses and Temporary Permits Issued 7/1/2023 - 8/31/2023

| License Number | Legal First Name | Legal Last Name | License Effective Date | License Method | License Status | License Type | Initial Registration Date |
|----------------|------------------|--------------------|------------------------|----------------|----------------|--------------|---------------------------|
| 10204 | Gabriele | Voisin | 7/21/2023 | Endorsement | Active | PTA | 7/21/2023 |
| 10208 | Alicia | Pagan | 7/21/2023 | Exam | Active | PTA | 7/21/2023 |
| 10206 | Dylan | Morgenstern | 7/21/2023 | Endorsement | Active | PTA | 7/21/2023 |
| 10207 | Michael | Furuya | 7/21/2023 | Exam | Active | PTA | 7/21/2023 |
| 10205 | Jennifer | Burdick | 7/21/2023 | Exam | Active | PTA | 7/21/2023 |
| 65036 | Hyun Jung | Ahn | 7/24/2023 | Endorsement | Active | PT | 7/24/2023 |
| 10209 | Kylee | Dean | 7/24/2023 | Exam | Active | PTA | 7/24/2023 |
| 65037 | Kaitlyn | Fraser | 7/24/2023 | Endorsement | Active | PT | 7/24/2023 |
| 10210 | Tylena | Johnson | 7/24/2023 | Exam | Active | PTA | 7/24/2023 |
| 10211 | Choeyng | Sangmo | 7/25/2023 | Endorsement | Active | PTA | 7/25/2023 |
| 65038 | Eric | Kendall | 7/26/2023 | Endorsement | Active | PT | 7/26/2023 |
| 10212 | Victoria | Bompat | 7/26/2023 | Endorsement | Active | PTA | 7/26/2023 |
| 10213 | Austin | Hull | 7/27/2023 | Exam | Active | PTA | 7/27/2023 |
| 10214 | Diego | Fregoso Duenas | 7/28/2023 | Exam | Active | PTA | 7/28/2023 |
| 10215 | DeAnn | Steele | 7/28/2023 | Exam | Active | PTA | 7/28/2023 |
| 10216 | Kirrah | Ward | 7/28/2023 | Endorsement | Active | PTA | 7/28/2023 |
| 10217 | Arianna | Chapman | 7/31/2023 | Exam | Active | PTA | 7/31/2023 |
| 65039 | Theresa | Pulickal | 8/1/2023 | Endorsement | Active | PT | 8/1/2023 |
| 10219 | Raley | Foster | 8/1/2023 | Exam | Active | PTA | 8/1/2023 |
| 10218 | Zachary | Kiyuna | 8/1/2023 | Exam | Active | PTA | 8/1/2023 |
| 65052 | Anthony | Castro | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65043 | Christina | Clark | 8/2/2023 | Endorsement | Active | PT | 8/2/2023 |
| 65041 | Nikki | Peirtsegaele | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65046 | Claire | Maederer | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65047 | Genevieve | Dupre | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65049 | Priscilla | Lee | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65051 | Kalia | Miller | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65050 | Dylan | Ito | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65044 | Miguel | Paniagua Rodriguez | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65042 | Jacqueline | Diulio | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65048 | Sean | Magill | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65045 | Morgan | Clark | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65040 | Lauren | Chambers | 8/2/2023 | Exam | Active | PT | 8/2/2023 |
| 65034 | Madeline | Staiger | 8/2/2023 | Exam | Active | PT | 7/20/2023 |
| 65019 | Daniel | Roselio Lafuente | 8/2/2023 | Exam | Active | PT | 6/26/2023 |
| 65003 | Rachael | Schmelling | 8/2/2023 | Exam | Active | PT | 6/9/2023 |
| 65002 | Michael | Wilson | 8/2/2023 | Exam | Active | PT | 6/8/2023 |
| 64992 | Jeremy | Scheuermann | 8/2/2023 | Exam | Active | PT | 6/2/2023 |
| 64967 | Emily | Cullen | 8/2/2023 | Exam | Active | PT | 5/25/2023 |

Oregon Board of Physical Therapy

Ratification Report: New Licenses and Temporary Permits Issued 7/1/2023 - 8/31/2023

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|----------------|------------------|-----------------|------------------------|----------------|-------------------------------|--------------|---------------------------|
| 64964 | Mikaela | Bernards | 8/2/2023 | Exam | Active | PT | 5/25/2023 |
| 65053 | Adam | Garmon | 8/3/2023 | Exam | Active | PT | 8/3/2023 |
| 65054 | Kylene | Olin | 8/3/2023 | Exam | Active | PT | 8/3/2023 |
| 64950 | Jordan | Barber | 8/3/2023 | Exam | Active | PT | 5/23/2023 |
| 65055 | Anne | Leonard | 8/4/2023 | Exam | Active | PT | 8/4/2023 |
| 65056 | Tyler | Hammond | 8/4/2023 | Exam | Active | PT | 8/4/2023 |
| 65057 | Nina | Caplan | 8/7/2023 | Exam | Active | PT | 8/7/2023 |
| 65059 | Alyssa | del Castillo | 8/7/2023 | Exam | Active | PT | 8/7/2023 |
| 10220 | Pricilla | Marin | 8/7/2023 | Exam | Active | PTA | 8/7/2023 |
| 65060 | Brooke | Ireland | 8/7/2023 | Endorsement | Active | PT | 8/7/2023 |
| 65058 | Lauren | Calfo | 8/7/2023 | Exam | Active | PT | 8/7/2023 |
| 65062 | Bryana | Popa | 8/8/2023 | Exam | Active | PT | 8/8/2023 |
| 65061 | Chance | Halvorson | 8/8/2023 | Exam | Active | PT | 8/8/2023 |
| 65063 | Timothy | Wallenburg | 8/9/2023 | Endorsement | Active | PT | 8/9/2023 |
| 10221 | Kristina | Alexander | 8/9/2023 | Exam | Active | PTA | 8/9/2023 |
| 65064 | Meghan | Key | 8/10/2023 | Exam | Active | PT | 8/10/2023 |
| 65065 | Ty | Balty | 8/14/2023 | Endorsement | Active | PT | 8/14/2023 |
| 65069 | Meghan | King | 8/14/2023 | Endorsement | Active | PT | 8/14/2023 |
| 65067 | Caitlin | Wade | 8/14/2023 | Exam | Active | PT | 8/14/2023 |
| 65070 | Michelle | Veronin | 8/14/2023 | Exam | Active | PT | 8/14/2023 |
| 65068 | Nils | Jordan | 8/14/2023 | Endorsement | Active | PT | 8/14/2023 |
| 65066 | Lea Camille | Keenantasker | 8/14/2023 | Exam | Active | PT | 8/14/2023 |
| 10224 | Abigail | Crume | 8/15/2023 | Exam | Active | PTA | 8/15/2023 |
| 10222 | Megan | Booth | 8/15/2023 | Exam | Active | PTA | 8/15/2023 |
| 10223 | Brittany | Garcia | 8/15/2023 | Endorsement | Active | PTA | 8/15/2023 |
| 65071 | Yoel | Napoles | 8/16/2023 | Endorsement | Active | PT | 8/16/2023 |
| 65073 | Lacey | Dean | 8/16/2023 | Exam | Active | PT | 8/16/2023 |
| 65072 | Gregory | Palmer | 8/16/2023 | Endorsement | Active | PT | 8/16/2023 |
| 65074 | Jenna | Belser | 8/17/2023 | Endorsement | Active | PT | 8/17/2023 |
| 65076 | Courtney | Odell | 8/17/2023 | Endorsement | Active | PT | 8/17/2023 |
| 65075 | Emily | Pahls | 8/17/2023 | Endorsement | Active | PT | 8/17/2023 |
| 65077 | Christopher | Largent | 8/18/2023 | Endorsement | Active | PT | 8/18/2023 |
| 10225 | Katelyn | Kusey | 8/21/2023 | Endorsement | Temp Permit - Military Spouse | PTA | 8/21/2023 |
| 65080 | Jason | Leeds | 8/21/2023 | Exam | Active | PT | 8/21/2023 |
| 65079 | Nathan | Flores | 8/21/2023 | Endorsement | Active | PT | 8/21/2023 |
| 65078 | Sierra | Montgomery | 8/21/2023 | Exam | Active | PT | 8/21/2023 |
| 63835 | Julia | Meriwether | 8/21/2023 | Endorsement | Active | PT | 8/17/2020 |
| 65081 | Laurie | Graves | 8/22/2023 | Endorsement | Active | PT | 8/22/2023 |

Oregon Board of Physical Therapy

Ratification Report: New Licenses and Temporary Permits Issued 7/1/2023 - 8/31/2023

| License Number | Legal First Name | Legal Last Name | License Effective Date | License Method | License Status | License Type | Initial Registration Date |
|----------------|------------------|-----------------|------------------------|----------------|----------------|--------------|---------------------------|
| 65082 | Jackie | Lau | 8/23/2023 | Exam | Active | PT | 8/23/2023 |
| 65083 | June | Kume | 8/25/2023 | Endorsement | Active | PT | 8/25/2023 |
| 65087 | Joseph | Conroy | 8/28/2023 | Endorsement | Active | PT | 8/28/2023 |
| 65084 | Nicole | Seal | 8/28/2023 | Exam | Active | PT | 8/28/2023 |
| 65085 | Emily | Walker | 8/28/2023 | Exam | Active | PT | 8/28/2023 |
| 65086 | Amber | McKee | 8/28/2023 | Endorsement | Active | PT | 8/28/2023 |
| 65088 | Carrie | Barber | 8/29/2023 | Endorsement | Active | PT | 8/29/2023 |
| 65089 | Taylor | Santolla | 8/29/2023 | Endorsement | Active | PT | 8/29/2023 |
| 10226 | Emily | Wright | 8/30/2023 | Exam | Active | PTA | 8/30/2023 |
| 5701 | Jennifer | Benton | 8/31/2023 | Endorsement | Active | PT | 9/16/2008 |

| License Type | Endorsement | Exam | Grand Total |
|------------------------------------|-------------|-----------|-------------|
| PT | 34 | 43 | 77 |
| Active | 34 | 43 | 77 |
| PTA | 14 | 34 | 47 |
| Active | 12 | 34 | 46 |
| Temporary Permit - Military Spouse | 1 | | 1 |
| Temporary Permit | 1 | | |
| Grand Total | 48 | 77 | 125 |

Note: Where Initial Registration Date is prior to License Effective date, licensing transaction is either a change from prior status, such as Temp to Active, or renewal of a lapsed license, or re-application of an expired license.

EXECUTIVE DIRECTOR'S REPORT

SEPTEMBER 2023 | FOR THE PERIOD 07/01/2023 – 08/31/2023

21-23 BIENNIUM BUDGET VS. ACTUAL PERFORMANCE

Final Actuals to Budget for 21-23 Biennium (July 2021-June 2023).

| | Jul '21 –May '23 | Budget (to date) | \$ Variance | % of Budget (to date) |
|---------|------------------|------------------|----------------|-----------------------|
| Income | \$ 1,632,484.88 | \$ 1,615,413.32 | \$ 17,021.56 | 101.1% |
| Expense | \$ 1,520,728.61 | \$ 1,768,363.60 | \$ -247,634.99 | 86% |

NOTES –The final month of the biennium was not ready to process in time for the July board meeting; the above represents the overall budget vs actuals performance for the 2021-2023 biennium.

23-25 BIENNIUM BUDGET VS. ACTUAL PERFORMANCE

Actuals to Budget through **most current closed** period (July 2023-Aug 2023).

| | Jul '23 –Aug '23 | Budget (to date) | \$ Variance | % of Budget (to date) |
|---------|------------------|------------------|---------------|-----------------------|
| Income | \$ 32,986.41 | \$ 28,395.60 | \$ 4,590.81 | 116.2% |
| Expense | \$ 117,704.94 | \$ 162,461.70 | \$ -44,756.76 | 72.5% |

NOTES –The numbers above reflect the actuals to budget for the biennium to date, not total budget for the entire biennium. Expenses typically exceed Income during this period of the biennium because board income derives predominantly from renewals, which occur Jan-Mar 2024.

ATTACHED FINANCIAL REPORTS

- July 2021-June 2023 Final BI Budget Vs. Actual Report
- 2022-2023 Fiscal Year Report
- 2021-2023 Biennium Report
- July 2023-August Budget Vs. Actual Report

EDUCATION & OUTREACH ACTIVITIES –07/20/2023 - 09/15/2023

7/24/2023 – Oregon School Personnel Association (OSPA) Summer Retreat; panel speaker; Paru.

8/9/2023- Presentations to OSU Cascades 2nd & 3rd year students; Paru.

8/24/2023 –Model Practice Act Workgroup Review session; Sigmund-Gaines.

9/1/2023 – News Brief published.

9/12/2023 –HB 2618 Pre-study engagement meeting with ODE; Paru.

ADMINISTRATION HIGHLIGHTS

- Information Technology & Security: The grant-funded work to implement an API between the Board’s licensing system and the FSBPT ELDD/NPTE was implemented in late July.
- Information Technology & Security: Staff have been working with state IT staff and Thentia to prepare for the migration to an upgraded version of the board’s core licensing software. Migration is planned for October/November and will incorporate many of the board’s current change requests.
- Continuity of Operations Planning: Consistent with the statewide efforts and requirements, staff have been participating in FIMA and Office of Emergency Management trainings.
- 2024 Renewals: Staff have begun planning for the 2024 renewal season, evaluating opportunities for improvements, in conjunction with the licensing software migration to the new version.
- OBPT staff continue to sit on the statewide M365 Advisory Committee. Upcoming changes as a result of this committee include enforcement of data sensitivity protections.
- External Audit: Moss Adams, LLC will begin the engagement for the external audit of the 21-23 biennium. This external review is required by statute, and results reviewed by Secretary of State Audits Division, and reported to the Legislative Fiscal Office and Governor’s Office as part of the final biennium report.

LICENSE COUNTS BY STATUS AS OF SEPTEMBER 01, 2023

| License Status | PT | PTA | TOTAL |
|------------------------------|--------------|--------------|--------------|
| Active | 5,386 | 1,295 | 6,681 |
| <i>Change since last</i> | +77 | +46 | +123 |
| Restricted | 1 | 1 | 2 |
| Probation | 2 | 0 | 2 |
| Suspended | 6 | 0 | 6 |
| Total Licensed | 5,395 | 1,296 | 6,691 |
| <i>Net change since last</i> | +77 | +46 | +123 |

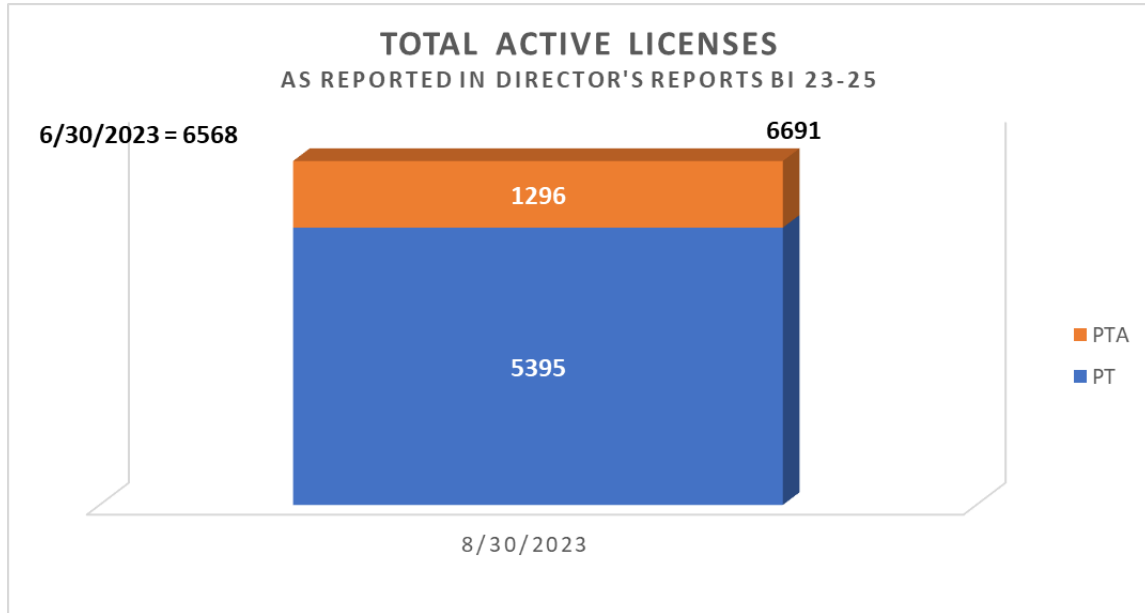
| | | | |
|----------------------|---|---|---|
| Temp Permit | 2 | 0 | 2 |
| Temp-Military Spouse | 2 | 1 | 3 |

| License Status | PT | PTA | TOTAL |
|---------------------------------------|--------------|--------------|--------------|
| <i>Lapsed (five or fewer years)</i> | 1,535 | 524 | 2,057 |
| <i>Change since last</i> | (4) | (3) | (7) |
| <i>Expired (more than five years)</i> | 4,821 | 1,460 | 6,281 |
| | +1 | +1 | +2 |
| Total Previously Licensed | 6,359 | 1,984 | 8,340 |

| Applications Submitted by Type 7/1/2023-8/31/2023 | EXA | END | TOTAL |
|--|-----------|-----------|-----------|
| PT | 26 | 38 | 64 |
| PTA | 22 | 12 | 34 |
| TOTAL | 48 | 50 | 98 |

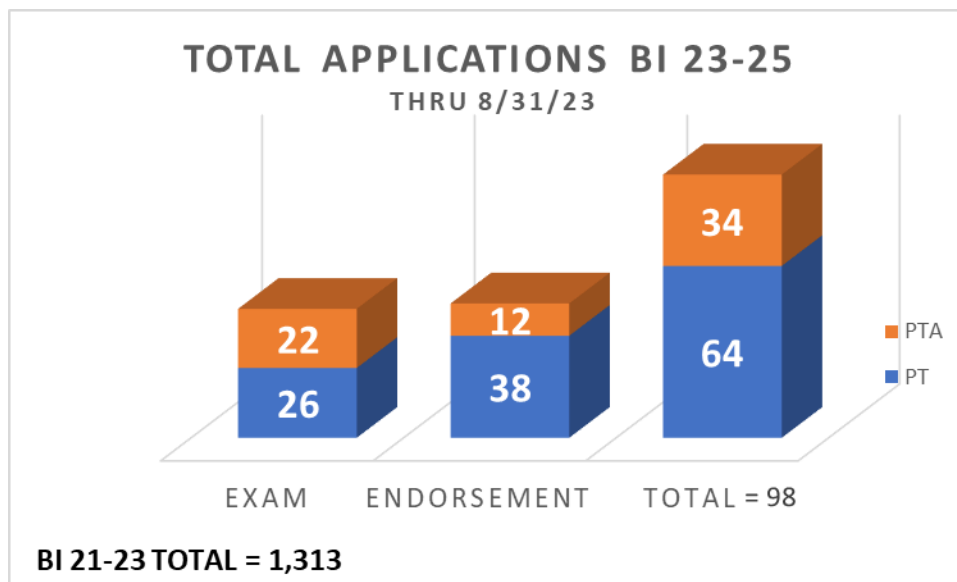
BIENNIUM TOTAL ACTIVE LICENSE COUNTS AS OF AUG 31, 2023

NOTE: Numbers are reported at the end of each month prior to Board meetings, which will allow for alignment with the Biennium reporting. License counts by status for the prior section and this section are sourced from the licensing system licensee status statistical report and reflect the counts as of a given day.

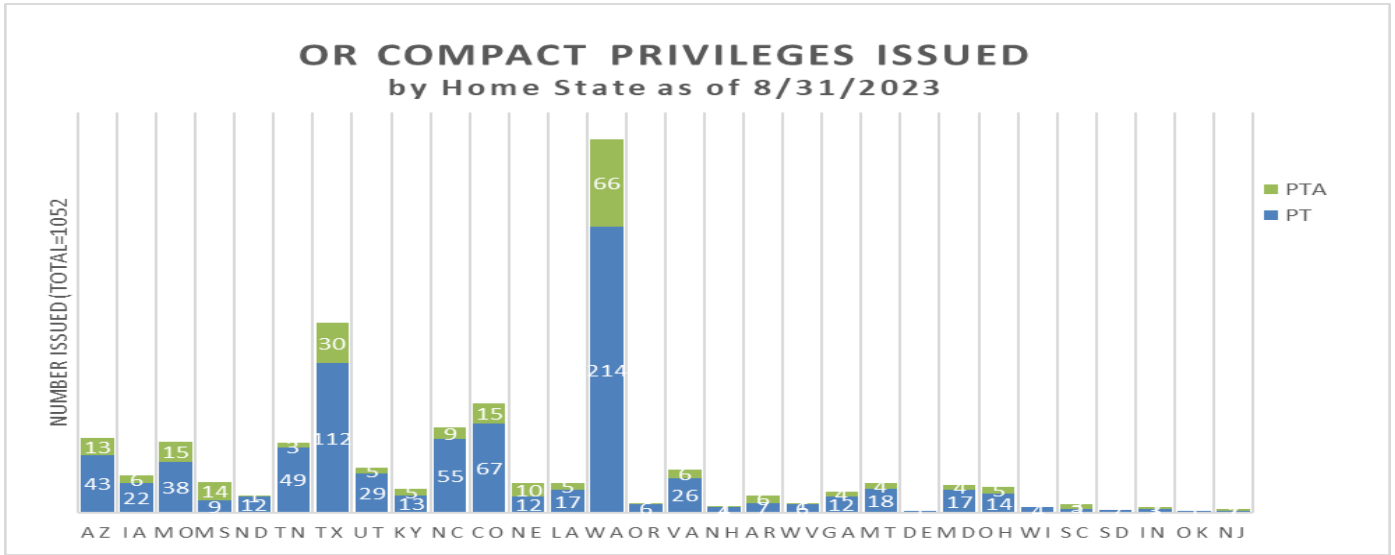


BIENNIUM TOTAL APPLICATIONS SUBMITTED AS OF AUG 31, 2023

NOTE: Application data taken from licensing system based on date of submittal; applications may not be complete when first submitted, and final approval may appear in a different reporting period.

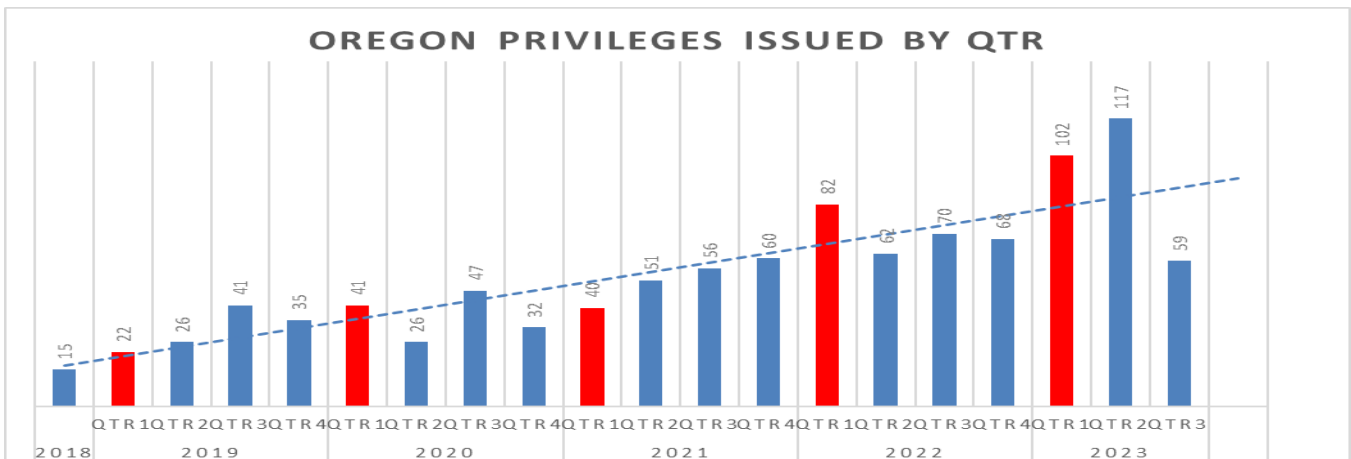
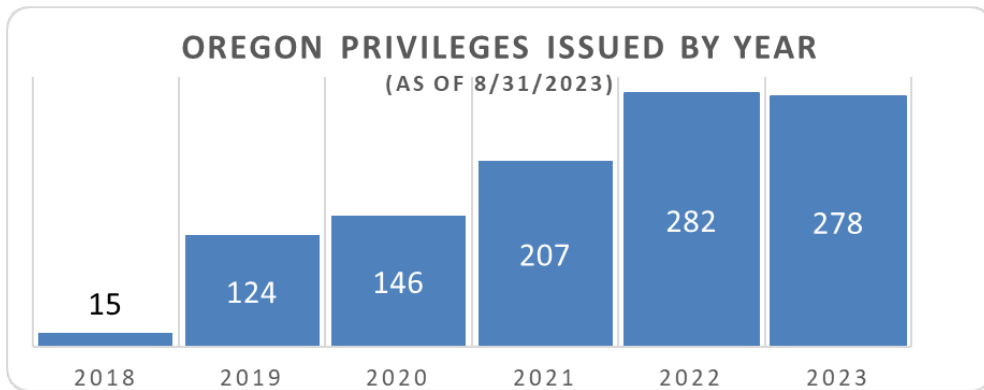


PT COMPACT OREGON PRIVILEGE HOLDERS – AS OF AUG 31, 2023



| OR Privileges Issued | AZ | IA | MO | MS | ND | TN | TX | UT | KY | NC | CO | NE | LA | WA | OR | VA | NH | AR | WV | GA | MT | DE | MD | OH | WI | SC | SD | IN | OK | NJ | Grand Total |
|----------------------|-----------|-----------|-----------|-----------|-----------|-----------|------------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------|-----------|----------|-----------|----------|-----------|-----------|----------|-----------|-----------|----------|----------|----------|----------|----------|----------|-------------|
| Initial | 44 | 24 | 46 | 16 | 12 | 46 | 126 | 27 | 16 | 48 | 69 | 18 | 16 | 181 | 6 | 31 | 5 | 13 | 5 | 15 | 17 | 1 | 19 | 18 | 3 | 6 | 2 | 4 | 1 | 3 | 838 |
| Renewal | 12 | 4 | 7 | 7 | 1 | 6 | 16 | 7 | 2 | 16 | 13 | 4 | 6 | 99 | 1 | 1 | | | 2 | 1 | 5 | | 2 | 1 | 1 | | | | | | 214 |
| Grand Total | 56 | 28 | 53 | 23 | 13 | 52 | 142 | 34 | 18 | 64 | 82 | 22 | 22 | 280 | 7 | 32 | 5 | 13 | 7 | 16 | 22 | 1 | 21 | 19 | 4 | 6 | 2 | 4 | 1 | 3 | 1052 |

NOTES: Cumulative total privileges purchased since Oregon began issuing privileges—not total number of current active privileges. Oregon privileges have been purchased in all 30 states currently issuing privileges out of 34 total member states.



NOTES: Data for all tables and graphs sourced from PTCC compact privilege purchase reports; data through 8/31/2023.

INVESTIGATIONS: OPEN CASES & AGING REPORT

Sep-23 OBPT Open Cases

- 23 Total Open Cases
- 9 Presenting to Board Sept 2023 Meeting
- 3 Post Board Meeting (Notice/Hearing Process)

11 Remaining Open Cases

Remaining Open Case Aging (date of complaint thru Present to Board)

-
- 5 Case(s) currently over four months (120 days)
 - 1 Additional case(s) will be over four months (120 days) by Nov 2023 meeting
 - 4 Case(s) that will be under four months (120 days) by Nov 2023 meeting
-
- 11 Total

Based on case tracking status on 9/11/2023.

NOTE: Approval of the Executive Director's Report will also authorize extension(s) of investigation period for case reporting to the Board under ORS 676.165 where case(s) will exceed 120 days based on the date of the next available scheduled meeting.

CASES OPENED AND CLOSED PER BIENNIUM THROUGH BI 2023-2025 (AS OF 9/11/2023)

| BIENNIUM | 2013 2015 | 2015 2017 | 2017 2019 | 2019 2021 | 2021 2023 | 2023 2025 |
|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Cases Opened | 88 | 58 | 56 | 49 | 98 | 8 |
| Cases Closed | 82 | 54 | 71 | 48 | 83 | 9 |
| Compact | | | 1 2% | 3 6% | 26 27% | 0 0% |

NOTE: Total cases opened, and total cases closed in each biennium. Cases opened in one period may be closed in the subsequent period dependent on when received. Does not reflect type of action taken, only raw counts. Data sourced from case tracking report on 09/11/2023; All BI begin on 7/1 of the first year and end on 6/30 of the 2nd year.

Oregon Board of Physical Therapy Year-End Financial Report

Reporting Period July 2021 through June 2022

| | Jul '21 - Jun 22 | Budget | \$ Over Budget | % of Budget |
|--|---------------------|---------------------|--------------------|----------------|
| Ordinary Income/Expense | | | | |
| Income | | | | |
| 4000 · Income | | | | |
| Total 4100 · Physical Therapists | 1,163,867.00 | 1,200,352.13 | -36,485.13 | 96.96% |
| Total 4200 · Physical Therapist Assistants | 200,192.00 | 208,363.71 | -8,171.71 | 96.08% |
| Total 4300 · PT & PTA Combined | 40,092.00 | 37,674.44 | 2,417.56 | 106.42% |
| 4400 · PT/PTA License Verification Fee | 12,750.00 | 10,000.00 | 2,750.00 | 127.5% |
| Total 4500 · Miscellaneous Income | 6,780.07 | 156.00 | 6,624.07 | 4,346.2% |
| 4900 · Bank Interest Income | 88.81 | 0.00 | 88.81 | 100.0% |
| Total 4000 · Income | <u>1,423,769.88</u> | <u>1,456,546.28</u> | <u>-32,776.40</u> | <u>97.75%</u> |
| Total Income | <u>1,423,769.88</u> | <u>1,456,546.28</u> | <u>-32,776.40</u> | <u>97.75%</u> |
| Gross Profit | 1,423,769.88 | 1,456,546.28 | -32,776.40 | 97.75% |
| Expense | | | | |
| Total 5100 · Payroll Costs | 552,283.70 | 580,647.60 | -28,363.90 | 95.12% |
| Total 5600 · Travel Costs | 452.75 | 21,300.00 | -20,847.25 | 2.13% |
| Total 6100 · General Office Expenses | 43,653.23 | 43,410.00 | 243.23 | 100.56% |
| 6190 · Dues and Subscriptions | 2,324.00 | 10,000.00 | -7,676.00 | 23.24% |
| Total 6200 · Postage | 408.64 | 2,000.00 | -1,591.36 | 20.43% |
| 6300 · Publications | 0.00 | 320.00 | -320.00 | 0.0% |
| Total 6400 · Contracted Services | 73,488.39 | 113,235.00 | -39,746.61 | 64.9% |
| Total 6500 · Rent and Occupancy | 26,198.04 | 22,000.00 | 4,198.04 | 119.08% |
| Total 6600 · Background Checks | 24,638.75 | 42,400.00 | -17,761.25 | 58.11% |
| 6650 · Investigation Expenses | 0.00 | 100.00 | -100.00 | 0.0% |
| Total 6800 · Computers & Accessories | <u>23,929.87</u> | <u>36,800.00</u> | <u>-12,870.13</u> | <u>65.03%</u> |
| Total Expense | <u>747,377.37</u> | <u>872,212.60</u> | <u>-124,835.23</u> | <u>85.69%</u> |
| Net Ordinary Income | <u>676,392.51</u> | <u>584,333.68</u> | <u>92,058.83</u> | <u>115.75%</u> |
| Net Income | <u>676,392.51</u> | <u>584,333.68</u> | <u>92,058.83</u> | <u>115.75%</u> |

**Oregon Board of Physical Therapy
Year-End Financial Report
Reporting Period July 2021 – June 2022**

Total Income is under budget by \$(32,776.40)

The Board’s projected income for the fiscal year 2021 – 2022 was budgeted at \$1,456,546.28, Actual income totaled \$1,423,769,88 this created a negative income variance of \$(32,776.40) which is 97.75% of budget. Since the Board is on a biannual renewal, most income occurs in this first year of the biennium and covers expenses through the second year.

The income variance is predominantly a result of a budgeting error made when calculating application processing and verification fees. The impact of the error on the overall income for the fiscal year was mitigated by actuals exceeding budget projections for several application types, as well as for other income, which is comprised of compact fees, licensee verification fees, as well as income for reimbursement for services reimbursed by other agencies. The table below provides highlights for account lines with a greater than \$1,000 variance.

| Income Classification | Over Budget | Under Budget |
|------------------------------|-------------|--------------|
| PT Renewal Ver & Proc Fees | | (142,748.53) |
| PTA Renewal Ver & Proc Fees | | (25,265.27) |
| PT Renewals | \$97,240 | |
| PTA Renewals | \$8,890 | |
| PT Exam Applications | \$8,780 | |
| PTA Exam Applications | \$3,959 | |
| PTA App Ver & Proc Fees | \$1,057 | |
| PTA Endorsement Applications | \$1,615 | |
| PT & PTA Civil Penalties | \$1,900 | |
| Other Income | \$11,7912 | |

Total Expenses are under budget by (\$124,835.23)

The Board’s total projected expenses for the fiscal year 2021 – 2022 were budgeted at 872,212.60. Actual expense was less than projected, by \$124,835.23 or 85.69% of budget. The board has continued to restrict expenses to the greatest extent possible due to continued uncertainty due to the pandemic and impacts on larger licensing trends and operations.

5100 Payroll Costs are **(\$28,364)** under budget overall. The difference is due in largest part to employee benefit costs (PERS, PEBB, DAS Obligation Bond) which are lower than budgeted. This account also includes Employee Training, which continues to be scaled back due to the pandemic.

5600 Travel Costs are **(\$20,847)** under budget. By state policy, all travel other than essential travel continued to be banned due to the pandemic and social distancing requirements. The Board continued to meet largely in person, and otherwise restricted travel.

6100 General Office Expenses are **\$243** over budget; however, this is a result of the Board’s liability insurance being significantly higher than in prior biennia due to the larger state risk pool. Expenses were

below budget in every other sub-category in this category, mitigating much of the impact of the unbudgeted risk charges, as highlighted below:

| 6100 · General Office Expenses | Actuals | Budget | Variance | % of Budget |
|--|------------------|------------------|------------------|----------------|
| 6110 · Copier | 416.97 | 960.00 | -543.03 | 43.43% |
| 6120 · Printing/Copying | 37.83 | 3,600.00 | -3,562.17 | 1.05% |
| 6140 · Office Supplies | 1,512.97 | 2,100.00 | -587.03 | 72.05% |
| 6145 · Other | 150.00 | 5,000.00 | -4,850.00 | 3.0% |
| 6150 · Board Meeting Expenses | 0.00 | 1,200.00 | -1,200.00 | 0.0% |
| 6155 · Parking Validation Stickers | 0.00 | 1,650.00 | -1,650.00 | 0.0% |
| 6180 · Telecommunications | 6,161.60 | 7,400.00 | -1,238.40 | 83.27% |
| 6185 · Bank Charges/Fees | 710.86 | 4,000.00 | -3,289.14 | 17.77% |
| 6186 · Liability Insurance (Risk Mgmt) | <u>34,663.00</u> | <u>17,500.00</u> | <u>17,163.00</u> | <u>198.07%</u> |
| Total 6100 · General Office Expenses | 43,653.23 | 43,410.00 | 243.23 | 100.56% |

6190 Dues and Subscriptions are **(\$7,676)** under budget; many dues were deferred or reduced as a result of the pandemic.

6200 Postage Charges are **(\$1,591)** under budget. The variance here is related to delated billing for mailroom charges.

6300 Publications are **(\$320)** under budget.

6400 Contracted Services are **(\$39,747)** under budget, in largest part because of lower than budgeted expense in Computer Support and Legal Fees reflective of delayed IT projects and unrealized or delayed legal fees. These expenses are expected in the next fiscal year.

| 6400 · Contracted Services | Actuals | Budget | Variance | % of Budget |
|---------------------------------------|---------------|-------------|---------------|---------------|
| 6405 · Merchant Account Fees | 37,398.43 | 32,000.00 | 5,398.43 | 116.87% |
| 6410 · Investigators | 0.00 | 1,500.00 | -1,500.00 | 0.0% |
| 6420 · Computer Support | 1,545.90 | 24,000.00 | -22,454.10 | 6.44% |
| 6430 · Attorney General-Legal Counsel | 22,813.80 | 40,000.00 | -17,186.20 | 57.04% |
| 6440 · Audit Charges | 8,500.00 | 8,000.00 | 500.00 | 106.25% |
| 6450 · Accountant / CPA | 0.00 | 500.00 | -500.00 | 0.0% |
| 6460 · Payroll Service Charges | 2,552.97 | 3,000.00 | -447.03 | 85.1% |
| 6470 · Payroll Expenses | 178.77 | | | |
| 6490 · DAS Charges (Miscellaneous) | 0.00 | 1,735.00 | -1,735.00 | 0.0% |
| 6495 · EmplDept/HearingOfficerPanel | 0.00 | 2,500.00 | -2,500.00 | 0.0% |
| 6499 · Other Services | <u>498.52</u> | <u>0.00</u> | <u>498.52</u> | <u>100.0%</u> |
| Total 6400 · Contracted Services | 73,488.39 | 113,235.00 | -39,746.61 | 64.9% |

6500 Rent and Occupancy Charges are **\$4,198** over budget; DAS facilities increased the amount of square footage allocated to the Board's lease after the start of the biennium, with no notice during the budget planning period.

6600 Background Check Fees are **(\$17,761)** under budget due to delay in a switch to a different external vendor. Backgrounds were processed internally for renewals using a different vendor system.

6650 Investigation Expenses are **(\$100)** under budget. No expenses incurred during the fiscal year.

6800 Computer & Accessories are **(\$12,870)** under budget for the fiscal year due to deferral of some expenses and delay in billing.

Oregon Board of Physical Therapy Year-End Financial Report

Reporting Period July 2022 through June 2023

| | Jul '22 - Jun 23 | Budget | \$ Over Budget | % of Budget |
|--|--------------------|--------------------|--------------------|----------------|
| Ordinary Income/Expense | | | | |
| Income | | | | |
| 4000 · Income | | | | |
| Total 4100 · Physical Therapists | 129,149.00 | 109,950.60 | 19,198.40 | 117.46% |
| Total 4200 · Physical Therapist Assistants | 30,061.50 | 24,600.44 | 5,461.06 | 122.2% |
| Total 4300 · PT & PTA Combined | 24,752.00 | 14,160.00 | 10,592.00 | 174.8% |
| 4400 · PT/PTA License Verification Fee | 11,850.00 | 10,000.00 | 1,850.00 | 118.5% |
| Total 4500 · Miscellaneous Income | 12,852.50 | 156.00 | 12,696.50 | 8,238.78% |
| 4900 · Bank Interest Income | 0.00 | 0.00 | 0.00 | 0.0% |
| Total 4000 · Income | <u>208,665.00</u> | <u>158,867.04</u> | <u>49,797.96</u> | <u>131.35%</u> |
| Total Income | <u>208,665.00</u> | <u>158,867.04</u> | <u>49,797.96</u> | <u>131.35%</u> |
| Gross Profit | 208,665.00 | 158,867.04 | 49,797.96 | 131.35% |
| Expense | | | | |
| Total 5100 · Payroll Costs | 574,815.20 | 614,086.00 | -39,270.80 | 93.61% |
| Total 5600 · Travel Costs | 10,550.95 | 21,300.00 | -10,749.05 | 49.54% |
| Total 6100 · General Office Expenses | 14,299.60 | 38,910.00 | -24,610.40 | 36.75% |
| 6190 · Dues and Subscriptions | 3,484.00 | 10,000.00 | -6,516.00 | 34.84% |
| Total 6200 · Postage | 281.41 | 2,000.00 | -1,718.59 | 14.07% |
| 6300 · Publications | 0.00 | 320.00 | -320.00 | 0.0% |
| 6400 · Contracted Services | | | | |
| 6405 · Merchant Account Fees | 6,665.71 | 6,000.00 | 665.71 | 111.1% |
| 6410 · Investigators | 0.00 | 1,500.00 | -1,500.00 | 0.0% |
| 6420 · Computer Support | 2,450.63 | 24,000.00 | -21,549.37 | 10.21% |
| 6430 · Attorney General-Legal Counsel | 48,958.80 | 40,000.00 | 8,958.80 | 122.4% |
| 6440 · Audit Charges | 0.00 | 5,000.00 | -5,000.00 | 0.0% |
| 6450 · Accountant / CPA | 0.00 | 500.00 | -500.00 | 0.0% |
| 6460 · Payroll Service Charges | 2,776.00 | 3,000.00 | -224.00 | 92.53% |
| 6490 · DAS Charges (Miscellaneous) | 342.00 | 1,735.00 | -1,393.00 | 19.71% |
| 6495 · EmplDept/HearingOfficerPanel | 1,117.00 | 2,500.00 | -1,383.00 | 44.68% |
| 6499 · Other Services | <u>23,548.26</u> | <u>24,000.00</u> | <u>-451.74</u> | <u>98.12%</u> |
| Total 6400 · Contracted Services | 85,858.40 | 108,235.00 | -22,376.60 | 79.33% |
| Total 6500 · Rent and Occupancy | 26,198.04 | 22,000.00 | 4,198.04 | 119.08% |
| Total 6600 · Background Checks | 31,542.50 | 42,400.00 | -10,857.50 | 74.39% |
| 6650 · Investigation Expenses | <u>0.00</u> | <u>100.00</u> | <u>-100.00</u> | <u>0.0%</u> |
| Total 6800 · Computers & Accessories | <u>26,321.14</u> | <u>36,800.00</u> | <u>-10,478.86</u> | <u>71.53%</u> |
| Total Expense | <u>773,351.24</u> | <u>896,151.00</u> | <u>-122,799.76</u> | <u>86.3%</u> |
| Net Ordinary Income | <u>-564,686.24</u> | <u>-737,283.96</u> | <u>172,597.72</u> | <u>76.59%</u> |
| Net Income | <u>-564,686.24</u> | <u>-737,283.96</u> | <u>172,597.72</u> | <u>76.59%</u> |

**Oregon Board of Physical Therapy
Year-End Financial Report
Reporting Period July 2022 – June 2023**

Total Income is over budget by \$49,797.96

The Board’s projected income for the fiscal year 2022 – 2023 was budgeted at \$158,867.04. Actual income totaled \$208,665.00 which created a positive income variance of \$49,797.96, which is 131.35% of budget. Since the Board is on a biannual renewal, most income occurs in this first year of the biennium and covers expenses through the second year, which is way budgeted income is so far below budgeted expenses for the period.

The income variance is a result of late renewals as well as high than anticipated PT exam applications and PTA endorsement applications. These offset lower than anticipated PT endorsement applications and PT exam applications. PT Compact fees and license verification fees were both greater than anticipated, and the Board received grant funding booked as miscellaneous income to cover temporary staffing in support of an API implementation project for transfer of score reports to eliminate hand-keying information. The largest variance occurred in the following areas:

| Income Classification | Over Budget | Under Budget |
|-------------------------------|-------------|--------------|
| Physical Therapists | \$19,198.40 | |
| Physical Therapist Assistants | \$5,461.06 | |
| PT Compact Fees | \$7,184 | |
| Mailing List Purchases | \$1,850 | |
| License Verification Fees | \$1,057 | |
| Misc. Income – Other (Grant) | \$12,696 | |

Total Expenses are under budget by (\$122,799.76)

The Board’s total projected expenses for the fiscal year 2022 – 2023 were budgeted at 896,151.00. Actual expense was less than projected, by \$122,799.76 or 86.3% of budget. The board has continued to restrict expenses to the greatest extent possible due to continued uncertainty due to the pandemic and impacts on larger licensing trends and operations.

5100 Payroll Costs are **(\$39,271)** under budget overall. The difference is due in largest part to employee benefit costs (PERS, PEBB, DAS Obligation Bond) which are lower than budgeted, as well as reduced spending in Employee Training, Board Stipends, and Other Payroll Expenses.

5600 Travel Costs are **(\$10,749)** under budget. The Board continued to meet largely in person in this second year of the biennium, and otherwise restricted travel.

6100 General Office Expenses are **(\$24,610)** under budget; however, this is a result of the Board’s liability insurance being lower in this second year of the biennium due to the early billing in the prior fiscal year, which accounts for \$17,500 of the amount. Expenses were below budget in every almost every other sub-category as well, most notably in printing/copying, parking, bank charges and other office expenses.

6190 Dues and Subscriptions are **(\$6,516)** under budget; many dues were deferred or reduced as a result of the pandemic.

6200 Postage Charges are **(\$1,719)** under budget. The variance here is still related largely to delayed billing for mailroom charges.

6300 Publications are **(\$320)** under budget.

6400 Contracted Services are **(\$22,377)** under budget, in largest part because of lower than budgeted expense in Computer Support reflective of delayed IT projects. While initially planned for this fiscal year, the projects were partially offset by grant funding as well as continued deferral due to pending migration to new version of the Board’s licensing software.

| 6400 · Contracted Services | Actual | Budget | Variance | % of Budget |
|---------------------------------------|------------------|------------------|----------------|---------------|
| 6405 · Merchant Account Fees | 6,665.71 | 6,000.00 | 665.71 | 111.1% |
| 6410 · Investigators | 0.00 | 1,500.00 | -1,500.00 | 0.0% |
| 6420 · Computer Support | 2,450.63 | 24,000.00 | -21,549.37 | 10.21% |
| 6430 · Attorney General-Legal Counsel | 48,958.80 | 40,000.00 | 8,958.80 | 122.4% |
| 6440 · Audit Charges | 0.00 | 5,000.00 | -5,000.00 | 0.0% |
| 6450 · Accountant / CPA | 0.00 | 500.00 | -500.00 | 0.0% |
| 6460 · Payroll Service Charges | 2,776.00 | 3,000.00 | -224.00 | 92.53% |
| 6490 · DAS Charges (Miscellaneous) | 342.00 | 1,735.00 | -1,393.00 | 19.71% |
| 6495 · EmplDept/HearingOfficerPanel | 1,117.00 | 2,500.00 | -1,383.00 | 44.68% |
| 6499 · Other Services | <u>23,548.26</u> | <u>24,000.00</u> | <u>-451.74</u> | <u>98.12%</u> |
| Total 6400 · Contracted Services | 85,858.40 | 108,235.00 | -22,376.60 | 79.33% |

6500 Rent and Occupancy Charges are **\$4,198** over budget; DAS facilities increased the amount of square footage allocated to the Board’s lease after the start of the biennium, with no notice during the budget planning period.

6600 Background Check Fees are **(\$10,857)** under budget due to delay in a switch to a different external vendor.

6650 Investigation Expenses are **(\$100)** under budget. No expenses incurred during the fiscal year.

6800 Computer & Accessories are **(\$10,478)** under budget for the fiscal year due to deferral of some expenses and delay in billing.

Oregon Board of Physical Therapy Profit & Loss Budget vs. Actual

July 2021 through June 2023

| | Jul '21 - Jun 23 | Budget | \$ Over Budget | % of Budget |
|--|------------------|--------------|----------------|-------------|
| Ordinary Income/Expense | | | | |
| Income | | | | |
| 4000 · Income | | | | |
| 4100 · Physical Therapists | | | | |
| 4132 · PT Renewal Ver & Proc Fees | 117,275.00 | 258,823.53 | -141,548.53 | 45.31% |
| 4112 · PT App Ver & Proc Fees | 54,054.00 | 52,741.20 | 1,312.80 | 102.49% |
| 4126 · PT Temp Mil SP/DP | 297.00 | | | |
| 4110 · PT Exam Applications | 72,327.00 | 56,232.00 | 16,095.00 | 128.62% |
| 4120 · PT Endorsement Applications | 96,383.00 | 99,372.00 | -2,989.00 | 96.99% |
| 4125 · PT Temporary Permits | 2,450.00 | 1,872.00 | 578.00 | 130.88% |
| 4130 · PT Renewals | 941,830.00 | 834,502.00 | 107,328.00 | 112.86% |
| 4140 · PT Delinquent Renewals | 4,150.00 | 4,160.00 | -10.00 | 99.76% |
| 4150 · PT Duplicate Licenses | 0.00 | 0.00 | 0.00 | 0.0% |
| 4170 · PT Civil Penalties | 4,250.00 | 2,600.00 | 1,650.00 | 163.46% |
| Total 4100 · Physical Therapists | 1,293,016.00 | 1,310,302.73 | -17,286.73 | 98.68% |
| 4200 · Physical Therapist Assistants | | | | |
| 4232 · PTA Renewal Ver & Proc Fees | 25,599.00 | 50,427.27 | -24,828.27 | 50.76% |
| 4212 · PTA App Ver & Proc Fees | 12,726.00 | 10,736.88 | 1,989.12 | 118.53% |
| 4227 · PTA Temp-EOBED | 0.00 | 0.00 | 0.00 | 0.0% |
| 4210 · PTA Exam Applications | 21,360.00 | 18,720.00 | 2,640.00 | 114.1% |
| 4220 · PTA Endorse Applications | 20,594.00 | 16,640.00 | 3,954.00 | 123.76% |
| 4225 · PTA Temporary Permits | 800.00 | 0.00 | 800.00 | 100.0% |
| 4230 · PTA Renewals | 146,127.00 | 134,984.00 | 11,143.00 | 108.26% |
| 4240 · PTA Delinquent Renewals | 1,800.00 | 1,456.00 | 344.00 | 123.63% |
| 4250 · PTA Duplicate Licenses | 0.00 | 0.00 | 0.00 | 0.0% |
| 4270 · PTA Civil Penalties | 1,247.50 | 0.00 | 1,247.50 | 100.0% |
| Total 4200 · Physical Therapist Assistants | 230,253.50 | 232,964.15 | -2,710.65 | 98.84% |
| 4300 · PT & PTA Combined | | | | |
| 4360 · OHA Workforce Data Survey Fee | 23,216.00 | 23,514.44 | -298.44 | 98.73% |
| 4350 · PT Compact Fees | 28,128.00 | 20,000.00 | 8,128.00 | 140.64% |
| 4330 · PTand/or PTA Mailing Diskette | 13,500.00 | 8,320.00 | 5,180.00 | 162.26% |
| Total 4300 · PT & PTA Combined | 64,844.00 | 51,834.44 | 13,009.56 | 125.1% |
| 4400 · PT/PTA License Verification Fee | 24,600.00 | 20,000.00 | 4,600.00 | 123.0% |
| Total 4500 · Miscellaneous Income | 19,632.57 | 312.00 | 19,320.57 | 6,292.49% |
| 4900 · Bank Interest Income | 88.81 | 0.00 | 88.81 | 100.0% |
| Total 4000 · Income | 1,632,434.88 | 1,615,413.32 | 17,021.56 | 101.05% |
| Total Income | 1,632,434.88 | 1,615,413.32 | 17,021.56 | 101.05% |
| Gross Profit | 1,632,434.88 | 1,615,413.32 | 17,021.56 | 101.05% |
| Expense | | | | |
| Total 5100 · Payroll Costs | 1,127,098.90 | 1,194,733.60 | -67,634.70 | 94.34% |
| Total 5600 · Travel Costs | 11,003.70 | 42,600.00 | -31,596.30 | 25.83% |

| | <u>Jul '21 - Jun 23</u> | <u>Budget</u> | <u>\$ Over Budget</u> | <u>% of Budget</u> |
|---------------------------------------|-------------------------|---------------|-----------------------|--------------------|
| Total 6100 · General Office Expenses | 57,952.83 | 82,320.00 | -24,367.17 | 70.4% |
| 6190 · Dues and Subscriptions | 5,808.00 | 20,000.00 | -14,192.00 | 29.04% |
| Total 6200 · Postage | 690.05 | 4,000.00 | -3,309.95 | 17.25% |
| 6300 · Publications | 0.00 | 640.00 | -640.00 | 0.0% |
| 6400 · Contracted Services | | | | |
| 6405 · Merchant Account Fees | 44,064.14 | 38,000.00 | 6,064.14 | 115.96% |
| 6410 · Investigators | 0.00 | 3,000.00 | -3,000.00 | 0.0% |
| 6420 · Computer Support | 3,996.53 | 48,000.00 | -44,003.47 | 8.33% |
| 6430 · Attorney General-Legal Counsel | 71,772.60 | 80,000.00 | -8,227.40 | 89.72% |
| 6440 · Audit Charges | 8,500.00 | 13,000.00 | -4,500.00 | 65.39% |
| 6450 · Accountant / CPA | 0.00 | 1,000.00 | -1,000.00 | 0.0% |
| 6460 · Payroll Service Charges | 5,328.97 | 6,000.00 | -671.03 | 88.82% |
| 6470 · Payroll Expenses | 178.77 | | | |
| 6490 · DAS Charges (Miscellaneous) | 342.00 | 3,470.00 | -3,128.00 | 9.86% |
| 6495 · EmplDept/HearingOfficerPanel | 1,117.00 | 5,000.00 | -3,883.00 | 22.34% |
| 6499 · Other Services | 24,046.78 | 24,000.00 | 46.78 | 100.2% |
| Total 6400 · Contracted Services | 159,346.79 | 221,470.00 | -62,123.21 | 71.95% |
| Total 6500 · Rent and Occupancy | 52,396.08 | 44,000.00 | 8,396.08 | 119.08% |
| Total 6600 · Background Checks | 56,181.25 | 84,800.00 | -28,618.75 | 66.25% |
| 6650 · Investigation Expenses | 0.00 | 200.00 | -200.00 | 0.0% |
| Total 6800 · Computers & Accessories | 50,251.01 | 73,600.00 | -23,348.99 | 68.28% |
| Total Expense | 1,520,728.61 | 1,768,363.60 | -247,634.99 | 86.0% |
| Net Ordinary Income | 111,706.27 | -152,950.28 | 264,656.55 | -73.03% |
| Net Income | 111,706.27 | -152,950.28 | 264,656.55 | -73.03% |

**Oregon Board of Physical Therapy
Biennium-End Financial Report
Reporting Period July 2021 – June 2023**

Total Income is over budget by \$17,021.56

The Board's projected income for the biennium 2021 – 2023 was budgeted at \$1,615,413.32. Actual income totaled \$1,632,434.88; this created a small positive income variance of \$17,021.56 or 101.05%. Although the overall variance was just over 1%, this is somewhat misrepresentative. Higher than anticipated application and renewals, as well as other income offset a budgeting error in projections for verification and processing fees.

4100 Physical Therapists Although PT endorsement applications were approximately 3% below budget, all other application types exceeded projections. This offset the over projection of renewal verification and processing fees due to a budgeting error. This line item came in at 98.68% of budget, or under by (\$17,286.73).

4200 Physical Therapist Assistants income related to Physical Therapist Assistance was similarly below budget, with a variance of 98.84% or (\$2,710.65). All application types exceeded budget projections, but gains were offset by the budgeting error in PTA renewal verification and processing fees.

4300 4400 and 4500 Other Revenues were all greater than budgeted. This non-licensure revenue includes mailing lists, income from Oregon Compact Privileges, Oregon license verification fees and miscellaneous income, which this biennium included cost-sharing re-imbusement of a shared IT resource as well as grant funding. Collectively, these lines exceeded budgeted by \$37,018.94.

Total Expenses are under budget by (\$247,634.99)

The Board's projected expenses for the biennium were budgeted at \$1,768,363.60. This reflected a deficit budget, in part due to carriage of budget placeholders for potential costs, such as maximum possible employee budget selections, legal and other contracted services. Actual expense was less than projected, by \$247,634.99, for a total of \$1,520,728.61, resulting in net income for the biennium of \$111,706,27. This net surplus carries as part of the board's reserve to offset expenses and potential expense coverage in the next biennium.

5100 Payroll Costs are (\$67,634.70) under budget overall. The difference is due in largest part to employee benefit (PERS, PEBB, DAS Obligation Bond) and other payroll costs, which are lower than budgeted to individual selections below possible maximum. This account also includes Employee Training and Board Stipends, both of which were scaled back due to the pandemic, and ongoing use of virtual meetings.

5600 Travel Costs are (\$31,596.30) under budget. This expense category was significantly impacted in both fiscal years of the biennium. By state policy, all travel other than essential travel continued to be banned due to the pandemic and social distancing requirements in the first part of the biennium, and the Board continued to minimize these expenses in the second fiscal year.

6100 General Office Expenses are (\$24,367) under budget. As with all other discretionary expenses, these expenditures were minimized due to the pandemic, and then continued to be held to a minimum. The Board did not incur budgeted printing costs (\$5,000), did not incur parking fees related to meetings (\$3,300), and had lower than anticipated banking fees due to timing of billings (\$6,000).

6190 Dues and Subscriptions are **(\$14,192.00)** under budget; some dues were deferred or reduced due to the pandemic; the Board also has not yet seen dues assessed as a result of membership in the Compact; although these dues are billable under the contract and statute, none have yet been assessed but are carried in the budget projection.

6200 Postage Charges are **(\$3,309.95)** under budget. The Board did not receive all of the Mailroom and postage charges from OHA for the biennium.

6300 Publications are **(\$640)** under budget.

6400 Contracted Services are **(\$62,123.21)** under budget, in largest part because of lower than budgeted expense in Computer Support and Legal Fees. Computer Support fees are lower due to savings from delay in the implementation of IT Projects (\$44,003.47) These expenses related to deferred projects are expected to be incurred in the next biennium. The Board also had notable savings in Legal Fees (\$8,227.40), Audit Charges (\$4,500), and outside Investigators (\$3,000).

6500 Rent and Occupancy Charges are **\$8,396.08** due to DAS increasing the amount of square footage for shared areas allocated to the Board after the start of the biennium and after the budget planning period.

6600 Background Check Fees are **(\$28,618.75)** under budget due to deferral of implementation of new vendor for some verifications. The Board continued to process verifications manually using existing vendors, but enhanced implementation is planned in the next biennium.

6650 Investigation Expenses are **(\$200)** under budget.

6800 Computer & Accessories are **(\$23,348.99)** under budget for biennium due to deferral of software expenses related to deferred IT projects.

Oregon Board of Physical Therapy Profit & Loss Budget vs. Actual

July through August 2023

| | Jul - Aug 23 | Budget | \$ Over Budget | % of Budget |
|--|--------------|-----------|----------------|-------------|
| Ordinary Income/Expense | | | | |
| Income | | | | |
| 4000 · Income | | | | |
| 4100 · Physical Therapists | | | | |
| 4132 · PT Renewal Ver & Proc Fees | 75.00 | | | |
| 4112 · PT App Ver & Proc Fees | 4,032.00 | 4,614.70 | -582.70 | 87.4% |
| 4110 · PT Exam Applications | 4,862.00 | 5,890.50 | -1,028.50 | 82.5% |
| 4120 · PT Endorsement Applications | 7,106.00 | 7,807.20 | -701.20 | 91.0% |
| 4125 · PT Temporary Permits | 50.00 | 250.00 | -200.00 | 20.0% |
| 4130 · PT Renewals | 800.00 | 0.00 | 800.00 | 100.0% |
| 4140 · PT Delinquent Renewals | 150.00 | 0.00 | 150.00 | 100.0% |
| 4150 · PT Duplicate Licenses | 0.00 | 0.00 | 0.00 | 0.0% |
| 4170 · PT Civil Penalties | 1,000.00 | 0.00 | 1,000.00 | 100.0% |
| Total 4100 · Physical Therapists | 18,075.00 | 18,562.40 | -487.40 | 97.4% |
| 4200 · Physical Therapist Assistants | | | | |
| 4232 · PTA Renewal Ver & Proc Fees | 46.00 | | | |
| 4212 · PTA App Ver & Proc Fees | 2,079.00 | 1,086.70 | 992.30 | 191.3% |
| 4226 · PTA Temp-Mil SP/DP | 99.00 | | | |
| 4210 · PTA Exam Applications | 4,301.00 | 1,589.50 | 2,711.50 | 270.6% |
| 4220 · PTA Endorse Applications | 1,870.00 | 1,636.20 | 233.80 | 114.3% |
| 4225 · PTA Temporary Permits | 0.00 | 33.30 | -33.30 | 0.0% |
| 4230 · PTA Renewals | 260.00 | 0.00 | 260.00 | 100.0% |
| 4240 · PTA Delinquent Renewals | 100.00 | 0.00 | 100.00 | 100.0% |
| Total 4200 · Physical Therapist Assistants | 8,755.00 | 4,345.70 | 4,409.30 | 201.5% |
| 4300 · PT & PTA Combined | | | | |
| 4360 · OHA Workforce Data Survey Fee | 20.00 | | | |
| 4350 · PT Compact Fees | 2,112.00 | 2,400.00 | -288.00 | 88.0% |
| 4330 · PTand/or PTA Mailing Diskette | 800.00 | 1,000.00 | -200.00 | 80.0% |
| Total 4300 · PT & PTA Combined | 2,932.00 | 3,400.00 | -468.00 | 86.2% |
| 4400 · PT/PTA License Verification Fee | 2,000.00 | 2,087.50 | -87.50 | 95.8% |
| 4500 · Miscellaneous Income | | | | |
| 4583 · 83300 IT Services | 0.00 | 0.00 | 0.00 | 0.0% |
| 4500 · Miscellaneous Income - Other | 1,224.41 | 0.00 | 1,224.41 | 100.0% |
| Total 4500 · Miscellaneous Income | 1,224.41 | 0.00 | 1,224.41 | 100.0% |
| 4900 · Bank Interest Income | 0.00 | 0.00 | 0.00 | 0.0% |
| Total 4000 · Income | 32,986.41 | 28,395.60 | 4,590.81 | 116.2% |
| Total Income | 32,986.41 | 28,395.60 | 4,590.81 | 116.2% |
| Gross Profit | 32,986.41 | 28,395.60 | 4,590.81 | 116.2% |

Oregon Board of Physical Therapy Profit & Loss Budget vs. Actual

July through August 2023

| Expense | Jul - Aug 23 | Budget | \$ Over Budget | % of Budget |
|--|--------------|------------|----------------|-------------|
| 5100 · Payroll Costs | | | | |
| 5132 · FICA (SS + Medicare) | 5,270.28 | 4,794.60 | 475.68 | 109.9% |
| 5133 · FICA Administrative Fee | 0.00 | 15.00 | -15.00 | 0.0% |
| 5110 · Gross Salaries | 67,138.50 | 62,674.50 | 4,464.00 | 107.1% |
| 5136 · Mass Transit Tax | 553.69 | 503.72 | 49.97 | 109.9% |
| 5140 · Employee Benefits | | | | |
| 5141 · PERS ER Paid EE Cont | -390.43 | 0.00 | -390.43 | 100.0% |
| 5142 · PERS ER Admin Contribution | 12,248.86 | 13,243.36 | -994.50 | 92.5% |
| 5143 · Obligation Bond Debt Repayment | 1,711.88 | 3,885.82 | -2,173.94 | 44.1% |
| 5144 · Workers Compensation | 11.78 | 30.00 | -18.22 | 39.3% |
| 5146 · PEBB Medical/Dental Insurance | | | | |
| 5146-1 · PEBB Insurance | 10,270.14 | 0.00 | 10,270.14 | 100.0% |
| 5146-2 · PEBB Insurance Refund | -702.59 | 0.00 | -702.59 | 100.0% |
| 5146 · PEBB Medical/Dental Insurance - ... | 0.00 | 13,924.50 | -13,924.50 | 0.0% |
| Total 5146 · PEBB Medical/Dental Insurance | 9,567.55 | 13,924.50 | -4,356.95 | 68.7% |
| 5140 · Employee Benefits - Other | 0.00 | 833.40 | -833.40 | 0.0% |
| Total 5140 · Employee Benefits | 23,149.64 | 31,917.08 | -8,767.44 | 72.5% |
| 5150 · Employee Training | 26.83 | 833.40 | -806.57 | 3.2% |
| 5190 · Board Stipends | 2,250.00 | 3,125.00 | -875.00 | 72.0% |
| 5199 · Other Payroll Expenses | 0.00 | 400.00 | -400.00 | 0.0% |
| Total 5100 · Payroll Costs | 98,388.94 | 104,263.30 | -5,874.36 | 94.4% |
| 5600 · Travel Costs | | | | |
| 5610 · Instate Travel | | | | |
| 5612 · Lodging | 408.44 | 500.00 | -91.56 | 81.7% |
| 5614 · Airfare/Mileage | 426.40 | 666.70 | -240.30 | 64.0% |
| 5616 · Meals | 208.75 | 333.30 | -124.55 | 62.6% |
| 5618 · OtherTravel Costs | 52.15 | 83.30 | -31.15 | 62.6% |
| Total 5610 · Instate Travel | 1,095.74 | 1,583.30 | -487.56 | 69.2% |
| 5620 · Out of State Travel | | | | |
| 5622 · Lodging | 0.00 | 833.30 | -833.30 | 0.0% |
| 5624 · Airfare/Mileage | 0.00 | 800.00 | -800.00 | 0.0% |
| 5626 · Meals | 0.00 | 333.30 | -333.30 | 0.0% |
| Total 5620 · Out of State Travel | 0.00 | 1,966.60 | -1,966.60 | 0.0% |
| Total 5600 · Travel Costs | 1,095.74 | 3,549.90 | -2,454.16 | 30.9% |

Oregon Board of Physical Therapy Profit & Loss Budget vs. Actual

July through August 2023

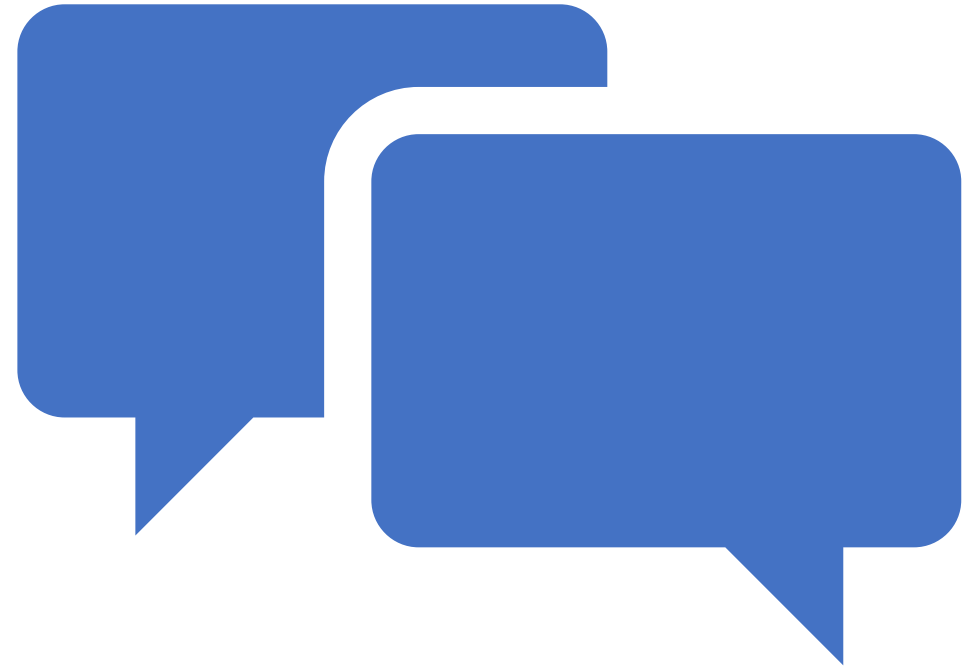
| | Jul - Aug 23 | Budget | \$ Over Budget | % of Budget |
|---|-----------------|------------------|-------------------|--------------|
| 6100 · General Office Expenses | | | | |
| 6110 · Copier | 110.33 | 160.00 | -49.67 | 69.0% |
| 6120 · Printing/Copying | 0.00 | 600.00 | -600.00 | 0.0% |
| 6140 · Office Supplies | 448.83 | 350.00 | 98.83 | 128.2% |
| 6145 · Other | 90.00 | 833.30 | -743.30 | 10.8% |
| 6150 · Board Meeting Expenses | 41.35 | 200.00 | -158.65 | 20.7% |
| 6155 · Parking Validation Stickers | 0.00 | 0.00 | 0.00 | 0.0% |
| 6180 · Telecommunications | 487.60 | 1,233.30 | -745.70 | 39.5% |
| 6185 · Bank Charges/Fees | 0.00 | 333.30 | -333.30 | 0.0% |
| 6186 · Liability Insurance (Risk Mgmt) | 0.00 | 8,956.00 | -8,956.00 | 0.0% |
| Total 6100 · General Office Expenses | 1,178.11 | 12,665.90 | -11,487.79 | 9.3% |
| 6190 · Dues and Subscriptions | 0.00 | 1,666.70 | -1,666.70 | 0.0% |
| 6200 · Postage | | | | |
| 6210 · Mail/Mail Room Charges | -40.00 | 333.30 | -373.30 | -12.0% |
| 6220 · Newsletters | 0.00 | 200.00 | -200.00 | 0.0% |
| Total 6200 · Postage | -40.00 | 533.30 | -573.30 | -7.5% |
| 6300 · Publications | 0.00 | 53.30 | -53.30 | 0.0% |
| 6400 · Contracted Services | | | | |
| 6405 · Merchant Account Fees | 914.40 | 7,000.00 | -6,085.60 | 13.1% |
| 6410 · Investigators | 0.00 | 250.00 | -250.00 | 0.0% |
| 6420 · Computer Support | 131.60 | 2,000.00 | -1,868.40 | 6.6% |
| 6430 · Attorney General-Legal Counsel | 6,050.00 | 8,340.00 | -2,290.00 | 72.5% |
| 6440 · Audit Charges | 0.00 | 2,000.00 | -2,000.00 | 0.0% |
| 6450 · Accountant / CPA | 0.00 | 83.30 | -83.30 | 0.0% |
| 6460 · Payroll Service Charges | 236.40 | 533.30 | -296.90 | 44.3% |
| 6490 · DAS Charges (Miscellaneous) | 0.00 | 289.20 | -289.20 | 0.0% |
| 6495 · EmplDept/HearingOfficerPanel | 0.00 | 416.70 | -416.70 | 0.0% |
| 6499 · Other Services | 159.38 | 0.00 | 159.38 | 100.0% |
| Total 6400 · Contracted Services | 7,491.78 | 20,912.50 | -13,420.72 | 35.8% |
| 6500 · Rent and Occupancy | | | | |
| 6510 · Rent | 4,981.62 | 5,000.00 | -18.38 | 99.6% |
| 6500 · Rent and Occupancy - Other | 0.00 | 0.00 | 0.00 | 0.0% |
| Total 6500 · Rent and Occupancy | 4,981.62 | 5,000.00 | -18.38 | 99.6% |
| 6600 · Background Checks | | | | |
| 6630 · Vantage Data | 0.00 | 2,566.70 | -2,566.70 | 0.0% |
| 6600 · Background Checks - Other | 66.25 | 5,000.00 | -4,933.75 | 1.3% |
| Total 6600 · Background Checks | 66.25 | 7,566.70 | -7,500.45 | 0.9% |
| 6650 · Investigation Expenses | 0.00 | 16.70 | -16.70 | 0.0% |

Oregon Board of Physical Therapy Profit & Loss Budget vs. Actual

July through August 2023

| | Jul - Aug 23 | Budget | \$ Over Budget | % of Budget |
|--------------------------------------|--------------------------|---------------------------|-------------------------|---------------------|
| 6800 · Computers & Accessories | | | | |
| 6810 · Software | 4,542.50 | 5,666.70 | -1,124.20 | 80.2% |
| 6820 · Hardware | 0.00 | 400.00 | -400.00 | 0.0% |
| 6830 · Maintenance-E-Mail,Firewall | 0.00 | 0.00 | 0.00 | 0.0% |
| 6840 · Other - Data Lines, etc. | 0.00 | 166.70 | -166.70 | 0.0% |
| Total 6800 · Computers & Accessories | <u>4,542.50</u> | <u>6,233.40</u> | <u>-1,690.90</u> | <u>72.9%</u> |
| Total Expense | <u>117,704.94</u> | <u>162,461.70</u> | <u>-44,756.76</u> | <u>72.5%</u> |
| Net Ordinary Income | <u>-84,718.53</u> | <u>-134,066.10</u> | <u>49,347.57</u> | <u>63.2%</u> |
| Net Income | <u><u>-84,718.53</u></u> | <u><u>-134,066.10</u></u> | <u><u>49,347.57</u></u> | <u><u>63.2%</u></u> |

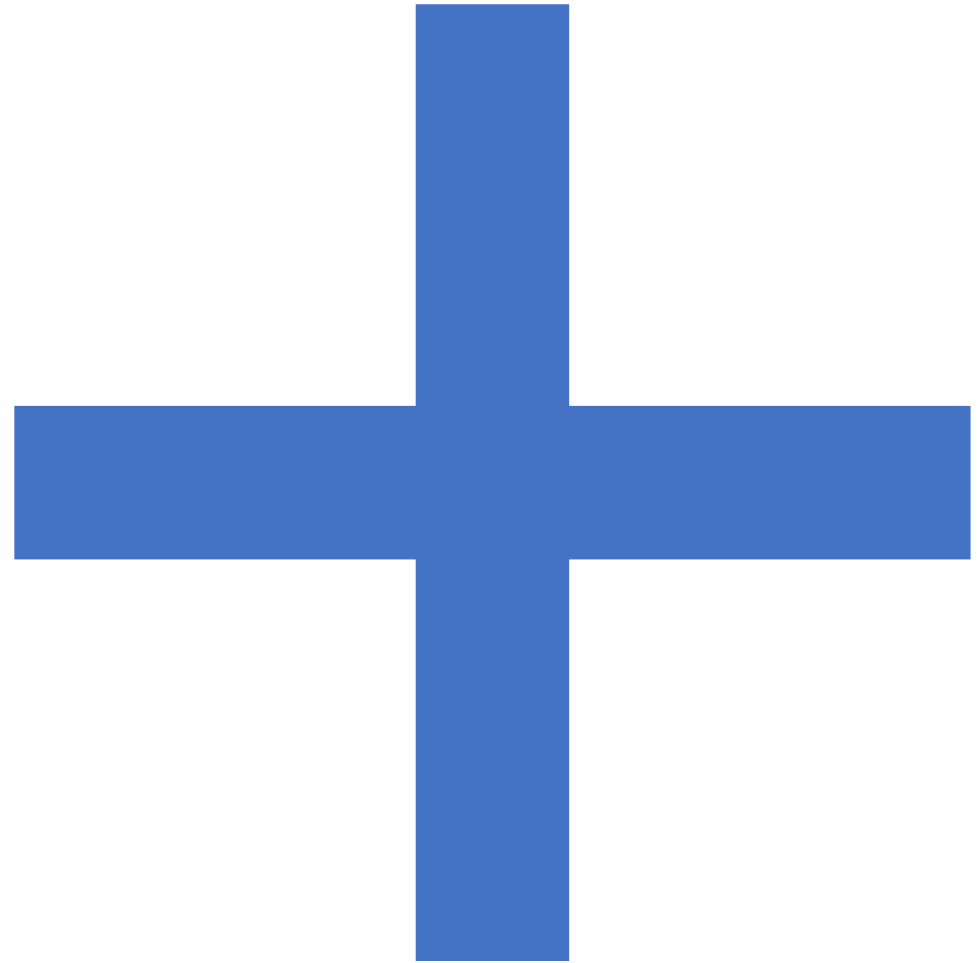
C— Public Comment



D1 – New Member Appointments

*Pending Senate
Confirmation*

- Dwight Terry, Public
Member



D2 – Delegate Reports



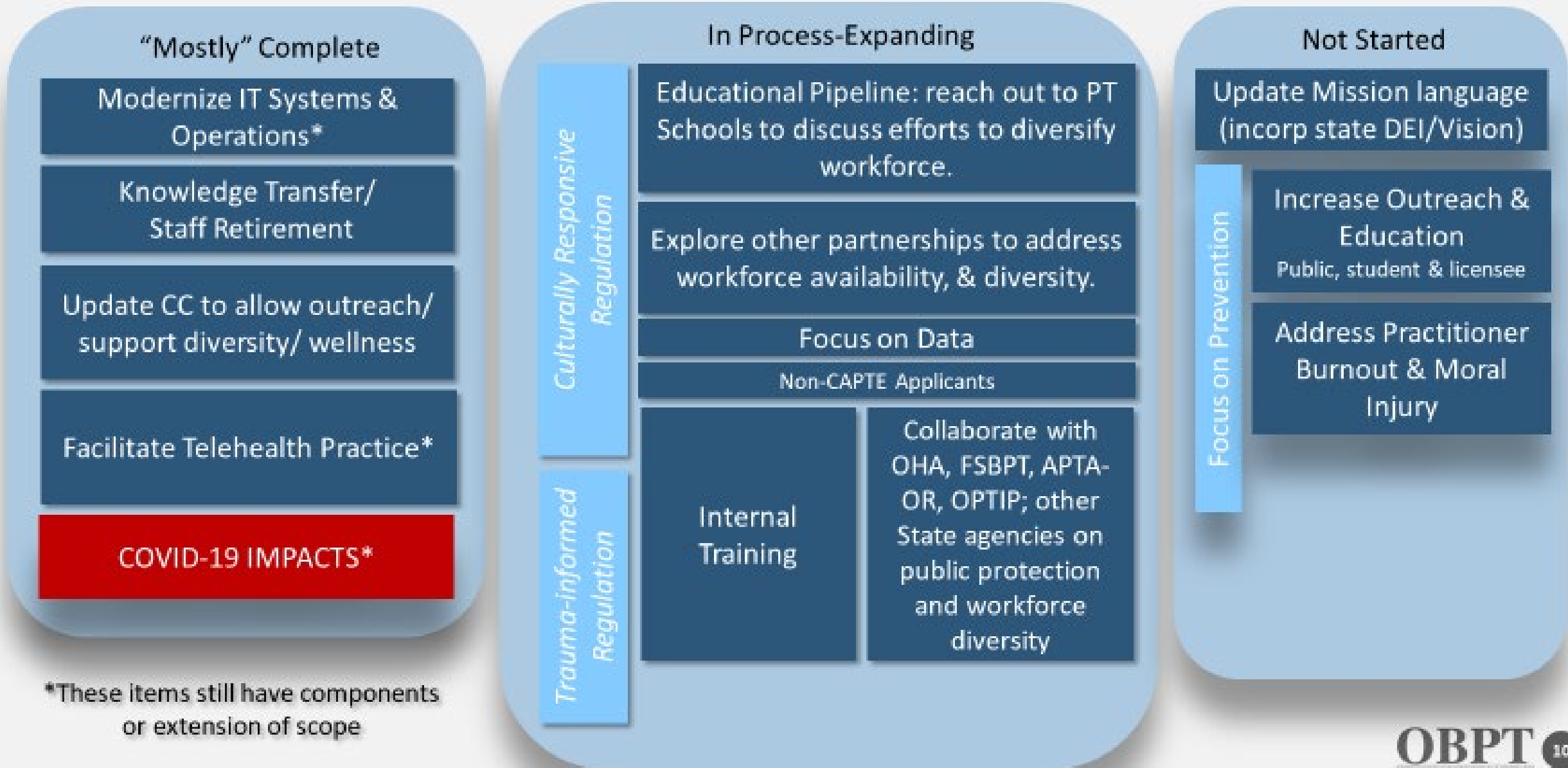
Upcoming FSBPT Webinars

- **Oct 10th 1pm – Regulatory Effectiveness in Investigation & Discipline (Paru)**
- **Oct 11th 1pm -- Emerging Areas of Practice and Scope of Practice Clarification**
- **Nov 7th 1pm – PT Compact: Benefit for Military Spouses**

D3 – Strategic Plan Progress Review



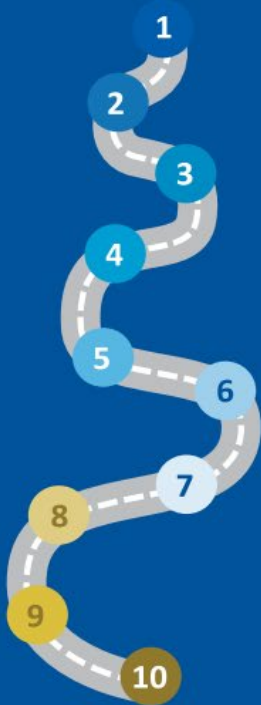
Identified Strategic Priorities—2018-2023 (Five Years)



*These items still have components or extension of scope

State of Oregon Diversity Equity and Inclusion Action Plan

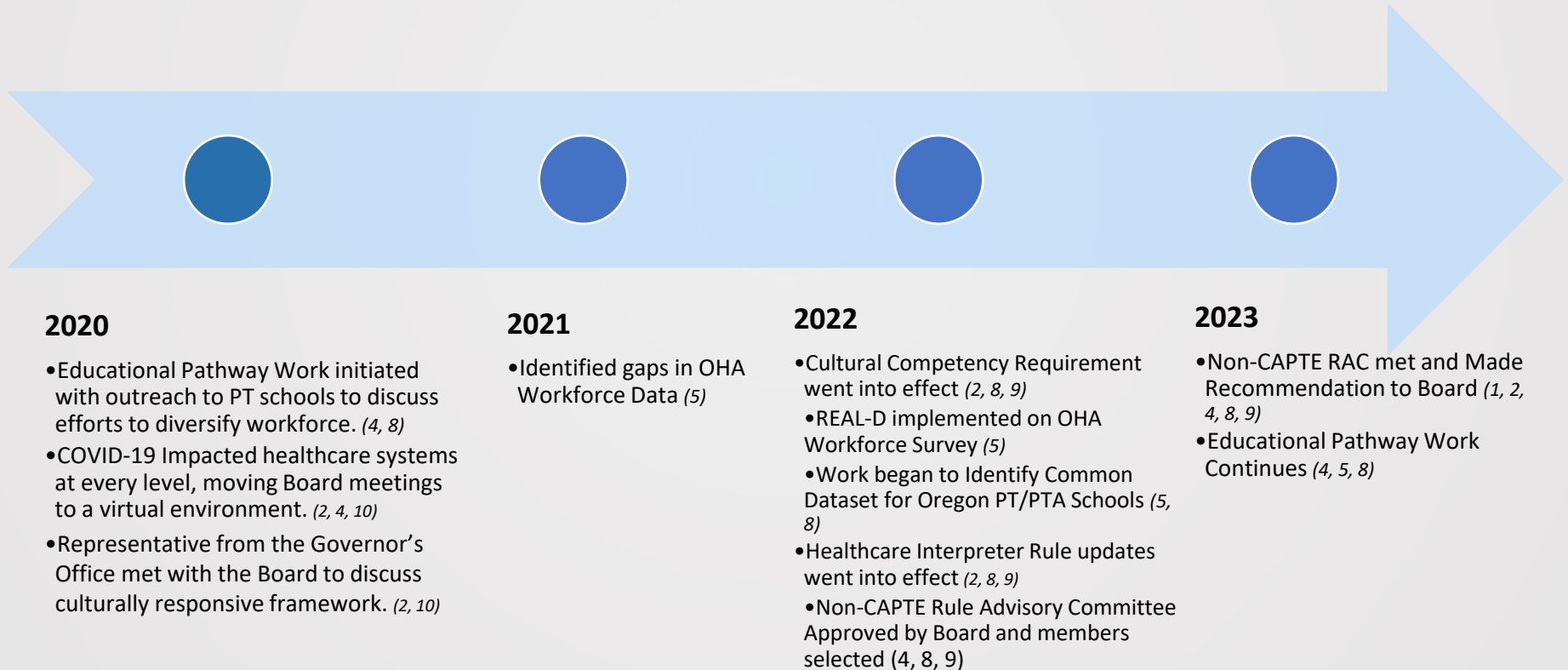
Ten Strategies



| | |
|---|----|
| Develop Agency-specific Racial Equity Plans | 1 |
| Build State Diversity, Equity, and Inclusion Infrastructure | 2 |
| Foster Inclusive Communications | 3 |
| Strengthen Community Engagement | 4 |
| Utilize Disaggregated Data as a Lever for Change | 5 |
| Create Equitable Budget & Inclusive Budget Process; Invest in Target Communities | 6 |
| Advance Contract Equity and Improve State Procurement Processes | 7 |
| Build a More Diverse Workforce and Create an Inclusive Workplace | 8 |
| No Tolerance for Racism, Hate, and Discrimination | 9 |
| Operate with Urgency, Transparency, and Accountability | 10 |

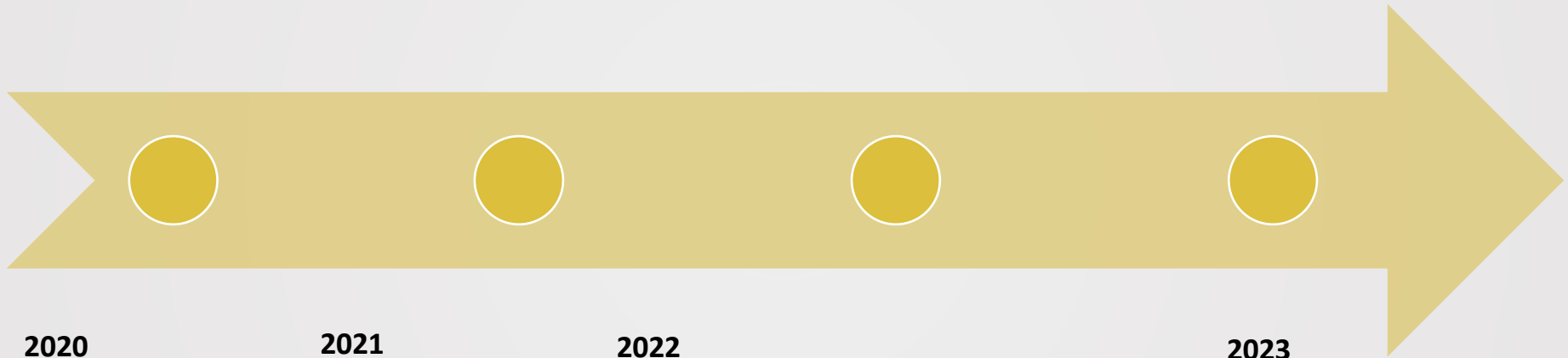
OBPT Strategic Planning Initiatives

Culturally Responsive Regulation



OBPT Strategic Planning Initiatives

Trauma Informed Regulation



2020

- Investigator Paru named to FSBPT Sexual Misconduct and Boundary Violations Committee (4, 8, 9)

2021

- Paru completed the Bolante Psychological First Aide Certification. (2,3)

2022

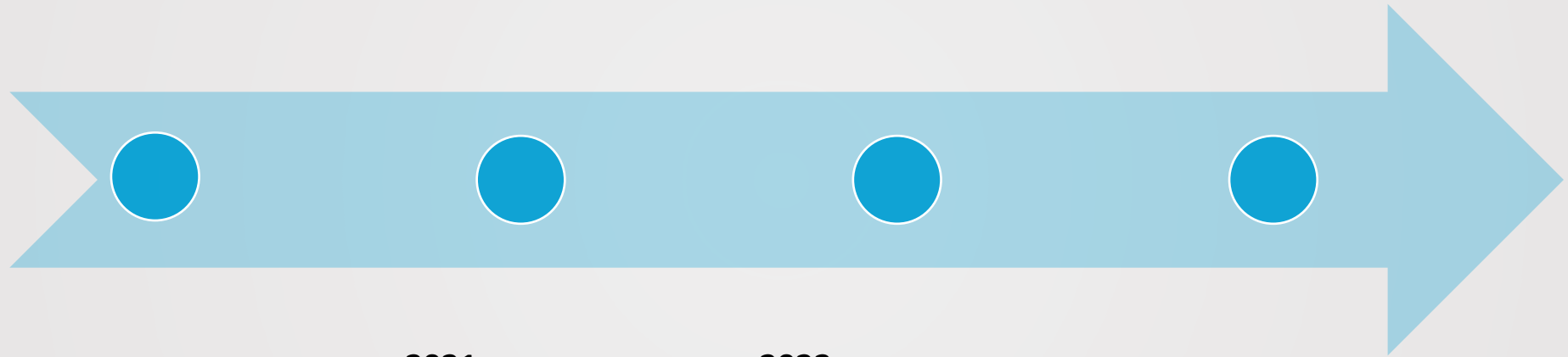
- Paru took CLEAR Investigating Reports of Sexual Misconduct Course. (2)
- Paru worked with CLEAR to develop additional Sexual Misconduct Training Curriculum (3, 4)
- Staff and Board Members attended cross-agency training on investigating Sexual Misconduct (2, 9)
- Board discussed 3rd party complainant advocate, training opportunities for licensees or changes to CC requirements, and collaboration with OPTA and/or other state agencies. (2, 4)

2023

- Board Members and Staff completed PBI Training on Professional Boundaries (2, 9)

OBPT Strategic Planning Initiatives

Focus on Prevention



- 2020**
- COVID-19 Emergency Rulemaking, outreach to licensees to continue safe practice in unforeseen circumstances (3, 10)
- 2021**
- Virtual Outreach to PT schools (3, 4, 10)
- 2022**
- 100% review of license renewals prior to approval, instead of 10% audit after approval (10)
 - Website reviewed and updated for accuracy; 2 PDF guides created on CC and Applying for licensure. Instructional videos for portal. (3)
 - Outreach to PT Schools offered virtually or in Person. (4, 8)
- 2023**
- Compact Privilege information created and published to Website. (3, 8)
 - More guides to be created, including information on opening a PT clinic and information for patients and public. (3)

D4 – Roundtable



E1– Report to Board

**Rule Advisory
Committee on Rules
Related to Applicants
Who Are Graduates of
non-CAPTE Accredited
Programs**



SUPERVISED PRACTICE FOR NON- CAPTE GRADUATES

- In May, the Oregon Board of Physical Therapy heard the RAC's recommendation on changes to requirements for graduates of institutions not accredited by CAPTE.
- The RAC Recommended for Endorsement Candidates:
 - Removal of the requirement to provide proof of 3 years of US-based practice.
 - Removal of the requirement to provide a letter from the most recent employer.
- The RAC Recommended for Exam Candidates:
 - Removal of the requirement that all 4 sections of the TOEFL be passed on the same exam.

MODEL PRACTICE ACT (MPA)

After hearing the RAC's recommendation, the Board requested that the RAC consider and make a recommendation on whether they should adopt rules requiring proof of supervised practice.

The Model Practice Act is FSBPT's standard and tool for revising and modernizing physical therapy practice acts. The MPA recommends the inclusion of a Supervised Clinical Practice for Non-CAPTE graduates. This is the only variation between the RAC's recommendation for Oregon rules and the MPA.

Commentary from the MPA regarding the reasoning- *“The inclusion of supervised clinical practice for the foreign educated physical therapist would provide the opportunity for integration and progression into the United States healthcare delivery system. With variations in healthcare delivery and culture, a supervised clinical experience would provide direct learning and ease of transition of the foreign educated physical therapist.”*

MPA SECTION 3.02 - QUALIFICATIONS FOR LICENSURE

B. An applicant for a license as a physical therapist who has been educated at a school that has not been accredited by an agency approved by the board shall:

1. Complete the application process including payment of fees.
2. Provide satisfactory evidence that the applicant's education is substantially equivalent to the education of physical therapists educated in an accredited entry-level program as determined by the board. Graduation outside the United States from a professional education program accredited by the same accrediting agency that the board approves for programs within the United States constitutes evidence of substantial equivalency. In all other instances, "substantially equivalent" means that an applicant for licensure educated at a school that has not been accredited by an agency approved by the board shall have:
 - a. Graduated from a physical therapist education program that prepares the applicant to engage without restriction in the practice of physical therapy;
 - b. Provided written proof that the applicant's school of physical therapy is recognized by its own ministry of education or other appropriate recognition agency;
 - c. Undergone a credentials evaluation as directed by the board that determines that the candidate has met uniform criteria for educational requirements as further established by rule; and
 - d. Completed any additional education as required by the board.
3. Pass a board-approved English proficiency examination as required by the board as further established by rule.
4. Pass a national examination approved by the board.
5. Pass additional examinations [e.g., jurisprudence examination] required by the board as further established by rule.
6. Submit to a criminal records check.
7. Complete supervised clinical practice as defined by rules with a restricted license.
8. Meet the requirements established by board rule if applicable.
9. Meet other statutory and regulatory requirements applicable to individuals licensed under this [Act].

STATES REQUIRING
SUPERVISED
CLINICAL PRACTICE

Clinical Practice Required for Exam Candidates:
California, Pennsylvania, Georgia, Indiana

**Clinical Practice Required for Exam AND
Endorsement Candidates:** Alaska, Minnesota, Virgin
Islands, Arizona, Kentucky, Louisiana, North Dakota, South
Carolina, Tennessee, Virginia

The MPA recommendation pertains to Exam candidates, however the Endorsement recommendation states, *“The board shall issue a license to a physical therapist who has a current unrestricted license from another jurisdiction of the United States if that person meets all qualifications prescribed in [Qualifications for Licensure and Certification, Article 3.02] at the time of the applicant’s initial licensure.”*

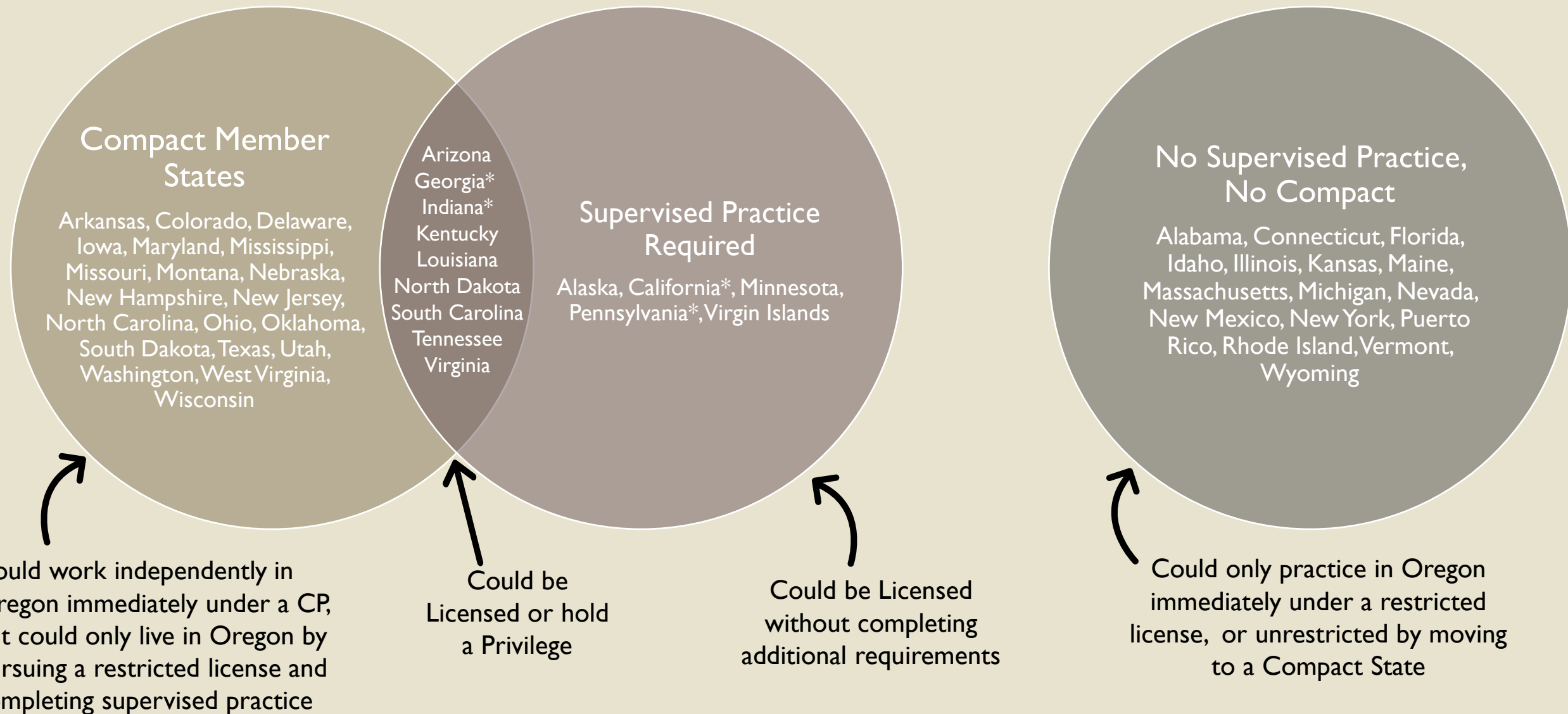
IMMEDIATE IMPLICATIONS IF A
SUPERVISED PRACTICE
REQUIREMENT WAS ADDED
FOR EXAM CANDIDATES
ONLY:

Exam candidates would be able to be licensed but would need to work under a restricted license until they completed a supervised practice. The Board would need to create guidelines for what that supervised practice looks like- including who may supervise, the duration, what they would need to complete during the supervision, etc.

Exam candidates could forgo Oregon Licensure and instead become licensed in the following states and work in Oregon independently under a compact privilege: *Arkansas, Colorado, Delaware, Iowa, Maryland, Mississippi, Missouri, Montana, Nebraska, New Hampshire, New Jersey, North Carolina, Ohio, Oklahoma, South Dakota, Texas, Utah, Washington, West Virginia, Wisconsin*

Alternatively, Exam candidates could forgo Oregon Licensure and instead become licensed in the following states and then pursue Oregon Endorsement Licensure immediately, since the RAC is recommending the removal of the 3-year work requirement: *Alabama, Connecticut, Florida, Idaho, Illinois, Kansas, Maine, Massachusetts, Michigan, Nevada, New Mexico, New York, Puerto Rico, Rhode Island, Vermont, Wyoming*

IMMEDIATE IMPLICATIONS IF A SUPERVISED PRACTICE REQUIREMENT WAS
ADDED FOR ENDORSEMENT CANDIDATES:



Only Compact States actively issuing privileges are included
* Supervision Not Required on Endorsement

ADDITIONAL INFO ON
COMPACT PRIVILEGES
AND SUPERVISED
PRACTICE

Since 2018, 646 Oregon Compact Privileges have been issued to PTs.

76% of Oregon PT Compact Privilege Holders have listed a home state that does not require Supervised Practice. *Because we do not receive education information from Compact Privilege Holders, we do not know how many of these Privilege Holders are from Non-CAPTE schools.* Almost 22% of Compact Privilege holders list Washington as their Home State.

Only 15 of 53 jurisdictions currently require supervised practice for Non-CAPTE graduates. If ALL jurisdictions did, then a rule only requiring supervised practice for Exam candidates would mean that any Compact Privilege Holders would have also had to complete the supervised practice.

Unless or until all Compact Privilege jurisdictions implement this recommendation from the MPA, there will always be means for Non-CAPTE graduates to work in Oregon without having completed a supervised practice requirement.

RAC'S RECOMMENDATION ON SUPERVISED PRACTICE

- Should the Oregon Board promulgate rules requiring completion of a supervised practice for Non-CAPTE Graduates applying for Endorsement? **NO**
- Should the Oregon Board promulgate rules requiring completion of a supervised practice for Non-CAPTE Graduates applying for Exam? **NO**
 - *If the answer to both questions is No- should the Oregon Board revisit this question if a majority of jurisdictions promulgate similar rules for Exam candidates? **Yes, particularly if bordering compact jurisdictions enact similar rules.***

Recommendation: TOEFL for Exam Candidates

From Prior Meeting

- Remove Requirement that the test be taken within 2 years of NPTE.
- Remove Requirement that all four scores be taken within the same exam.

These changes move Oregon into alignment with changes made by FSBPT- as the TOEFL is not a prerequisite to the NPTE.

Washington and other states have removed the “same test” requirement- which allows Compact Privilege holders meeting this standard to already practice in Oregon.

The minimum passing scores *have not* been modified.

848-010-0015

Examinations

(3) Unless qualified for licensure by endorsement under OAR 848-010-0022, an applicant whose first professional degree in physical therapy was awarded from a foreign physical therapy program that is/was not CAPTE accredited must submit:

(a) A Credentials Evaluation Statement ("the Report") of professional education and training prepared by a Board-approved credentials evaluation agency. The Report must be sent directly from the credentialing agency to the Board. It is the applicant's responsibility to pay the expenses associated with the credentials evaluation.

(A) The Report must provide evidence and documentation that the applicant's education outside a state or territory of the United States is substantially equivalent to the education of a physical therapist who graduated from an accredited physical therapy education program approved by the Board pursuant to ORS 688.050(2).

(B) To determine substantial equivalency, the approved credentialing evaluation agency shall use the appropriate Course Work Tool ("CWT") adopted by the Federation of State Boards of Physical Therapy. The appropriate CWT means the CWT in place at the time the foreign educated physical therapist files the application with the Oregon Board.

(b) English Language Proficiency

(A) Verification that English is the native language of the country of origin, and the physical therapy program employs English as the language of training; or

(B) Verification that the applicant has achieved the following minimum scores for each category of the internet based TOEFL (ibTOEFL) examination: writing, 22; speaking, 24; reading, 22; listening, 21. All passing scores must be achieved on the same score report and the report date must be within two years of the NPTE examination application.

(c) If applicant has taken a Board-approved national licensing examination prior to application for licensure in Oregon, a report of applicant's examination scores must be submitted to the Board directly from the Board-approved examination service.

(d) If applicant holds or has held a license in the country in which the applicant received their physical therapy education, the applicant must provide primary source verification of the license.

Recommendation: Proof of Employment for Endorsement Candidates

From Prior Meeting

- Remove the requirement that applicant must provide proof of working 1000 hours per year for at least 3 of the last 10 years, with at least 1 year being within the last 5.
- Remove the requirement that applicant's most recent employer must provide the Board with a letter stating that they practiced safely and competently.

Since OBPT's March meeting, the Louisiana Veterinary Board has been challenged on work-time requirements. They require out-of-state licensees to have practiced for an average of 20 hours per week without significant interruption in the immediate five years preceding application. 2 experienced vets have challenged this law as discriminatory, as they both worked part-time while raising families.

848-010-0022

Endorsement of Out-of-State Foreign Educated Physical Therapists

A foreign educated physical therapist not licensed in the State of Oregon may be licensed by endorsement if the applicant meets or fulfills the requirements of subsections (1), (2), (4) and (5) of OAR 848-010-0020 and the Board receives all of the following additional items:

(1) A certified copy of the Course Work Tool (CWT) used by a physical therapy licensing authority of a state or territory of the United States to make the determination to issue a license in that state or territory. The report must indicate that the applicant's foreign physical therapy education was determined to be substantially equivalent to the education of a physical therapist who graduated from an accredited physical therapy program approved by the Oregon Board pursuant to ORS 688.050(2). To determine substantial equivalency, the approved credentialing evaluation agency shall use the appropriate CWT adopted by the Federation of State Boards of Physical Therapy. The appropriate CWT means the CWT in place at the time the foreign educated physical therapist graduated from their physical therapy program. The licensing authority of the state or territory must certify the report and must send it directly to the Oregon Board.

~~(2) Proof of completion of a minimum of 1000 hours of clinical practice each year in a state or territory of the United States for three of the last ten years immediately prior to application. To meet this requirement, however, no more than five years can have elapsed since the applicant has had clinical practice in a state or territory of the United States. The applicant's current or prior employer(s) must send this proof directly to the Oregon Board.~~

~~(3) A written statement from the applicant's most recent employer stating that the applicant practiced safely and competently. The employer must send this proof directly to the Oregon Board.~~

~~(4) (2) A foreign educated physical therapist who does not meet the requirements of this section may apply for licensure under OAR 848-010-0015(3).~~

E2– Presentation

**FSBPT Model Practice Act
(MPA) Workgroup
MPA Crosswalk to Oregon
Practice Act (ORS)**



Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

This document links the Oregon practice act to the corresponding section of the Model Practice Act.

A PDF version of the MPA at: <https://www.fsbpt.org/portals/0/documents/free-resources/Model-Practice-Act.pdf>

Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

| Article | MPA Section | State Practice Act and/or Rules Sections | Workgroup Recommendations |
|-------------------------------------|--------------------------|--|--|
| Article 1: General Provisions | 1.01. Legislative Intent | ORS 688.015 Findings & Purpose <i>Essentially identical other than Oregon is missing “liberally construe” language.</i> | <p>Recommend determining if current language in purpose provides the same result; if not, recommend adding liberal construction language, should Legislature concur, to make clear that the statutes should be construed to promote the public interest in instances where law may be less clear.</p> <p>Priority: Low – construction is arguably included in the current purpose of protecting the public; change would make intent more clear.</p> <p><i>NOTE: ORS 688.035 Short title. This section may be appropriate to include in this section OR determine if necessary to retain or repeal.</i></p> |
| | 1.02 Definitions | ORS 688.010 Definitions <i>Oregon has very vague definition of the practice of physical therapy. Oregon also does not have all the definitions in MPA— Oregon defines 5 terms; MPA defines 22, although Oregon has defined terms in other sections and/or OAR.</i> | <p>Recommend adopting definitions in MPA for consistency across jurisdictions, and to clearly define as much as possible in statute.</p> <p>Also recommend reviewing Oregon statute and rule for any other items that need definition to include in statute in this section.</p> <p>Priority: High – Greater clarity is in the best interest of the public. Per prior legal opinion, Oregon’s current definition of the practice of physical therapy is overly vague; MPA definition also reflective of current practice scope and educational content</p> |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | | | standards for individuals entering the workforce; current definitions may be barrier for entry. |
| Article 2: Board of Physical Therapy | 2.01. Board of Physical Therapy | ORS 688.160: Oregon Board of Physical Therapy; qualifications; terms; vacancies; duties; rules; fees; meetings; executive director. <i>Oregon language is largely similar with some key differences specific to Oregon; ORS 688.160 encompasses both 2.01 and 2.02 of the MPA.</i> | <p>Recommend adding in elements from MPA that are lacking from Oregon statute while retaining elements specific to Oregon such as reference to semi-independent status and number of members. MPA language related to duties of the board more concrete and specific. Recommend keeping Oregon more specific language relating to Governor appointments; recommend removing Oregon requirement for PT practice in this state to be “immediately preceding appointment” and consider retaining allowance for some practice to have occurred in other jurisdictions. Consider retaining public member able to hold license in other health profession.</p> <p>Priority: Medium – while language is largely similar, modifying this section would address inequity in current Oregon requirements that bar service for otherwise qualified individuals recently or currently retired at time of appointment, even though that same individual could continue to serve if retired immediately after appointment.</p> |
| | 2.02. Powers and Duties (see below) | | |
| | 2.03. Disposition of Funds | ORS 688.201 Disposition of Funds <i>No MPA language.</i> | <p>Recommend reviewing but otherwise retaining existing language.</p> <p>Priority: Low – include if opening entire chapter or</p> |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | | | address specifically after other priorities. |
| Article 3: Examination and Licensure | 3.01. Examination | <i>Oregon does not currently have a separate section related to examination, other than the requirement found in qualifications for licensure.</i> | Recommend adopting the MPA language for this section. While current references are sufficient to establish the authority for the Board to establish requirements for examination, the MPA language is more specific about scope and content, as well as regarding requirements and authority related to maintaining security and integrity of the exam. Priority: Low – include if opening entire chapter or address specifically after other priorities. |
| | 3.02. Qualifications for Licensure <i>Do you have break outs for CAPTE and non-CAPTE graduates?</i> | ORS 688.040 Licensing procedure. ORS 688.050 Qualifications of physical therapist; examination; rules. ORS 688.055 Qualifications of physical therapist assistant; examination. <i>The MPA language is more specific and incorporates elements of law found elsewhere in Oregon ORS into this section (eg. Background check), making it more clear for applicants. The MPA removes legacy language referring to age and “moral character” requirements. Makes clear pathway for non-CAPTE program graduates (currently missing entirely for PTAs) and military personnel. MPA language includes clinical supervised</i> | Recommend adopting MPA language; possibly with minor modification relating to PTAs required to be graduates of CAPTE accredited PTA school (to allow for CAPTE accredited PT school—or address in non-CAPTE language). Priority: Medium/High – If not adopting full language, recommend specific edits to current statute to remove age and moral character references, broaden non-CAPTE pathways. <i>NOTE: ORS 688.090 does not appear to be in the MPA in the same way, although parts appear in 3.02; if 3.02 and 3.03 are adopted, need to verify that ORS 688.090 needs to be retained and either repeal or modify to retain necessary elements.</i> |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | <i>practice for exam non-CAPTE program graduates under restricted license, with specific requirements and applicability defined in rule.</i> | <i>NOTE: The MPA does not have a specific section for temporary permits whereas Oregon references ORS 688.110 Temporary permit; fee. This section should be retained with clarifying language added to account for different types of temp permits described in other Oregon statutes (e.g. military spouse).</i> |
| 3.03. Licensure by Endorsement <i>Do you have break outs for CAPTE and non-CAPTE graduates?</i> | ORS 688.080 Reciprocity; fee. <i>Oregon’s language may be more clear than the MPA language with regard to the applicable requirements through use of substantially equivalent to Oregon requirements.</i> | Recommend retaining Oregon language or adopting MPA language with clarification on meaning of “initial application”; clarify what requirements must still be completed at time of application to Oregon (such as Oregon JAM). |
| 3.04. Exemptions from Licensure (see below) | ORS 688.030 Application of ORS 688.010 to 688.201. <i>Although similar, the MPA adds language clarifying exemption for clinical education outside of PT/PTA program if required by the board, and adds exemptions related to declaration of emergency and displacement. However, the MPA does not appear to have language relating to domestic application currently existent in ORS. Both current ORS and MPA may be unclear with regard to exemption for “teaching”.</i> | Recommend adoption of MPA language, or at minimum, addition of emergency declaration and displacement sections. Recommend clarifying language relating to “teaching” in either existing ORS or modifying in MPA if adopting. Review need for retaining “domestic application” of PT In section if adopting MPA language. Priority: Medium – Relating to missing sections; Low – relating to replacing equivalent language. |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | 3.05. License Renewal | <p>ORS 688.100 Renewals; rules; fee; lapse.</p> <p><i>ORS 688.100 is inclusive of the MPA sections 3.05, 3.06 and 3.07. Oregon provides specific prohibition against practicing on a lapsed license until such time the license is renewed. The MPA provides more detail related to different reinstatement scenarios.</i></p> | <p>Recommend further discussion and clarification of underlying meanings of “lapse”, “expire”, and “reinstate” and consider adoption of MPA language with clarifying modifications.</p> <p>Recommend breaking out at least ORS 688.100(4), which pertains to changes in name and address, so that it is in a separate section not buried in Renewals.</p> <p>Priority: Low</p> |
| | 3.06. Changes in Name and Address | ORS 688.100 Renewals; rules; fee; lapse. | See above. |
| | 3.07. Reinstatement of License | ORS 688.100 Renewals; rules; fee; lapse. | See above x2. |
| | 3.08. Fees [Optional] | Fees are referenced in specific ORS sections. | Recommend no change. |
| Article 4: Regulation of Physical Therapy | 4.01. Ethical Practice | Does not appear as separate section; appears in ORS 688.135(5) Duties and responsibilities of physical therapist. | <p>Recommend adopting MPA section for clarity.</p> <p>Priority: Low – exists in current ORS; however, if opening chapter, adding as separate section using MPA language will provide greater visibility and clarity.</p> |
| | 4.02. Use of Titles and Terms | ORS 688.020 License required to practice physical therapy or use designation. See | Recommend adopting MPA language with references to existing criminal penalties retained. |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | <p>Do you protect the term physical therapy? Do you protect the title PT, PTA, DPT, physical therapist, physical therapist assistant?</p> | <p>also ORS 688.990 criminal penalties.</p> <p>The MPA language is broader and more up to date (eg reference to DPT). The MPA language also specifically references business entities in addition to “persons” and articulates specific civil penalty authority and injunctive relief.</p> | <p>Priority: High – To improve public protection and consumer understanding by improving title and term use requirements in direct and indirect communications. Clarify board’s authority over unlicensed practice.</p> |
| | <p>4.03. Patient Care Management</p> | <p>Oregon does not have this section, however some of the content is found in ORS 688.135 Duties and responsibilities of a physical therapist.</p> <p>The MPA language is relating to patient/client care management; ORS has some content not found in the MPA.</p> | <p>Recommend adopting new section or incorporating MPA language into current ORS section; retaining other items in ORS 688.135 after review for ongoing applicability, or inclusion in other relevant sections.</p> <p>Priority: High – The MPA language related to patient/client care is not currently used in ORS, and is more concrete and patient-centered, and will benefit patients and practitioners through better clarity relating to roles (e.g. patient, legal representative, etc.) and informed consent.</p> |
| | <p>4.04. Grounds for Denial of License and Disciplinary Action (see below)</p> | <p>ORS 688.140 Grounds for Discipline; sanctions; civil penalties.</p> <p>Oregon combines several MPA sections into this one section. Specific to grounds for discipline, the MPA has more specific language relating to misconduct, sexual contact and abuse of patient/client relationship. Otherwise, largely similar.</p> | <p>Recommend reviewing and incorporating missing elements from MPA into ORS. May not be desirable to break out current ORS into separate sections; but should review and retain elements not in MPA and referencing Oregon specific requirements (e.g. Office of Administrative Hearings and ORS 676.165 Investigations)</p> <p>Priority: More detail review and discussion</p> |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | | | recommended; some sections considered medium or high priority for inclusion by workgroup. |
| | 4.05. Investigative Powers | ORS 688.160 and 688.140 and ORS 676 Oregon includes these powers both in the current practice act as well as in central statutes. | <p>Oregon investigative powers are generally equivalent to and otherwise exceed the language of the model practice act; many powers are applicable to all health professional boards and cannot be changed.</p> <p>Recommend line by line review and consider or addition of any clarifying language related to investigative powers.</p> |
| | 4.06. Hearings | Governed by Oregon Office of Administrative Hearings | No Model Language provided. |
| | 4.07. Disciplinary Actions; Penalties | ORS 688.140 Grounds for Discipline; sanctions; civil penalties. This is a separate section in the MPA but largely similar; Oregon currently has broader authority relating to probation, temporary permits, and other conditions or restrictions, although this may be covered in 4.07.2. Oregon has cost recovery. | Recommend line by line review and consider or addition of any missing or clarifying language. |
| | 4.08. Procedural Due Process | Governed by common statute. | MPA language only makes reference to Governing Oregon statute. Recommend verifying similar reference exists and consider addition of clarifying language as needed. |

Physical Therapy MPA Crosswalk : Workgroup Review and Recommendations

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Crosswalk between Model Practice Act and Oregon Physical Therapy Practice Act

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| | 4.09 Unlawful Practice | Oregon includes this section in multiple areas of ORS 688 . | Recommend line by line review and consider or addition of any missing or clarifying language. Recommend consideration of consolidation if appropriate. |
| | 4.10. Reporting Violations; Immunity | Governed by common statute, ORS 676 . | |
| | 4.11. Substance Abuse Program | Governed by common statute, ORS 676 . | |
| | 4.12. Rights of Consumers | No such section, although some specific content found within ORS 688 . | Recommend adoption of consolidated section with rights of consumers clearly articulated; pulled from other sections and/or repeated here. |

E3– Presentation

Medical Chaperones

Oregon Medical Board Licensee Requirements & APTA Position Statement



Medical Chaperones

Oregon Medical Board

- Sexual Misconduct Workgroup
- OAR 847-010-0140

APTA Position Statement

OMB: Sexual Misconduct Workgroup



The Oregon Medical Board licenses ~27,000 health care providers:

- Medical Doctors (MD)
- Doctors of Osteopathic Medicine (DO)
- Doctors of Podiatric Medicine (DPM)
- Physician Assistants (PA)
- Acupuncturists (LAc)

Due to an increasing number of sexual misconduct complaints and a desire to review its statutes, rules, and policies, the OMB formed a **Workgroup on Sexual Misconduct** and held multiple public meetings in 2021 and 2022. In doing this work, the OMB recognized:

- Inherent power imbalance between patient and provider
- Prevalence of prior trauma in the patient population
- Importance of transparency and clear communication with patients
- Protection of all parties is paramount

<https://www.oregon.gov/omb/Topics-of-Interest/Pages/Sexual-Misconduct-Workgroup.aspx>

OMB: Sexual Misconduct Policy Statement Excerpt

The Oregon Medical Board recognizes that the practice of medicine entails a unique relationship between the medical professional and the patient. The patient's trust and confidence in a provider's professional status grants power and influence to the physician, physician assistant, or acupuncturist.

Licensees are expected to maintain a professional manner and to avoid behaviors that may be misunderstood by or considered offensive by the patient. Licensees should take proactive steps to eliminate misunderstandings through clear, appropriate, and professional communication.

Recommended proactive practices:

1. Provide a professional explanation about each component of examinations, procedures, tests, and other aspects of patient care.
2. Communicate actions in advance, such as physical touch during an exam.
3. Have a chaperone present during sensitive examinations and procedures and anytime when requested by the patient.
4. Be cognizant of sexual or romantic feelings toward a patient or patient representative, and transfer the patient to another health care provider.
5. Be alert to a patient's or patient representative's sexual or romantic feelings; the licensee is responsible for ensuring that the boundaries of the professional relationship are maintained.
6. Exercise extreme caution in electronic communications due to the high potential for misunderstanding. The Oregon Medical Board's Statement of Philosophy on Social Media provides additional guidelines.

OMB: Workgroup Recommendations

Workgroup Recommendation

Status

Policy: Institute a zero-tolerance culture.

Complaints of sexual misconduct will be investigated and expedited. Notices of Proposed Discipline will include the term “sexual misconduct” rather than the non-specific term “unprofessional conduct.”

Rulemaking: Require licensees to offer a medical chaperone during all breast, genital, and rectal examinations or procedures. (effective July 1, 2023)

The Board filed a permanent rule on October 6, 2022, see [OAR 847-010-0140](#). See the OMB’s [Medical Chaperone webpage](#) for more information and [Frequently Asked Questions](#).

Rulemaking: Require the OMB monitor the National Practitioner Data Bank (NPDB) Continuous Query alert system for two years from the date of an allegation of sexual misconduct.

The Board filed a permanent rule on October 13, 2021, see [OAR 847-001-0024\(3\)](#). This will provide continuous monitoring and ensure the Board receives timely notice of any additional actions and does not reflect on the licensee’s NPDB record.

Brochure: Physical Examination & Identifying Sexual Misconduct, Patient Rights & Resources

The Board published the “What to Expect During a Physical Exam” brochure in October 2022.

Communication: Send a letter to law enforcement agencies throughout Oregon with information on how to contact the Board in the event a licensee is suspected of a sexual (or other) crime.

Letter was mailed to law enforcement and district attorneys' agencies in January 2022 and will continue to be mailed annually.

OMB's OAR on Medical Chaperones

[OAR 847-010-0130](#) requires all OMB licensees to **offer** a trained chaperone to be physically present for all genital, rectal, and breast examinations starting July 1, 2023.

- Patients have always had the ability to request a chaperone during a clinical encounter.
- Does **not** apply to other healthcare professionals performing sensitive exams.
- Other Oregon licensed healthcare professionals may serve as a chaperone without additional training.
- Unlicensed individuals must take an approved course.
- May not be a family member or friend.
- Includes an emergency exemption.

Patients may decline the presence of a chaperone; if the patient declines, the licensee may:

- Defer the examination if, in the provider's judgment, deferring the examination is in the best interest of the patient and the licensee.
- Perform the examination and document the patient's consent to proceed without the presence of a chaperone.

The rule was written broadly to allow licensees and organizations flexibility when implementing the new requirement in various practice settings and specialties.



OMB Resources

<https://omb.oregon.gov/Chaperone>

- Chaperone Training Courses
- FAQs
- Patient Resources (e.g. What to Expect Brochure)
- Posters
- Sexual Trauma Support

Use of Chaperones Position Statement

The APHPT recognizes the following in regard to the use of chaperones while performing pelvic health physical therapy:

- Patient consent for sensitive pelvic floor physical therapy procedures should be documented in the medical record.
- Chaperones are offered to every patient regardless of the gender of the clinician.
- Patient's decision in regard to accepting or declining the presence of a chaperone should be documented.
- Documentation of the chaperone's name should be noted.
- If a patient requests a family member be present, the name of the family member should be documented.
- Physical therapists develop policies to include provisions for the training of chaperones.
- Processes are in place for reporting questionable practices.
- Clinicians are responsible to obtain training on how to communicate with patients and chaperones about examinations and procedures.
- Follow your facility's chaperone policies and procedures.
- APHPT recommends members follow their state law and institutional policies regarding parental/guardian consent requirements for minors receiving treatments in sensitive areas.
- Therapists treating minor students in the school system should follow their specific school system guidelines in regard to chaperones.
- For pediatric patients, pelvic floor physical therapists will follow the American Academy of Pediatrics(AAP) Guidelines regarding consent.

Academy of Pelvic Health Physical Therapy Position Statement¹ on Use of Chaperones

The Academy of Pelvic Health Physical Therapy (APHPT) of the American Physical Therapy Association supports the right of a patient to both request and have a chaperone present during sensitive pelvic floor physical therapy examinations, procedures, or treatments. The APHPT recognizes the patient's decision to have a chaperone present as an integral part of the patient's treatment and individualized plan of care. A chaperone is a member of the healthcare team who upholds the professional standards of ethical practice, privacy, and confidentiality. Family members and friends may be present as requested by the patient but would not be defined as formal chaperones.

This is an evolving document as there is a lack of research specific to chaperone use during pelvic and sensitive examinations amongst all healthcare providers. The remainder of this document should be considered with the following caveats:

1. There is no standardized definition of “best care.” Most definitions include “evidence-based.” However, organizations may define “best care” based on anecdotal evidence and professional opinion when there is a lack of evidence. The organizations and references cited in this paper describe “best practice” based on their professional opinions.
2. As noted there is a lack of research specific to chaperone use with physical therapy, physician, nursing, and other medical and physician-extender examinations involving the genitalia, breasts, or other sensitive body parts/natures (as defined later in this document).
3. Additionally, there is no known reported research on any potential negative impact of offering or requiring a medical chaperone during a sensitive examination.
4. The intent of offering and using a chaperone during sensitive examinations is to increase patient safety and comfort; improve patient experiences and outcomes; reduce clinician litigation risk; and promote “best” practices, despite lack of evidence for or clear definition thereof.
5. The various professional medical organizations that have offered position statements on chaperone use during these examinations are often vague or conflicting with one another. Thus, chaperone use is generally determined on a case-by-case basis (Pimienta, A. L., & GIBLON, R. E. (2018). The case for medical chaperones. *Family Practice Management*, 25(5), 6-8).

Background

The [American College of Obstetricians and Gynecologists, 2020](#) and the [American College Health Association, 2019](#) advise that chaperones should be used for all breast, genital, and/or rectal examinations. The [American College of Physicians, 2021](#) and the [American Medical Association, 2021](#) support joint decision-making between the provider and the patient regarding the presence of a chaperone. It is generally recommended that

¹ APHPT publishes Position Statements as a service to its members. The information contained in any Position Statement is neither exhaustive nor exclusive to all circumstances or individuals. Position Statements are not peer reviewed, nor submitted to the APHPT membership for approval. Position Statements do not define or establish a community standard. They are not intended to, nor should they be used to support a cause of action, create a presumption of a breach of legal duty, or form a basis for civil liability.

all healthcare settings should have policies in place to ensure patient safety and minimize risk during sensitive examinations ([American College Health Association, 2019](#)).

The information shared in this document is based on what other healthcare organizations have defined as “best practices” in treating patients similar to those treated by pelvic floor physical therapists in their practices.

A physical therapy examination and evaluation is an essential part of assessing the patient and establishing a diagnosis, prognosis, list of treatment goals, and/or outcomes. The scope of the examination is dependent on the reason for the visit, diagnostic needs, and specialization of the physical therapist. Careful communication about the purpose and scope of the examination should be provided in a way that is easily understood by the patient. The provider-patient relationship is compromised when there is misunderstanding and confusion regarding therapist roles and behaviors, especially when the evaluation or treatment involves a sensitive area. This can lead to complaints as well as allegations of sexual misconduct or abuse. (American Society for Health Care Risk Management 2019)

The American Medical Association (AMA), the American College of Obstetricians and Gynecologists (ACOG), the American Academy of Pediatrics (AAP), the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), and the General Medical Council (GMC) in the United Kingdom all have recommendations regarding the use of chaperones for sensitive examinations related to medical pelvic examinations (not specific to pelvic floor physical therapy examinations).

Chaperones are intended to protect patients and practitioners by serving as observers and potential witnesses during sensitive examinations and treatments. When sensitive examinations are performed, the tenets of trauma-informed care created by the Substance Abuse and Mental Health Services Administration (SAMHSA) are recommended to be utilized by both chaperone and the physical therapist. Trauma-informed care honors patient choice and safety as detailed in the SAMSHA six principles - safety, trustworthiness & transparency, peer support, collaboration & mutuality, empowerment & choice, cultural, and historical & gender issues. It is important to note that physical therapists are often not informed of a patient's prior experiences, including sexual trauma, even if screening for these experiences; therefore, adopting the tenets of trauma-informed care is crucial to avoid potential re-traumatization (American College Health Association's Guidelines 2019). Offering a chaperone for support is one demonstration of respecting patient safety and practice standards ([Barbieri, 2020](#)).

Definitions

A sensitive exam or procedure includes, but is not limited to, an exam, evaluation, palpation, placement of instruments in genitalia, or exposure of: genitalia; rectum; breast.

A patient's personal and cultural experiences may broaden their own definition of a sensitive exam or procedure. Some patients may include in their definition of a sensitive exam an examination or procedure that involves partial exposure or palpation of body parts near sensitive areas (e.g., exposure of undergarments, palpation of the groin or buttocks, or auscultation near the breast), and a chaperone should be offered. (American College Health Association's Guidelines 2019)

Patients who identify as lesbian, gay, bisexual, transgender, and nonbinary may have increased sensitivity to pelvic examination and may prefer a 2nd person (chaperone) in the room. ([Tillman, 2020](#))

A chaperone is a trained person who has been oriented to support and be a witness for a patient and a provider during a sensitive exam or procedure and who does not report directly to the care provider who is performing the examination (Flaughner, B., Penoyer, D., & Phillips, L. BEST PRACTICES FOR SEXUAL HEALTH SERVICES IN COLLEGE HEALTH). A chaperone is utilized to help protect and enhance the patient's comfort, safety, security, and dignity during a sensitive exam or procedure, and should be provided at the patient's and/or provider's request. (American College Health Association's Guidelines 2019)

The following factors may influence the decision to have a chaperone present and the choice of the best person to function as the chaperone: patient's request, urgency and type of examination or treatment, gender of the health care provider, and facility protocol. The patient's request may also include having a family member or friend present in addition to the chaperone. Additional considerations that may influence the request for a chaperone include age, cultural and/or religious beliefs, mental health status, cognitive ability, and history of sexual assault or dysfunction. A chaperone or healthcare provider of the same gender may be needed to support the patient's cultural and religious beliefs. ([Guimond and Salman, 2013](#))

Consent

To help protect the therapist from any potential misunderstandings or accusations of sexual misconduct by the patient during a sensitive physical therapy examination or treatment, obtaining informed consent and offering a chaperone to the patient is essential. The therapist should thoroughly explain the examination/treatment including the rationale and reason. Once the patient has been properly educated, the therapist should then explicitly ask for permission to perform the examination/treatment and wait for verbal consent before proceeding. One should not assume that a patient consents to a sensitive examination or treatment because they made a therapy appointment. ([Keller, 2019](#)) Consent for sensitive pelvic floor physical therapy procedures should be documented in the medical record for each visit or treatment session.

Patients should be informed of the institution's policy on the use of chaperones before the initial encounter.

The patient's preference regarding the use of a chaperone should be documented in the medical record for reference in future visits ([Pimienta and Giblon, 2018](#)). Since the patient's preference may change, it is recommended at each visit to ask the patient about their wish to have a chaperone present and to document the patient's response and the name of the chaperone who will be present; however, positive or negative effects of asking the patient at each visit about chaperone use is unknown.

Organizational Policies

The American College Health Association's Guidelines 2019 list offers three recognized options for a chaperone policy – opt-out, opt-in, and mandatory. The APHPT recommends that members consult their state practice act and organizational risk management department first in determining which policy is best for their clinic.

1. **Opt-out policy** is one in which a chaperone is planned and provided for at every sensitive exam or procedure and available for any exam upon patient or provider request. A patient has a right to decline a chaperone after being provided adequate education that explains the nature of the sensitive exam and the role of the chaperone. The patient's declination should be documented at each visit.
2. **Opt-in policy** is one in which a chaperone is offered and available upon the request of the patient. Institutions should provide patient education regarding the option of a chaperone and the nature of the sensitive examination. Signage alone as patient education is insufficient.

3. **Mandatory policy** is one in which a chaperone must be present during a sensitive exam or the exam will not be performed. Institutions that adopt a mandatory policy should not allow their policy to impede emergency care.

The Academy of Pelvic Health Physical Therapy recognizes that the practices of pelvic health physical therapy may differ from those of other healthcare professionals. As such, some pelvic health physical therapy practices may have a "No chaperone available policy," which means that patients are provided with information that a chaperone is not available and can choose whether or not to participate in the practice. If a chaperone is not available, patients may have the option to reschedule the appointment until a chaperone is available, or they may choose to participate in the appointment despite the lack of a chaperone. It is important for patients to communicate their preferences and concerns with their healthcare provider to ensure that they feel safe and comfortable during the appointment. If requested by the patient, examinations, and interventions may be declined or deferred to a time when a chaperone is available.

It is within the provider's discretion to require a chaperone to be present during certain procedures or examinations, as a way to ensure the safety and comfort of the provider. If a chaperone is not available at the time of the appointment, the provider may choose not to proceed with the procedure or examination if they feel that having a chaperone is necessary for the safety of the provider. In such cases, it is important for the provider to communicate clearly with the patient and explain the reasons why a chaperone is required, and work with the patient to reschedule the appointment when a chaperone is available.

The APHPT recognizes the following in regard to the use of chaperones while performing pelvic health physical therapy:

- Patient consent for sensitive pelvic floor physical therapy procedures should be documented in the medical record.
- Chaperones are offered to every patient regardless of the gender of the clinician.
- Patient's decision in regard to accepting or declining the presence of a chaperone should be documented.
- Documentation of the chaperone's name should be noted.
- If a patient requests a family member be present, the name of the family member should be documented.
- Physical therapists develop policies to include provisions for the training of chaperones.
- Processes are in place for reporting questionable practices.
- Clinicians are responsible to obtain training on how to communicate with patients and chaperones about examinations and procedures.
- Follow your facility's chaperone policies and procedures.
- APHPT recommends members follow their state law and institutional policies regarding parental/guardian consent requirements for minors receiving treatments in sensitive areas.
- Therapists treating minor students in the school system should follow their specific school system guidelines in regard to chaperones.
- For pediatric patients, pelvic floor physical therapists will follow the American Academy of Pediatrics (AAP) Guidelines regarding consent.

References

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<https://www.aafp.org/fpm/2018/0900/p6.html>
7. Barbieri R.L. In your practice, are you planning to have a chaperone present for all intimate examinations?. *OBG Management*. 2020; 32
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Approved by: Board of Directors

Last Updated: April 30, 2023

Samples

Chaperone Orientation Sample Guidelines

- **Introduction:** Explain the role and responsibilities of a chaperone in healthcare settings, including maintaining patient privacy and dignity.
- **Privacy and Confidentiality:** Explain the importance of maintaining patient confidentiality and the need to ensure that all conversations and actions within the healthcare setting are kept private.
- **Communication:** Provide guidelines on how to communicate effectively with patients, healthcare providers, and other chaperones, and emphasize the importance of clear communication.
- **Professionalism:** Explain the importance of maintaining a professional demeanor at all times and the need to avoid any behavior that could be considered inappropriate or unprofessional.
- **Safety:** Explain the importance of ensuring the safety of the patient, the chaperone, and the healthcare provider at all times, including during procedures or examinations.

Chaperone Orientation Instructions Throughout the Exam/Treatment

BEFORE THE PATIENT EXAM -What should be done before the exam? 1

- The provider should have explained the purpose of the exam and the role of the chaperone.
- The provider should introduce the chaperone upon their arrival by name.
- The provider and chaperone should allow the patient to disrobe in private, include any instructions to be in a set position for the exam, and ask the patient for readiness before entering the room.

DURING THE PATIENT EXAM - What should I do when I'm chaperoning?

- Remain involved, compassionate, and courteous.
- Be engaged in the procedure while maintaining respect for the patient and the intimacy of the exam.
- Observe for verbal and nonverbal indications of distress, if observed, clarify the behavior with the patient.
- "[Patient name] I see you are [observed behavior ie grimacing] are you in pain, do you need something?"
- If unusual or unacceptable behavior is demonstrated by the patient or the provider follow your escalation process.
- Should I be looking at what the provider is doing, even if it is in a sensitive area? Yes, you are a healthcare worker in a professional environment. For the safety of our patients and our providers please know what is going on during the exam.
- **Remain in the room at all times.** The chaperone should be present before the start of the intimate examination until the intimate exam is completed and the intimate areas are no longer exposed.

WHEN THE EXAMINATION IS COMPLETE

- Ask the provider if further assistance is needed.
- You may be asked to remain in the room for the entire office visit.
- If asked, leave the room so the consultation can continue in private.
- Ensure privacy as you exit the room.

UNSURE WHAT TO DO?

- Ask the provider how you can assist, for example, get additional draping, hold a light, prepare instruments, or specimen collection (whatever is approved in your job description).

WHAT SHOULD I NOT DO WHEN I'M CHAPERONING?

- Do not stand awkwardly in the corner of the room, be uninvolved, avoid eye contact, or appear to be uncomfortable or in a hurry to exit.
- Conversation should be kept to a minimum that is not related to the patient's care. Always act professionally.

WHAT HAPPENS IF I CAN'T CHAPERONE AFTER BEING ASKED?

- Examples - knowing the patient, feeling unwell, being sensitive to a smell or procedure.
- As soon as possible, inform the provider BEFORE you enter the exam.
- If you are in the exam and cannot complete your duty, please discreetly inform the provider you have to "step out" and will return OR send a "named chaperone" to complete the visit. The provider will then stop the examination and wait until chaperoning can resume.
- As soon as possible after the incident, inform your provider of the problem that was encountered so plans can be made for alternate options for future visits.

Chaperone Competency Checklist Sample

- Completed basic HIPAA training
- Ability to maintain patient privacy and dignity
- Knowledge of the importance of confidentiality in healthcare settings
- No communication with the patient during treatment unless approved by the clinician
- Professional demeanor and behavior
- Awareness of safety procedures and the ability to ensure the safety of all parties involved
- Ability to recognize and respond appropriately to incidents or concerns that may arise
- Knowledge of the chaperone's role and responsibilities in healthcare settings
- Understanding of the procedures and examinations for which a chaperone may be required
- Ability to work effectively with healthcare providers and other chaperones.

Patient Question Samples for Provider / Patient FAQs

- Would you feel more comfortable having someone else in the room with us during the examination/procedure, to provide support or help you feel safe?
- An internal pelvic floor exam is a procedure that involves the insertion of fingers into the vagina and/or rectum to examine the muscles and tissues of the pelvic floor. During the exam, the PT may ask you to relax and contract your pelvic floor muscles to assess their strength and tone.
- It is important to know that this exam may feel uncomfortable, but it should not be painful. If at any point during the exam, you feel uncomfortable or want to stop, you can communicate this to your PT and they will pause or stop the exam.
- If you have experienced trauma, it is important for your PT to know about this so that they can take steps to ensure your comfort and safety during the exam. They may provide extra support or allow you to bring a trusted support person with you. It is also important to communicate any concerns or questions you may have with your PT before the exam so that they can help you feel more comfortable and informed.

Waiver of Chaperone Sample Form

*Please consult with your legal counsel for appropriate documentation needed for your clinic.
This document is meant to serve as a sample waiver form.*

Instructions: If you wish to decline having a chaperone be present during your examination, please complete this form to declare that a chaperone was offered for this examination, but you requested that a chaperone not be present.

It is **[Insert Clinic Name]** policy that, for the protection of the patient and the **[Insert Clinic Name]** Staff, any patient or provider may request that a second healthcare professional serve as a chaperone during any medical examination.

Your rights as a patient include:

1. **[Insert Clinic Name]** should accommodate patient preference as to chaperone gender whenever appropriate and feasible.
2. If a chaperone of the requested gender is not available, the patient shall be given the opportunity to reschedule the appointment within a reasonable amount of time from the originally scheduled date.
3. If a patient refuses to have a chaperone for an examination where one is required or one where the provider has requested a chaperone, **[Insert Clinic Name]** may transfer care to another provider or clinic.
4. The provider must document their discussion with the patient regarding, **[Insert Clinic Name]** chaperone requirement and the patient's refusal.
5. In a non-emergency situation, the provider may either perform the examination without a chaperone or refer the patient to another qualified provider. The provider must document the referral and the reason for it.

Signatures:

Patient / Legal Representative: By signing this form, you are waiving the need for a chaperone for office visits, testing, and procedures. At any time, a patient may rescind this waiver and request a chaperone. This waiver will remain in place for 1 year from the date of signature and will be renewed on an annual basis. If you have any questions, please do not hesitate to ask the clinical staff, or ask to speak to a member of management.

| Print Full Name (Patient) | Signature | Signed Date |
|---------------------------|-----------|-------------|
| | | |

| Print Full Name (Legal Representative) | Signature | Signed Date |
|--|-----------|-------------|
| | | |

Clinician: A chaperone was offered for this sensitive examination, but the patient requested that a chaperone not be present.

| Print Full Name (Clinician) | Signature | Signed Date |
|-----------------------------|-----------|-------------|
| | | |

E4– 2024 Board Meeting Schedule



OBPT Board Meeting: Item E4-Proposed 2024 Board Meeting Calendar

2024 Board Meeting Schedule – Standard 3rd Week of Odd Months

The Board may adjust a specific day or start time during the year, if needed. Any such update would be published for interested parties with as much notice as possible, but no less than one week.

January – Virtual

- Wednesday, Jan 17th: Executive Session 4pm
- Friday, January 19th: Public Session 8:30am

March – Virtual

- Wednesday, March 13th: Executive Session 4pm
- Friday, March 15th: Public Session 8:30am

May – In Person

- Friday, May 17th: Executive and Public Sessions 8:30am

July – Virtual

- Wednesday, July 17th: Executive Session 4pm
- Friday, July 19th: Public Session 8:30am

September – Virtual or In Person

- Wednesday, Sept 18th: Executive Session 4pm
- Friday, Sept 20th: Public Session 8:30am

-or-

- Friday, Sept 20th: Executive and Public Session 8:30am

November – Virtual

- Wednesday, Nov 19th: Executive Session 2pm
- Friday, Nov 21st: Public Session 8:30am

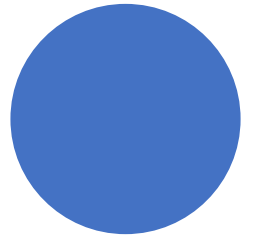
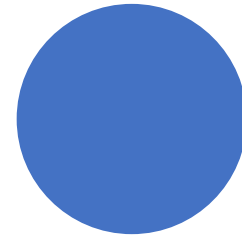
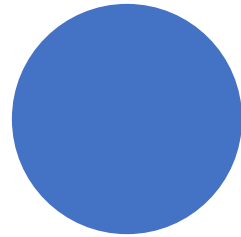
CORRECTED DATES:

20th
22nd

-----Projected dates for 2025-----

| | | |
|------|-------|------------------------------|
| Jan | 15/17 | |
| Mar | 19/21 | |
| May | 16 | In Person |
| July | 16/18 | |
| Sept | 19 | In Person (or 17/19 Virtual) |
| Nov | 19/21 | |

F – Other Business



IV - Adjourn