

**Orthopaedic Section
Practice Committee
CSM 2009 Report**

The Practice Committee has been fairly busy with several important issues. The majority of the effort revolves around advocacy for the practice of orthopaedic physical therapy via attending conferences, answering member questions, etc. During 2008, two new members were appointed to the Practice Committee. The Section welcomes Derek Clewley and Kathy Cieslak to the committee and thanks them for their willingness to serve.

The Practice Committee has continued to network with the APTA Referral for Profit Committee. Fran Welk (Chair of the committee) has continued to keep the Practice Committee informed of the activities of the task force. The Practice Committee will continue to work in conjunction with the task force as well as other sections to educate our colleagues regarding the professional issues related to a referral for profit practice.

APTA held its annual State Governmental Affairs Forum September 21-23, 2008 and Bob Rowe attended the meeting representing the Orthopaedic Section. If you have any questions please feel free to contact Bob or go to <http://www.apta.org/AM/Template.cfm?Section=Home&NAVMENUID=1552&CONTENTID=52169&TEMPLATE=/MembersOnly.cfm&DIRECTLISTCOMBOIND=D> to learn more about the activities and hot topics being managed by the APTA State Governmental Affairs Department.

The Practice Committee is also working with other state chapters, Sections, and individuals regarding the development of clinical residencies and the development of an Orthopaedic Practice Network. The purpose of the network is to enhance communication between orthopaedic practitioners.

The Practice Committee Chair will be submitting the name of a candidate to serve on the committee secondary to the term limit of a very valuable and long standing member of the Practice Committee. The individual rotating off of the Practice Committee is Bill Boissonault. I would like to thank Bill for his tireless service and dedication to the Orthopaedic Section. If you are interested in serving as a member or would like to nominate someone to serve on the Section's Practice Committee, please contact Bob Rowe.

In January 2009 the Section Board appointed Joe Donnelly to serve as the Practice Committee's Vice-chair. Joe brings tremendous knowledge and experience to the committee and we are thankful for his consent to serve.

Report relative to the Practice Committees activities as they relate to the Section's strategic plan. Committee comments in Blue.

1. Evidence-based Practice

Enhance autonomous and evidence-based clinical practice for orthopaedic physical therapists.

Objective C

Enhance the autonomous diagnosis, management and prevention of movement-related disorders.

Strategy 3

Sponsor or co-sponsor joint programming with Private Practice Section at CSM in 2008 on transitioning Physical Therapists from employer/employee relationships to professional partnership models similar to those used by physicians, dentists and/or attorneys.

Time: 2 years

Measurement/Outcome: CSM joint program in 2008

Responsibility: Education Chair / Practice Chair

Fall 2007 Update: Programming hours for 2008 were limited. We are expecting more information on this topic from the APTA Task Force on Compensation, Equity and Business Relationships.

Practice Committee response (PCR) - The Practice Committee defers to the Education Committee regarding this strategy.

2. Membership Services

Develop a process to understand and meet the needs of our members and continue to maintain growth in membership.

Objective D

To recruit and guide individuals willing to accept leadership positions within the Section.

Strategy 2

Committee chairs/member(s) will provide mentorship to individuals within the leadership pool.

Time: Biannually

Measurement/Outcome: Report to BOD

Responsibility: President / Committee Chairs

PCR - The Practice Committee chair was involved in the establishment of the orthopaedic Section Liaisons to state components as well as the development of the Section Board's initiation of *Osteoblasts*. In addition the Practice Committee chair has served as a mentor to members on the Practice Committee throughout his tenure.

3. Professional Development

Facilitate professional development in orthopaedic physical therapy practice.

Objective A

Provide the resources necessary to increase the number of orthopaedic residency programs.

Strategy 3

Facilitate partnerships between regional academic institutions and physical therapy facilities.

Time: Report to Ortho Section BOD no later to October 2007

Measurement/Outcome: Written plan developed by appointed task force that would coordinate with all current credentialed residency/fellowship program directors.

Responsibility: Practice Chair

Fall 2007 Update: Done

To Do: *Chris Hughes will write a letter to schools as part of an ISC promotion informing them that the Orthopaedic Section can help facilitate a partnership between their school and physical therapy facilities. Terri to check with Chris to see if he has done this yet. Chris can send a letter regarding ISCs only but we will hold off on adding anything about partnerships until the advisory panel is in place.*

To Do: *This is not a priority right now. Wait until the advisory panel is in place before moving forward on this.*

Fall 2008 Update: Was put on hold since this is premature.

PCR -- See above comment.

4. **Practitioner of Choice**

Educate and promote to the public that the orthopaedic physical therapist is the practitioner of choice for the management and prevention of musculoskeletal conditions.

Objective A

Promote Orthopaedic Physical Therapy

Strategy 2

Form a task force to: 1) assess targeting strategies and developing media (i.e., PDF brochure as example) that promotes orthopaedic physical therapists as the practitioners of choice for management and prevention to be used for the following target groups: members, prospective members, consumers, physicians, non-physicians, qualified providers, legislators, insurers and employers; 2) develop partnerships with APTA and other Sections on joint marketing strategies; and 3) investigate words or phrases that brand orthopaedic physical therapy to the public.

Time: Task force in place by 2007 and joint marketing material available to membership in 2009

Measurement/outcome: Completion and distribution to members

Responsibility: President / Practice Chair

Fall 2007 Update: *This is being addressed. Steve McDavitt has notified APTA of our desire to have Bill O'Grady put on the APTA's Task Force on autonomous practice.*

Fall 2008 Update: *The Task Force would be the new PR Committee. We are working on the branding. Bill attended the Graham Session in 2008, will invite Felicity Clancy to take part in the next PR Committee conference call.*

PCR – This task will be assumed by the newly developing Public Relations Committee. Once the PR Committee is moving forward the Practice Committee will collaborate with them.

6. **Advocacy**

Advance, promote, advocate for, and protect the practice of orthopaedic physical therapy.

Objective A

Promote the orthopaedic physical therapist as the practitioner of choice for the management and prevention of musculoskeletal conditions to regulatory agencies, legislators, and payors.

Strategy 1

The Orthopaedic Section will advocate for the practice of orthopaedic physical therapy on a national level. *Waiting to see what APTA is going to do with this. If they don't do anything we can relook at doing something again.*

- A: Develop a national agenda. **Possibly an area for brainstorming at 2008 CSM or AC Board Mtg. Add to the to be completed list referencing the Goal, Objective, and Strategy.**
 - *As a Section we haven't moved forward on this very much.*
- B: Develop a specific orthopaedic section payor forum. . **See objective, B Strategy 1**
 - *As a Section we haven't moved forward on this very much.*
- C: Explore options for a direct lobbying effort on Capitol Hill. **See objective A Strategy 1A**

Time: Annually

Measurement/Outcome: Annual report to BOD by Practice Committee

Responsibility: Practice Chair

Fall 2007 Update: Will monitor APTA's PT Branding Task Force.

TO-DO: *Advocate getting an orthopaedic section member on the task force. Good question for the survey analysis – what should the national agenda be for the Orthopaedic Section. SWAT analysis from Janet Bezner. Obtain for our next strategic plan.*

TO-DO: *At CSM or AC we plan a couple hours to brainstorm on a national agenda and what it means and how to strategize for this. Board discussion for a couple of hours during our regular meeting. The membership survey will give us what our national agenda will be. Put on the CSM Board agenda.*

To Do: *Keep a list of what to include in the SWAT analysis survey for the 2009 strategic planning meeting and a separate list of what to include in a membership survey.*

Fall 2008 Update: *See comments above. Wait and see what APTA's communication/marketing plan is going to be. Legislative and branding. We should be influencing what APTA is doing in these areas instead of going off on our own as a Section and doing our own thing. APTA is looking at this generally, not specially for different specialty areas. Present something to HODs on specific areas of PT – promote practice patterns that are specific to the different areas of practice.*

PCR – See above comments.

Strategy 2

Utilize APTA networks (i.e. government affairs, practice, and reimbursement) as resources for Orthopaedic Section members.

Time: Annually

Measurement/Outcome: Annual report to BOD by Practice Committee

Responsibility: Practice Chair

Fall 2007 Update: Ongoing – e-mail blast updates sent out to membership. Consider as policy for future.

Fall 2008 Update: *Transfer to the Practice policy document. Send to components, state chapters, asking them to send out to their members. Chapter Liaisons – have sign up sheet at CSM booth, talk to people we know and recruit them at CSM. Have a chart with each state and fill in the state liaison names. Try and recruit people to fill in the remaining states. Promote at the first timers breakfast, bring chart there also. Have stickers for badges that has Orthopaedic Section Chapter Liaison. Have a table with liaisons at first timers breakfast.*

PCR – This has been implemented and will transition to become a procedure within the Practice Committee.

Strategy 3

Collaborate with APTA State Chapters to establish an orthopaedic practice network consisting of liaisons from the Orthopaedic Section to each Chapter.

Time: Annually

Measurement/Outcome: Development of a practice network/monitor communication between network and states.

Responsibility: Practice Chair

Fall 2007 Update: Possibly title this Communication Network versus Practice Network.

Need to outline what this liaison will do – create liaison responsibility list:

- Review a monthly e-mail from Section office
- Attend Chapter & District meetings – listen for ideas for membership committee
- Maintain periodic communication with Membership Committee regarding individuals in the news
- Be an active listener for getting membership involved
- Move to an Advocacy/Orthopaedic Section liaison. (Board Members will be assigned to different states)

To Do: *Bob Rowe and Adam Smith to create a letter for Jay to send out to Chapters regarding the appointment of a liaison. Bob has e-mailed a draft letter for Jay to review.*

Done.

PCR – This has been completed.

Objective B

Advocate for appropriate reimbursement to the orthopaedic physical therapist.

Strategy 1

Develop strategies to enhance orthopaedic physical therapy reimbursement through the education of payors and consumers.

Time: Annually

Measurement/Outcome: Annual report to BOD by Practice Committee

Responsibility: Practice Chair

Fall 2007 Update: Have a stronger link to APTA's Payors Forum or possibly hold our own. Possibly have a breakout session for the Section's – linking to APTA's Forum. We could create an informational piece that could be e-mailed to members or downloaded for printing and distribution.

TO-DO: *Develop a brochure for patients explaining how insurance works, etc. and e-mail to clinics to give to their patients. Would eliminate PTs having to explain the same thing over and over again to their patients. Ellen and Bob to use the APTA patient brochure as a template and revise to give to the Section office. Include on the to be completed list.*

TO-DO: *Bob will contact the individuals who form the payors forum to see how we can get involved with the forum. Rhea is the contact at APTA. Letter was sent to Jim Nugent, Reimbursement Dept at APTA. No response was received.*

Fall 2008 Update: Go to the new Reimbursement person, Eric Van Dorne, and say this is a good opportunity to get involved again. Bob will contact him. Move this strategy to the Practice policy document.

PCR – Bob Rowe will meet with Eric Van Dorne at CSM 2009 to discuss this issue.

Strategy 2

Network with APTA and chapters to assist with reimbursement forums by offering speakers to present information relative to orthopaedic physical therapy practice.

Time: Annually

Measurement/Outcome: Annual report to BOD by Practice Committee

Responsibility: Practice Chair

TO-DO: *Jay to write a letter to Jim Nugent (check re-structuring at APTA to ensure this is still the right person) that would be sent out to the Chapters. Bob will help draft this letter. Also include if they would be interested in developing a coalition with them on infringement by other providers. Bob has e-mailed a draft letter for Jay to review. Done.*

Fall 2008 Update: Bob will follow up with Eric Van Dorne at APTA Reimbursement.

PCR – Bob Rowe will meet with Eric Van Dorne at CSM 2009 to discuss this issue.

Strategy 3

Develop educational programming at CSM and the orthopaedic conference for creating viable reimbursement strategies for our members.

Time: Annually

Measurement/Outcome: Report to BOD on successful implementation of CSM program

Responsibility: Education Chair / Practice Chair

Fall 2007 Update: Currently taking place. Consider programming on reimbursement for CSM 2009 (possibly a co-sponsorship with Private Practice). Plan to block 2-hour time slot for a “Current Issues Forum” each year for CSM. DONE.

PCR – This has been completed.

Strategy 5

Develop a coalition among APTA sections to advocate for appropriate reimbursement of physical therapy services.

Time: End of 2009

Measurement/Outcome: Report to the BOD

Responsibility: President / Practice Chair

Fall 2007 Update: Potential for collaboration with the other Sections

TO-DO: *Jay to write a letter to Jim Nugent (check re-structuring at APTA to ensure this is still the right person) that would be sent out to the Sections. Bob will help draft this letter. Also include if they would be interested in developing a coalition with them on infringement by other providers.*

Fall 2008 Update: Nothing done on this to date. Go to the Sections rather than APTA staff on this. Discuss this at the HOD Section Caucus. Send letter from Jay to other Section presidents on how we can work together on this. Include on the Section presidents meeting agenda. Bob will help draft the letter that Jay will sign.

PCR – Bob Rowe will contact Section Delegates to determine their interest in participating on this issue.

Objective C

Attain legislative and regulatory protection of orthopaedic physical therapy practice

Strategy 1: Support and collaborate with APTA’s Referral for Profit Task Force.

Time: Annually

Measurement/Outcome: Report to BOD

Responsibility: Practice Chair

Fall 2007 Update: Ongoing. Bob was asked to be a member of the Task Force but was unable to participate. Bob will stay in routine contact with Fran Welk. This was moved to committee so Bob wasn’t able to be a member of the committee. Bob did stay in contact with Fran Welk.

Fall 2008 Update: Move to Practice Policy document.

PCR – This has been implemented and the ongoing communication between the APTA RFP Committee and the Section’s Practice Committee will transition to become a procedure within the Practice Committee.

Strategy 2: Develop a coalition with other Sections to work in collaboration to protect physical therapy practice from infringement by other providers.

Time: 2009

Measurement/Outcome: Report to BOD

Responsibility: Practice Chair

Fall 2007 Update: Contact needs to be made with the other Sections to determine if they would collaborate on this issue. Also should be a responsibility of a State Liaison. Possibly bring together other Section’s Practice Chairs at CSM or via conference call. This may be partnered with issues pertaining to reimbursement issues.

TO-DO: *May have a conference call instead of a meeting at CSM.*

To Do: *Include in letter from Jay above. Consider having a forum to discuss this with other Practice Chairs.*

Fall 2008 Update: See comments above.

PCR – Bob Rowe will contact Section Delegates to determine their interest in participating on this issue.

Objective D

Identify alternative practice opportunities for members negatively impacted by referral for profit and infringement by other providers.

Strategy 1

Work in collaboration with APTA to identify and develop emerging practice opportunities

Time: Annually

Measurement/Outcome: Report to BOD

Responsibility: Practice Chair

PCR – This has become a challenging task secondary to the complexity of this issue. The Practice Committee will continue to look for opportunities to collaborate with the APTA RFP Committee as well as other departments within APTA and state/section components to identify/develop emerging practice opportunities for our members who are negatively impacted by RFP clinics.

This ends the Practice Committee Report for February 1, 2009.

Respectfully submitted,

Bob Rowe, PT, DPT, DMT, MHS, FAAOMPT
Practice Committee Chair

Members: Bill Boissonnault, Kenneth Olson, Ronald Schenk, Joel Stenslie, and Derek Clewley, Cathy Ciolek, and Joe Donnelly.