

Partnerships for Survival: 1993-1999
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Within a couple of months the Orthopaedic Section will enter the new millennium prepared with a sound strategic plan (developed by our Board of Directors in September 1998) to deal with unpredictable health care and political environments, as well as a turbulent global economy. In the early 1990s, under the leadership of Section President Jan Richardson, PT, PhD, OCS our Section leaders predicted that our organization required a higher degree of stability to survive any political and health care environment. This notion was passed on to Section President Annette Iglarsh, PT, PhD when she began her tenure in 1992. It became evident that early in the decade of the nineties, our leaders had the foresight to treat the Orthopaedic Section “as a business.” A dynamic process of crafting a sound financial plan to keep Section overhead at a minimum, generate nondues revenue, continue competitive educational programs for our members, and advance our profession publicly and politically, really evolved as the Section membership and its leaders matured.

The health care arena has changed immensely since 1992. Managed care, corporatization of health care, and fierce competition for health care dollars between various health care providers has lead our Section to partner with the American Physical Therapy Association (APTA), American Academy of Orthopaedic Manual Physical Therapists (AAOMPT), Sports Physical Therapy Section, and State Chapters to deal with dynamic changes in physical therapy practice. We have worked together to promote clinical research, education, specialization, publications, and legislative initiatives.

This article is the last in a series of 4 articles which represents an attempt to document important aspects of the rich 25-year history of the Orthopaedic Section. It is very difficult and tedious to record a concise history of any organization, therefore, I choose to highlight important events of the past 6 years relating to partnering for the long-term survival of the Section. Included in this article will be highlights relating to administration, practice issues, publications, clinical residency credentialing, the 25th anniversary celebration in Seattle, Washington, and awards. I trust this format will rekindle the memories of the of long time members and stimulate our new members to become more involved with our great Section.

ADMINISTRATION OF THE SECTION

Late in 1992 Richardson began to allocate funds for the construction of a new, self-funded office space to house the Section operations. This decision was based on the demands of a growing Section membership and

potential office responsibilities that would require expansion of costly rental office space. Enhancing future financial stability was the primary objective for initiating the purchase of land and the eventual construction of a building for the Section. Through astute financial planning of our Finance Committee (lead by Treasurers John Wadsworth, PT, MA and Dorothy Santi, PT), the land and office building would be fully paid for prior to construction.

Four acres of land were purchased in 1995 on a beautiful site overlooking the Mississippi River in LaCrosse, Wisconsin. The long-term plan was to build the Section office on one acre and subsequently sell the remaining 3 acres. Ground breaking for the new building took place on June 12, 1995. Terri DeFlorian, the Section Executive Director, engineered the transition and move into the new office building on November 3, 1995. A local grand opening took place with the Chamber of Commerce present to conduct a ribbon cutting and officially welcome the Section to LaCrosse. Section President Bill Boissonnault, PT, MS, DPT lead a group of 40 people from local businesses, hospitals, and the University of LaCrosse.

The official grand opening of the East River Professional Park which houses the Section offices took place on October 5, 1996. Officers (President, Boissonnault; Vice President, Nancy White, MS, PT, OCS; Treasurer, Santi; Directors, Elaine Rosen, DPT, OCS and Mike Cibulka, PT, MHS, OCS) and Committee Chairs were joined by Past Presidents Stanley Paris, Carolyn Wadsworth, and Jan Richardson along with past Vice President John Medieros, PT, PhD. Boissonnault dedicated the conference room to the memory of James A. Gould, PT, MS. George Davies, PT, Med, ATC, SCS, CSCS President of the Sports Section utilized this occasion to offer historical notes of the Section and how Jim had touched and inspired many lives and careers. Special guest, Debbie Gould, presented the Section with a picture of Jim that is now displayed next to a plaque designating the *James A. Gould Conference Room*. Boissonnault closed the dedication with the following quote: "Today we honor Jim and Debbie Gould by naming this room the James A. Gould Conference Room. But we will honor Jim even more by the decisions that we will make in this room. I believe Jim's presence will help insure that decisions made here will be made in an intelligent, thoughtful, and constructive manner. It is in this way Jim will continue to contribute to the growth and advancement of the Section."

The business of the Section grew from a 1993 year-end budget of \$1,013,828.79 to an annual budget of \$1,565,577.00 in 1999. Since 1995 the Section has contributed \$500,000 to the Foundation for Physical Therapy

for clinical research. The Section developed the Clinical Research Grant Program in 1996. The purpose of the program is to fund clinical research studies by members. A total budget of \$30,000 has been allocated for grants annually.

During the autumn of 1996, the Section went on the Internet. Tara Fredrickson, Executive Assistant for the Section, has become our technical wizard. She has developed our Web page and serves as the Webmaster. Recently (October 1999) our Media Spokesperson Network (MSN) has been linked to our Web page to insure rapid deployment of information to our members and the media throughout the country. Terry Randall, PT, MS, OCS, ATC Public Relations Chairperson, has worked hard with Rick Watson, PT Director of the MSN, to complete the link between our Web page and the MSN. At the Fall Board of Directors (BOD) Meeting, which took place at APTA headquarters in April 1999, Randall was named to the APTA Public Relations Advisory Council. This appointment is a vital partnering link to the APTA Public Relations Department.

During 1998 one last administrative event occurred. The Finance Committee advised the Section in 1997 to restructure the office to insure that adequate training of staff occurred, in particular “cross training” of staff. It was felt that cross training was important because of the changes that occurred in the Publications Department in 1998 (see section on publications). DeFlorian lead the transition and training, as well as developing Measurable Performance Objectives (MPO), which formulated staff performance evaluations and criteria for bonus/financial advancement of the office staff. The MPO format of staff evaluations were effective in 1998.

PRACTICE

Considerable change in clinical practice began after the 1992 presidential election. Despite the failed Clinton administration Health Care Reform push to insure every American, the insurance industry independently changed the system. Managed care evolved, which essentially required providers to share in the financial risk of patient care. Acutely aware of the potential for drastic changes in reimbursement, as well as practice infringement, the Council of Section Presidents (1993) formed a committee to monitor clinical practice issues. Scott Stephens, PT, MS (Chair of Orthopaedic Section Practice Committee) spearheaded this committee. This committee would enable Sections and the APTA to coordinate their activities and resources to more effectively deal with health care reform and practice infringement issues. Concurrently, the Orthopaedic Section formed a task force consisting of Stephens, Santi, and Medieros to further study health care reform, reimbursement, and encroachment of orthopaedic physical therapy practice. The findings of this task force were reported at the 1994 Combined Sections

Meeting (CSM) Practice Issues Forum which was attended by 30 physical therapists. Of concern at this point in time was the fear that physical therapists would be legislated out of the industry and not reimbursed for physical therapy services. In addition, changing referral patterns, shifting of private practice into the corporate setting, introduction of private insurance networks, and hospital preferred provider organizations (PPO) changed the manner in which physical therapists practiced on a daily basis.

Secondary to reimbursement issues, the American Chiropractic Association (ACA) in 1996 sought to be included in a managed care organization (MCO) in California. The ACA lobbied the Health Care Finance Administration (HFCA) and essentially won the right to be included in MCOs in the state of California, which meant that the ACA had utilized its financial resources and lobbying skills to provide spinal manipulation in an MCO. Although this ruling only applied in the state of California, the ACA continued a long-term battle to become the primary providers of conservative care for all orthopaedic patients. The desire to become primary providers of conservative care also had been recognized for many years by the Orthopaedic Section leadership. The American Academy of Orthopaedic Manual Physical Therapists (AAOMPT) had been working with the Section leadership since 1992 on practice issues. In 1997 Boissonnault observed an opportunity to develop a stronger partnership between the Orthopaedic Section and the AAOMPT to collaborate on practice issues. The appointment of Steve McDavitt, PT as Co-chair of the Orthopaedic Section's Practice Committee provided a direct link between the Orthopaedic Section and AAOMPT and Helene Fearon, PT Co-chair provided a direct link between the Orthopaedic Section and APTA's Committee on Practice.

Rosen began organizing and accumulating information relating to manual therapy/manipulation practice and legislative issues in 1995. With the help of numerous individuals and the Practice Committee Chairs (Fearon and McDavitt) the *Compendium of Manual Therapy Practice and Legislative Issues* was compiled as a resource for State Chapters and our members. Included in the Compendium is information that is categorized, alphabetized, and summarized for ease of use to assist the Chapters in protecting the clinical practice of physical therapy.

Since 1994 there have been numerous Practice Issue Forums sponsored by the APTA and the Orthopaedic Section. In June of 1999, at an APTA/Section-sponsored Manipulation Forum at the APTA Scientific Meeting Exposition (SME), it was reported that 19 State Chapters were dealing with legislative issues relating to a physical therapist's right to utilize manual therapy/manipulative procedures in clinical practice. In the short period of 6

months, legislative battles on the State level relating to manipulation had increased from 6 to 19 states. It was evident that the ACAs plan to legislate physical therapy out of the conservative care market place has gained in momentum. During the Manipulation Forum in June 1999, Boissonnault and Orthopaedic Section Director Joe Farrell, PT, MS, FFAAOMPT voiced an urgent concern that our profession requires a long-term plan of action to protect our clinical practice as outlined in the *Guide to Physical Therapist Practice*, which was published in 1997. Thus Farrell organized a Manual Therapy and Manipulation Strategic Planning Meeting at the APTA National Headquarters in September 1999 that was attended by the APTA Government Affairs staff, Section leaders, State Chapter Presidents, President of AAOMPT, and a group of educators. The outcome of this meeting was positive in that a long-term proactive plan of action was formulated to strongly address manipulation issues and any other professional encroachment problems that may arise in the future. The plan of action will be presented to the APTA BOD for consideration in November 1999.

Clinical practice since 1993 has become more specialized. In 1993 the first Special Interest Group (SIG), Industrial Physical Therapy, became part of the Section. In 1995, the Industrial Physical Therapy SIG, changed its name to the Occupational Health Physical Therapists SIG (OHPTSIG). In 1996 the idea for the “Compendium on Occupational Health Physical Therapy” was conceived by the OHPTSIG. The development of the Compendium has been a joint venture of the Section, APTA, and OHPTSIG. The OHPTSIG hopes to complete the Compendium for distribution by the end of 1999.

Other SIGs developed through a mechanism whereby interested physical therapists formed a roundtable group. When the roundtable group was able to acquire 250 signatures of interested physical therapists, then the roundtable was eligible to become a SIG upon approval of the Section BOD. Special interest group status provided a “house” for physical therapists with a special interest to meet, confer, and share educational ideas. In 1999, there are 5 SIGs serving the needs of membership: OHPTSIG, Performing Arts SIG, Foot & Ankle SIG, Pain Management SIG, and the Animal Physical Therapist SIG. The AAOMPT remains an external organization to the Section (not a SIG) which communicates regularly on practice and residency credentialing issues through an official liaison from the APTA and the Section. In retrospect, the SIGs have contributed significantly to the programming for the annual Combined Sections Meeting and practice issues.

PUBLICATIONS

During the summer of 1993, the *Journal of Orthopaedic & Sports Physical Therapy* (JOSPT) editor Gary Smidt, PT, PhD reported that after 14 years JOSPT had joined 3,055 international journals indexed by the National Library of Medicine (Index Medicus). The great accomplishment under the direction of Smidt enhanced the worldwide acceptance of JOSPT.

In June 1996 at the Minneapolis Annual APTA Conference, the Orthopaedic and Sports Sections received a pessimistic financial report from the publisher (Williams & Wilkins) regarding JOSPT. The goal of the Orthopaedic and Sports Sections was to continue publishing a quality journal without increasing the cost to Section membership. Therefore, Boissonnault and Davies and their respective BODs issued a request for proposals for publication of JOSPT. Seven proposals to publish the journal were received by the January 15, 1997 deadline. Davies, Boissonnault, and an independent consultant reviewed the proposals. In May 1997 the Executive Committees of the Orthopaedic and Sports Sections narrowed the field of potential Journal publishers to two: Williams & Wilkins and Allen Press, Inc. After extensive negotiations, Allen Press, Inc. was selected to publish JOSPT. With the Williams & Wilkins contract ending December 31, 1998, the transitioning of publishing responsibilities began in July 1998. The financial terms of the contract will allow the Sections to provide the adequate resources for continued growth of JOSPT.

Concurrently while negotiations for a new publisher were ongoing, the Editor-in-Chief Search Committee (Dan Riddle, PT, White, Santi, Davies, and Mark DeCarlo, PT, MS) interviewed 5 candidates. After considerable deliberation, the search committee selected Richard DiFabio, PT, PhD from the University of Minnesota as the new Editor-in-Chief of JOSPT in the late spring of 1998. DeCarlo (current President of the Sports Physical Therapy Section) and DeFlorian administrated the move of the JOSPT office from Iowa City to the Section's LaCrosse office building. In addition, DeCarlo set up the BOD for JOSPT and with DiFabio's assistance set up the first meeting on July 7, 1998 in the new editorial office with Allen Press. DiFabio selected a new editorial board for the journal that officially met in La Crosse with the Section's BOD on September 25-26, 1998. The first issue under DeFabio's leadership occurred in January 1999. In sum, during 1998, the Section transitioned from one publishing company to another, one Editor-in-Chief to another, and moved the Journal office from Iowa City to LaCrosse. This would not have been possible without the sound financial stability of the Section that had commenced during

Presidents Richardson's and Iglarsh's tenure in the early 1990s and the expertise and negotiation skills of Presidents Boissonnault and Davies.

Other important components of publishing relate to contracted journals, *Orthopaedic Physical Therapy Practice*, and Home Study Courses. The Section continues to operate "as a business" to maintain financial stability, to contribute hundreds of thousands of dollars to clinical research, and to practice related issues. Due to our work in publications, the Section is earning nondues revenue. For example, the Section's Managing Editor, Sharon Klinski, manages a significant workload. Contracted journals Klinski manages include: *Cardiopulmonary Physical Therapy Journal*, *Issues on Aging*, *Neurology Report*, *Oncology Rehabilitation*, and the *Section on Women's Health Journal*. In addition, she is also working consistently with the following newsletters: *GeriNotes*, *Hand Prints*, and *Highlights of the Section on Women's Health*.

Since the evolution of *Orthopaedic Physical Therapy Practice* (OP), Klinski has worked as the Managing Editor for OP Editors Medieros, Jonathan Cooperman, PT, JD, OCS and our current OP Editor, Susan Appling, PT, MS, OCS. Historically, the cover of OP changed format and color in the winter of 1993 and again in the winter of 1997. The 1997 issue of OP denoted the publication as *Orthopaedic Physical Therapy Practice: The Newsletter of the Orthopaedic Section, APTA*. The January 1999 (Vol. 11, No. 1) issue of OP again changed in terms of title: *Orthopaedic Physical Therapy Practice: The Magazine of the Orthopaedic Section, APTA*.

The Home Study Course (HSC) series has evolved considerably since Kent Timm, PT, PhD, OCS, SCS, ATC, FACSM was the first editor of this popular educational offering for the Section's membership. Current Home Study Course Editor, Wadsworth has provided an eclectic offering of HSC programs ranging from occupational health, orthopaedic/sports-related topics, and medical topics pertaining to pharmacology and diagnostic imaging of bones and joints. Over 2500 registrants have taken advantage of the HSC to earn CEUs and advance professional knowledge in a cost-effective manner.

CLINICAL RESIDENCY CREDENTIALING

Accreditation of Clinical Residency Programs was initiated with the formation of the AAOMPT in 1992. The AAOMPT worked in collaboration with Section Presidents Richardson and Iglarsh in the early 1990s to formulate a plan to accredit residency programs. In March 1994, Carol Jo Tichenor, PT, MA chaired the original 8-member clinical residency accreditation task force appointed by the APTA BOD. Starting from scratch, this group under Tichenor's leadership laid down the foundation for the current process and documentation. The popularity of

this mode of advanced clinical training was evident when 400 physical therapists attended a Clinical Residency Open Forum held in Reno, Nevada during the 1995 Combined Sections Meeting. That same year, 400 physical therapists completed a clinical residency survey developed by the original task force of 1994. In 1997, 180 physical therapists reviewed the residency program credentialing guidelines proposed by a third task force chaired by Boissonnault. The feedback received resulted in significant modifications in the document that went to the APTA BOD in November 1997.

The APTA BOD at their November 1997 meeting agreed to implement a postprofessional clinical residency credentialing process, beginning in January 1998. To monitor this process, a 5-member committee on clinical residency credentialing was appointed. The APTA BOD selected Cibulka, Jay Irragang, PT, Joe Godges, PT, MS, OCS, Colleen Kigin, PT and Toby Long, PT to serve on this important committee. The credentialing guidelines provide requirements for those interested in developing a postprofessional clinical residency program in any specialty of physical therapy. This process will be dynamic and require nurturing to succeed. Richardson was part of all 3 APTA clinical residency task forces, therefore, she was a constant thread linking efforts from 1994 to 1997. Her persistent support for this concept of advanced clinical training was and remains vital to the successful outcome of the credentialing process.

At the Seattle CSM the Orthopaedic Section BOD agreed to allocate \$10,000 during 1999 for clinical residency program grants. The grants are designed to cover the APTA credentialing application fee, which ranges from \$1500 to \$2500 depending on the number of residents in the program. Also during 1999, the Orthopaedic Specialty Council recognized clinical residency training as one avenue to become a clinical orthopaedic specialist.

THE 25TH ANNIVERSARY CELEBRATION

Farrell, Wadsworth, and Linda Weaver (Executive Secretary of the Section) began organizing the archives of the Section's history according to the "Guidelines for the APTA Component Archives" in January 1998. Documentation included minutes from meetings, bylaws, public relations materials, publications from the beginning of the Sections history, home study courses, and lists/photos of all Section Award recipients. Photos were organized and stored at the Sections office. At the 1998 BOD Fall Meeting in LaCrosse, Paris, White, Ann Grove, PT, Santi, Farrell, Wadsworth, and Weaver cataloged hundreds of Section photos. Farrell videotaped Paris, Grove, and Santi who gave their impressions of the initial meeting of the North American Academy on Manipulative Therapy in August of 1968.

The 25th Anniversary CSM Meeting was highlighted by quality clinical and educational programming. The Section's Education Committee, chaired by Lola Rosenbaum, PT, MHS, OCS contributed an immense amount of energy in planning not only the education program for CSM, but the entertainment for the 25th celebration.

Saturday evening started with a packed house to honor the Section award recipients that included Santi (Paris Distinguished Service Award), Christopher Powers, PT, PhD (Rose Excellence Award in Research), and Walter Jenkins, PT, MS, ATC (Award for Excellence in Teaching Orthopaedic Physical Therapy). Following the Awards ceremony, hundreds of members spent a wonderful evening enjoying great entertainment that included a comedian and a little gambling at a casino night. Weaver was busy most of the night expanding our Sections archives by photographing officers, committee chairs, and past presidents (Paris, Dan Jones, PT, Duane Saunders, PT, Wadsworth, Richardson, and Iglarsh) who were present at the celebration. The fast-paced evening capped a great 25th anniversary celebration of the Orthopaedic Section.

SUMMARY

The Vision of the Orthopaedic Section that follows was crafted by the current Section Board of Directors during a strategic planning meeting in September 1998: "The Orthopaedic Section is the leader in advancing orthopaedic physical therapy practice through professional development and increased involvement of our members. The Section leads through bold and innovative education, practice, and research initiatives while maintaining fiscal and ethical accountability."

The period between 1993 and 1999 has provided innovative education through CSM programming and Home Study Courses, which are very popular amongst our members. The Section has shown fiscal responsibility by purchasing land in LaCrosse, Wisconsin, building the East River Professional Building that now houses the Section office and JOSPT, changing JOSPT publishers, offering numerous Home Study Courses, and publishing journals to provide long-term financial stability for our Section. Our commitment to research since 1993 is incredibly strong in that the Section has donated over \$500,000 to the Foundation for Physical Therapy for clinical research and remains very committed to clinical residency training by creating a grant program for residency programs who desire to participate in the APTA Credentialing process. The Section is a strong advocate of protecting the clinical practice of physical therapy as exemplified by its partnering with the APTA, AAOMPT, and other Component Sections to be a "watch-dog" for changes in reimbursement and practice infringement.

Future challenges that face our members include experiencing unemployment during 1999 for the first time in physical therapy, attempting to secure direct access, and recognition of our ability to diagnose by insurance carriers and legislative bodies. Partnering with other component organizations within our profession has enabled us to win many legislative battles since 1993. With a decrease in APTA membership this year, however, perhaps the biggest challenge in the immediate future is increasing our membership to strengthen our profession and our ability to remain a strong political power within the medical and legislative communities. Historically our profession has found a way to succeed and has found ways to survive. Our Section is confident that we will meet the challenges as we approach the millennium.

Awards Summary

Paris Distinguished Service Award: 1995, Joe Farrell; 1997, Rick Ritter; 1998, Carolyn Wadsworth; 1999, Dorothy Santi

Rose Excellence Award for Research: 1993 & 1994, Anthony Delitto; 1995, Karen Hayes; 1996, Lynn Snyder-Mackler; 1997 Richard DiFabio; 1998, Diane Jette; 1999, Christopher Powers.

Award for Excellence in Teaching Orthopaedic Physical Therapy: 1995 Sandy Burkhardt; 1996 Phil McClure; 1997 Tom McPoil; 1998, Paul Howard.

Joe Farrell, PT, MS, FFAAOMPT is currently serving as Director of the Orthopaedic Section, APTA and is owner of Redwood Orthopaedic Physical Therapy, Inc. in Castro Valley, California.