

Health Policy & Administration CSM 2008 Abstracts

Platform Presentations

PRESENTER: Chevan, Julia

TITLE: Do as I do: exercise habits of physical therapy professionals

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : The purpose of this study was to examine the personal exercise habits of physical therapy professionals in the U.S. using Centers for Disease Control and American College of Sports Medicine (CDC-ACSM) exercise guidelines, and to compare exercise habits of physical therapy professionals to the general population.

Number of Subjects : Survey responses were obtained from 1,352 subjects. Inclusion criteria for this study required subjects to be currently practicing physical therapy professionals with direct patient care responsibilities and billable patient hours. The final study sample included 1,238 subjects who met the criteria and provided complete data. This sample consisted of 923 physical therapists (PTs), 210 student physical therapists (SPTs) and 105 physical therapist assistants (PTAs).

Materials/Methods : There were two sources of data. Physical therapy professionals completed an online survey that included questions about exercise habits worded in the manner used in the leisure time activities section of the 2005 National Health Interview Survey (NHIS). The 2005 NHIS public use data files were the source for the same information about the general U.S. population and for a subset of persons whose occupational category was listed as health diagnosing professionals. Rates of exercise for 4 or more, 5 or more, 6 or more, and 7 days per week were generated.

Results : Using 5 days per week of exercise as the criterion for the CDC-ACSM recommended exercise guidelines, 62.3% of PTs, 67.5% of SPTs, and 61.4% of PTAs met this standard. These figures compare favorably against the estimate of 18.4% of all adults and 17.5% of health diagnosing professionals from the 2005 NHIS. When the criterion of 4 or more, 6 or more, and 7 days per week were analyzed, physical therapy professionals exercised at higher rates than both all adults and health diagnosing professionals from the 2005 NHIS.

Conclusions : We have identified that physical therapy professionals are meeting CDC-ACSM exercise guidelines at higher rates than the U.S. adult population and health diagnosing professionals. The rates of exercise for physical therapy professionals also exceed the physical activity targets set for adults in Health People 2010.

Clinical Relevance : Physical therapy professionals appear to engage in regular exercise as one element of a healthy lifestyle and are qualified to promote physical activity. Previous researchers have identified that health care workers who participate in regular exercise are more inclined to prescribe and counsel their patients about physical activity. Possibly, physical therapy professionals have a higher predisposition to counsel patients about physical activity than other health professionals.

KEYWORDS: physical activity.

PRESENTER: Ingram, Debbie

TITLE: Disciplinary Offenses and Actions in Physical Therapy

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : The purpose of this study was to examine the characteristics of disciplined physical therapists and physical therapist assistants during the years 2000-2005.

Number of Subjects : Physical therapists and physical therapist assistants practicing in the United States and disciplined in the years 2000-2005.

Materials/Methods : The Federation of State Boards of Physical Therapy (FSBPT) requests jurisdictions to submit all disciplinary actions to their database. The authors requested data retrieval for the following: disciplinary offense(s), disciplinary action(s), year of action, gender, age, years since graduation, education(US/foreign graduate), licensure status(PT/PTA), and jurisdiction (state). The staff of the FSBPT provided the data electronically.

Results : A total of 1077 disciplinary reports were submitted for PTs and 366 for PTAs during the years 2000-2005. The majority of disciplined PTs were male(52%). Male PTs were disciplined for sexual misconduct 28:1 and at least twice as often as females for fraud, unprofessional conduct, criminal conviction, and license revocation/suspension. Female PTs were disciplined at least twice as often for failure to comply with continuing education requirements. Among the 366 disciplined PTAs, 45% were male, 44% were female, and 11% had no reported gender. Male PTAs were disciplined at least twice as often for fraud and criminal conviction. There was a range of 106-259 PT reports/year with the mode being 2003 (24% or 259 reports). There was a range of 37-81 PTA reports/year with the mode being 2003(22% or 81 reports). The majority of disciplined PTs and PTAs were US graduates(88% and 89%). The age of PT offenders ranged from 23-78 years with the mode 33 years (57 reports) and the mean 41 years. The age of PTA offenders ranged from 22-61 years with the mode 43 years(26 reports) and the mean 39 years. At the time of disciplinary action for PTs, the number of years since graduation ranged from 4-52 years with the mode 5 years (58 reports) and the mean 16 years. At the time of disciplinary action for PTAs, the number of years since graduation ranged from 4-30 years with the mode 6 years (29 reports), and the mean 11 years. The majority of reports indicated a single offense(68% PT and PTA). The most common PT and PTA offenses were violation of federal/state statutes, practicing without a license, and unprofessional conduct. The most common PT disciplinary actions included licensure probation, fines, suspension, reprimand, and license revocation.

Conclusions : Further study of disciplined PTs and PTAs with matched controls is necessary to identify those at high risk for offenses leading to disciplinary action. Additionally, future studies need to explore the correlation between disciplinary action by state licensing boards and prior behavior in PT in order to develop effective interventions to prevent these offenses.

Clinical Relevance : Although a small proportion of PTs and PTAs are disciplined each year, this pilot study identified descriptive characteristics associated with disciplinary action by state boards.

KEYWORDS: licensure, disciplinary action, disciplinary offense.

PRESENTER: Ingram, Debbie

TITLE: Testing Accommodations Granted on the National Physical Therapy Examinations

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : The purpose of this study was to describe the types and costs of reasonable accommodations granted to candidates with disabilities taking the National Physical Therapist Examination and National Physical Therapist Assistant Examination during the years 2000-2005.

Number of Subjects : The subjects included all National Physical Therapy Examination (NPTE) candidates testing during the calendar years 2000-2005 who received reasonable accommodations paid by the Federation of State Boards of Physical Therapy (FSBPT). A total of 2172 accommodations were granted.

Materials/Methods : The authors requested data from the FSBPT testing records: calendar year, examination level (PT and PTA), ADA accommodation type, frequency and cost. The information was sent electronically. This study was approved by the Institutional Review Board of the University of Tennessee at Chattanooga.

Results : On the NPTE from 2000-2005, a total of 2,172 accommodations were granted to candidates with disabilities. The accommodations most frequently granted included time and a half(751), separate room(608), double time(416), pencil and paper exam(240), and the assistance of a reader(102). PT candidates received 67% of the accommodations. The total cost of all accommodations during the period was \$181,567 with a mean expense of \$83.59 per accommodation. The range of annual accommodation expenses increased each year from \$21,115(2000) to \$43,577(2005). The frequency of accommodations granted also increased from 219(2000) to 547(2005).

Conclusions : Physical therapy is a profession that promotes the ability of people with disabilities. Even though the number of candidates taking the NPTE has remained constant, the frequency of granted accommodations has shown a steady increase. From the years 2000-2005, the number of accommodations granted as well as the cost for those accommodations has doubled in size.

Clinical Relevance : The results shown are important to licensing boards who determine eligibility for accommodations, candidates applying to take the NPTE, and academic programs who provide classroom and clinic accommodations.

KEYWORDS: accommodation, Americans with Disabilities Act, licensure examination.

PRESENTER: Lefebvre, Kristin

TITLE: Racial Disparities in Level of Amputation Among Individuals with Vascular Disease

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : The purpose of this study is to evaluate the relationship between race and level of amputation. The hypothesis is that individuals of a Black race will be more likely than individuals of a White race to receive an above knee amputation. If higher level of amputation exists among individuals of a minority race, appropriate screening of minority patients who present to physical therapy practices should be considered.

Number of Subjects : From the Healthcare Cost and Utilization Nationwide Inpatient Dataset (HCUP NIS) for the year 2003, N= 27,757 (unweighted)/ N = 132,813 (weighted) individuals were identified as having an amputation. From this initial dataset, all individuals with vascular disease and who were of the Black or White race were maintained for analysis leaving an N = 16965 (unweighted) / 80,845 (weighted).

Materials/Methods : Using ICD-9-CM procedure and diagnosis codes found in the HCUP 2003 inpatient dataset, individuals with vascular disease who received lower extremity amputations were categorized into above and below knee. Using SPSS 15.0 complex samples software, to take into account data weights and to achieve appropriate variance estimates, both bivariate chi square and logistic regression analysis identified the relationship between race and level of amputation, including evaluation of the potential influence of covariates such as age, gender, level of illness, geographic location, primary insurance, and median income per zip code.

Results : Bivariate analysis revealed a significant association between race and level of amputation (chi square = 93.972, p<.000), which is consistent with the hypothesis of this study. In addition to race, the covariates including gender (chi square = 186.960, p<.000), level of illness (chi square = 162.202, p<.000), age (chi square = 927.267, p<.000), vascular illness (chi square = 29.469, p<.000), primary insurance (chi square = 492.122, p<.000) and median income per zipcode (chi square = 30.472, p<.001) were found to have a significant relationship with level of amputation. Logistic regression analysis showed that race continued to influence level of amputation (p<.000, AOR 1.511), even in the presence of other covariates. Other covariates were also significant for influencing level of amputation including age (p<.000, AOR 1.029), female gender (p<.000, AOR 1.332), Charlson co-morbidity index (p<.000, AOR 1.120), Medicare (p<.017, AOR 1.338), Medicaid (p<.003, AOR (B) 1.629), peripheral vascular disease (p<.000, AOR 1.217) and cerebrovascular disease (p<.000, AOR 1.798).

Conclusions : As per the hypothesis, according to the HCUP NIS 2003, race does influence level of amputation, even when taking into account the covariates that influence the presence of health disparities.

Clinical Relevance : Minority patients should be screened closely for peripheral vascular disease of the lower extremities. Physical therapists should incorporate the use of screening tools such as the ankle brachial index and Edinburgh claudication questionnaire into general medical screening of minority patients.

KEYWORDS: health disparities, amputation, vascular disease.

PRESENTER: Paschal, Karen

TITLE: Consumer Beliefs about Electronic Health Information Exchange and Privacy

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : Purpose/Hypothesis : Major health information privacy and security issues are left to be resolved as we work to meet the President's Executive Order to have electronic health records (EHRs) in place by the year 2014. Although the patient is a key stakeholder in this process, little is known about consumer views of EHRs, interoperability and information exchange, and privacy issues. The purpose of this study was to identify consumer beliefs of how their personal health information should be managed.

Number of Subjects : Six consumers (3M, 3F; age 53-80 yrs) representing varying socioeconomic, healthcare experience and cultural backgrounds participated in interviews. Twenty-four consumers (5M, 11F; age 27-79 yrs) who provide quality improvement advice to Nebraska's Medicare Quality Improvement Organization were asked to complete an electronic e-mail survey.

Materials/Methods : A mixed methods design was used. A semi-structured interview was conducted to explore a purposeful sample of consumer's beliefs. Each interview was developed into a case story and coded. A cross-case analysis was performed to establish overarching themes. These themes were then used to create a questionnaire administered to a group of consumers. Items included questions about consumer knowledge, beliefs, experiences and concerns.

Results : Data indicate a lack of consumer knowledge and misperceptions about the current management of health care information as well as future electronic management and exchange. Only half kept track of any personal health information. Of those that did, it included a paper list of medications and/or a list of medical conditions. Most believed that health information should be shared among health care providers with identified boundaries and assurances. Consumers wanted final authority over granting permission to access health information but were willing to grant this permission to improve the coordination of their health care service delivery. Although they expressed concerns about privacy and security, selection of health care providers may be influenced by the availability of a shared electronic health record.

Conclusions : Personal health information should be shared to improve patient care. Although consumers lacked knowledge about EHRs and information exchange, they expressed strong views about who should have access to this information. There was a high degree of trust placed with the provider expecting that information would be shared in an appropriate manner. Consumer knowledge may be represented at a higher level by this survey than is likely in the general population. A broader-based study across the care continuum, care settings, and other access issues is important to understand consumers' viewpoints and needs.

Clinical Relevance : The inevitable availability of EHRs will require that the consumer be involved explicitly in this aspect of their care. Consumers' experience with health information technology and their beliefs about how their health information should be managed are critical to physical therapists as they select, implement and/or use electronic health records.

KEYWORDS: Electronic Health Records, Privacy and Security, Patient Safety.

PRESENTER: Straube, Don

TITLE: Rasch Analysis of the Physical Therapy Outpatient Satisfaction Survey

PRESENTATION TYPE: Platform

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose/Hypothesis : The purpose of this study was to further investigate the psychometric scaling of the Physical Therapy Outpatient Satisfaction Survey (PTOPS). Specifically, this investigation determined: 1) how each item of the PTOPS contributes to the hierarchical nature of the scale, 2) the range of item difficulty related to the construct (patient satisfaction), 3) assess the fit of each item as it contributes to the construct of the scale.

Number of Subjects : Data were collected from a sample of convenience at five outpatient PT clinics that reported no prior experience with either the PTOPS or PSQ. All patients scheduled for treatment on an identified day were eligible for the study with the following exclusions: 1) under 18 years of age, 2) being seen for an initial evaluation on the day of data collection, and 3) cognitive ability incompatible with responding to the survey. Across the five clinics, 54% of eligible subjects (152 subjects) completed the surveys with the response rate ranging from 80% to 34%. Informed consent was obtained from all participants.

Materials/Methods : The partial credit Rasch model was used to generate the data used in the analysis. Logit measures provided by the model were used to assess the range of items relative to various levels of patient satisfaction. Infit Mean Square (MNSQ) values between .6 and 1.4 were used for criterion related to acceptable model fit.

Results : The results demonstrate the following: 1) the items of the scale appropriately cover the range of patient satisfaction, providing evidence that there are no floor or ceiling effects, although fewer items were found above the mean patient satisfaction than below. 2) items that were related to cost of physical therapy services were found at the higher end of the scale, demonstrating they were in general harder for the subjects to endorse. “Enhancer” items, related to patient contentment with the physical environment and personal interactions, were found most frequently at the lower end of the scale, demonstrating ease of endorsement by the subjects. Location items (ease and location of clinic) and Detractor items (related to acknowledgment of a patient’s physical and interpersonal needs) were found throughout the scale. Finally, only 5 of the 34 items of the PTOPS fell outside the Infit MNSQ range, demonstrating higher variance than the model would predict. These items were related to 3 different dimensions of the scale.

Conclusions : The PTOPS is able to capture a wide range of level of patient satisfaction related to physical therapy services. Cost items were more difficult for subjects to endorse positively, while items related to clinic environment and personal interactions that enhance satisfaction were easier for subjects to endorse positively.

Clinical Relevance : The findings provide additional data to support the use of the PTOPS for assessment of patient satisfaction. The findings also provide a mechanism to identify items with higher than expected variance for further investigation, as well as future modification of items to measure higher levels of patient satisfaction.

KEYWORDS: Patient Satisfaction, Rasch.

Poster Presentations

PRESENTER: Chaudry, Aliya

TITLE: Interface of Ethics and Law in Physical Therapy: A Clinical Application Seminar for Practitioners.

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The need to educate Physical Therapy Practitioners (Practitioners) regarding varied ethical concerns encountered in physical therapy practice that have legal implications coupled with the need to protect patients/clients from suffering ethical and/or legal harm led Langston University's Doctor of Physical Therapy (DPT) Program at Langston, Oklahoma to investigate how Practitioners should be educated in prompt recognition and proper handling of ethical concerns.

Description : Clinical Instructors and Center Coordinators of Clinical Education at clinical facilities affiliated with DPT Program were surveyed regarding familiarity with legal implications of ethical issues arising in clinical practice. Over 90% of the 75 facilities surveyed indicated a strong need to address this issue. Consequently, a continuing education program (Seminar) was developed to address core ethical principles valued in physical therapy practice, ethical concerns arising in clinical practice, and American Physical Therapy Association's current professional guidelines necessary for Practitioners. A physical therapist instructor with legal expertise taught Seminar so that relevant federal and state laws, regulations, and case law were also incorporated to provide insight regarding impact of legal obligations and consequences of ethical decision making. Seminar was approved by Oklahoma State Board of Medical Licensure and Supervision for continuing education credits (CEUs) required for licensure renewal in the State of Oklahoma. Seminar was offered at no cost to clinical facilities affiliating with the DPT Program.

Summary of Use : Practitioners identified through post seminar evaluations the value and significance of the seminar. Practitioners reflected significant agreement that Seminar enabled them to gain a better understanding of how to analyze professional conduct for breach of legal and ethical duties.

Importance to Members: Seminar accomplished a twofold purpose for Langston University: a) to assist in meeting its goal of providing ongoing continuing professional education and b) build collaborative networks with its affiliating clinical sites. Affiliating clinical facilities benefited by providing employee education and affordable mandatory CEUs. Due to perceived value of Seminar, seven sessions at varied clinical facilities have been conducted and five additional Seminar offerings have been requested by various clinical facilities in the State of Oklahoma. Additionally, practitioners have requested that the contact hours for this Seminar be increased from four to eight hours to allow time for detailed discussions on additional ethical concerns and case studies. The core principles of sound ethical practice and legal decision making are universal and therefore, current Seminar can be adapted for use in educating Practitioners regarding ethical and legal practice in any state or country of origin.

KEYWORDS: Ethical, Legal, interface.

PRESENTER: Creel, Gwenda

TITLE: Promoting Public Health Awareness Among Health Care Professional Students through an Interdisciplinary Family Health course

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The 1999 LAMP study indicates that communication and professional involvement are the top knowledge and skills needed by physical therapists. The Interdisciplinary Family Health (IFH) course at University of Florida (UF) promotes the understanding of the overlapping roles and distinct capabilities of multiple health professionals promoting interdisciplinary communication. The course gives students from multiple disciplines an opportunity to interact with each other as they address the health needs of community members. Physical therapy students begin to take an active role in assessing and addressing the health needs of their community.

Description : Over 400 first year students from Physical Therapy, Clinical Psychology, Pharmacy, Nursing, Dentistry, Nutrition and Medicine participate in a program allowing students to interact with over 120 volunteer families from the Gainesville community. IFH includes small group discussions between students and faculty. Groups of three students make home visits to their assigned family six times over the school year. Student groups include one member from three different health disciplines.

The IFH course promotes skill development in communication among health care professionals, community resource use, advocacy for client needs, and addressing adherence issues. IFH provides an early opportunity for students to gain experience interacting with community members and discovering resources within the community.

The volunteer families demonstrate a wide cross-section of health needs. As an example, one family's problems included a need for dental care, weight management, and a child with behavioral issues. The students served as advocates connecting the family member with appropriate resources including a pro bono dental clinic for the grandmother, and a summer camp for children with special needs for her grandson. In addition, the students provided education on an exercise and nutrition program to the entire family.

Summary of Use : The IFH course requires a multidisciplinary approach by students to navigate community systems while addressing complex biopsychosocial health problems. Volunteer families receive help with a variety of health issues, education about health care options and benefits, and referrals to organizations that can provide affordable services.

Importance to Members: This early experience in the preparation of physical therapy students provides a framework for developing the attitudes and behaviors expressed by the APTA's Vision 2020. Students quickly recognize the issues related to accessibility to healthcare, individual differences, and the challenges related to behavioral change and adherence issues in these community volunteers. Our profession as well as our communities will benefit by having physical therapists who rise to the challenge of Vision 2020 by developing strong communication skills and facilitating collaboration among healthcare providers to address these issues.

KEYWORDS: Public Health, Interdisciplinary, Communication.

PRESENTER: Gates, Charlene

TITLE: Improving Blood Pressure Screening of Outpatients Referred to Physical Therapy

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : Taking vital signs (including blood pressure [BP]) is an important part of initial exams, especially for autonomous practice. Yet it has been shown that physical therapists (PTs) do not do this routinely.

This is a description of a quality improvement project with the aim of increasing the number of patients whose BP is taken at initial visit in our hospital-based outpatient PT clinic. Additional goals were 1) to determine how many patients with BP above normal range were identified and 2) how knowing the patient's BP may have changed PT treatment.

Description : Materials/Methods: Based on discussions with staff, barriers to taking blood pressure were identified and a strategy to eliminate these barriers was designed which included: 1) an improved medical history form for screening (including CV risk factors), 2) development of an algorithm for when and how to communicate results with providers, 3) a continuing education series, 4) competency assessment, 5) putting BP cuffs and stethoscopes in the rooms for new patient exams, and 6) developing a patient education sheet with information on HTN and lifestyle. Information collected included demographics, CV risk factors, whether BP was taken, and whether it was within normal range. For patients with BP above normal range, PTs indicated whether they took any action based on this information.

Number of subjects:

Information was initially collected from 624 new patient records over three months. Six months later 227 additional new patient records were reviewed to evaluate continued practice change.

Before the project, individual PTs decided to take BP on a case by case basis; however, in reviewing 86 consecutive charts, BP was taken only 3 times – even when the medical record and the initial PT note indicated that the patient had significant CV risk factors. During the first 3 months of the project, BPs were taken on 477 of 624 new patients (76%); 76 patients were above threshold (16%); 54 (11%) had 4 or more risk factors, 47(10%) had three, 88 (18%) had two, and 281 (60%) had one. Age was not included as a risk factor. 48 of the patients with BP above normal range had history of HTN and 33 (69%) of these patients were on medications. Changes in PTs' behavior based on knowing the patients' BP included repeating the measurement, asking the patient to follow up with their primary provider, or checking oxygen saturation. Informally, many PTs expressed feeling more comfortable assessing blood pressure and communicating with patients and physicians regarding HTN management. Six months after initial data were collected, follow-up chart review revealed that BP was taken for 188 of 227 new patient evaluations (52%).

Summary of Use : QI

Importance to Members: Many patients referred to outpatient PT for musculoskeletal problems also have multiple CV risk factors. PTs need to assess vital signs. In a busy clinical environment, barriers to assessment of BP for new patients need to be identified and eliminated or minimized. PTs also need ongoing feedback to sustain practice changes.

KEYWORDS: blood pressure, quality improvement.

PRESENTER: Greene, Revenda

TITLE: The Impact of Federal Legislation on the Provision of Physical Therapy Services to Spanish-speaking Individuals with Limited English Proficiency

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Background & Purpose : Health care providers in the United States, including physical therapists, are dealing with an increasing population of patients whose primary language is not English. Physical therapy providers in major cities and in communities along the United States borders regularly encounter a diversity of languages and cultures, with Spanish speaking patients being the largest non-English speaking group. According to the 2000 Census, of the 281 million residents in the continental United States, 35 million were Hispanic or Latinos. Latinos are the largest ethnic minority in the United States. The Hispanic population in this country is expected to continue to rise. Studies show that many in the Latino population have limited English proficiency (LEP). Language barriers in Spanish speaking patients may lead to the patients experiencing difficulty communicating their medical history and complaints in a way which is understood by the health care provider. Federal laws mandate that language services must be made available to each individual with LEP who cannot speak, read, or understand the English language at a level that permits him or her to interact effectively with clinical or non-clinical staff at a health care organization. The large number of Latinos with LEP suggests the need for interpretation and translation services in the provision of physical therapy.

Case Description : A research study was conducted with a convenience sample of 30 Spanish speaking physical therapy patients in the Washington, DC metropolitan area. The researchers developed a survey which was written in English and Spanish, and was administered to the study participants. The purpose of this study was to determine if patients with LEP are adversely affected by their language barriers; if physical therapy providers have the resources to consistently provide quality care to patients with LEP; and to identify the perceptions of Spanish-speaking individuals regarding the quality of rehabilitation services they received.

Outcomes : The study revealed that U.S. federal laws applicable to the treatment of patients with LEP were not always followed. Specifically, the PT providers did not consistently provide professional interpreter services to patients with LEP. The results of the study also indicated that patients with LEP frequently used family members as interpreters. However, their language barriers did not appear to have an adverse effect on the quality of physical therapy services provided.

Discussion : There is a large and growing need for bilingual PTs who are able to communicate directly with patients in their native or preferred language. Health care facilities who employ bilingual PTs will also ensure that the provision of rehabilitation services to individuals with LEP is compliant with federal laws.

KEYWORDS: Limited English Proficiency, Spanish Speaking .

PRESENTER: Hageman, Patricia

TITLE: Impact of a Title VII funded Geriatric Education Center on Physical Therapy in a Rural Midwestern State

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The Geriatric Education Center (GEC) Program, which has supported 50 GECs nationwide, was created in 1998 under Section 753, Title VII of the Public Health Service Act. GECs are intended to strengthen interdisciplinary training of health professionals in the assessment, planning and delivery of culturally competent care to older adults. The purposes of this presentation are to describe the needs assessment for and preliminary participation outcomes of the Nebraska Geriatric Education Center (NEB-GEC) as related to physical therapy (PT).

Description : NEB-GEC, funded in 2004 as a new \$2 million 5-year center, was designed to provide interdisciplinary training in geriatrics for health professionals, especially those in rural or underserved areas. University of Nebraska PT faculty, in collaboration with other health professionals, conducted an educational needs assessment used to develop educational programming, including an 80-hour interdisciplinary mini-fellowship certificate program for state-wide distribution. In fall 2004, all licensed Nebraska PTs (1,212) were surveyed about their geriatric educational needs with 168 (14%) responding. Respondents expressed an interest in continuing education regarding balance and mobility (90%), congestive heart disease (73%), pharmacology (75%) and prevention and wellness (72%). Live and/or videoconference educational formats were preferred (86%) over web-based instruction (33%). Curricular content was developed based on feedback received and was made available in multiple formats.

Summary of Use : Within 2-years, 440 PT associated learners completed 5,236 contact hours of education compared to 227 non-PT learners (MD, NP, RN, PharmD, etc) who completed 5,823 hours. 54 PTs enrolled in and 9 PTs completed the 80-hour interdisciplinary mini-fellowship. NEB-GEC programming reached learners from 64 of 93 Nebraska counties, including those practicing in rural or underserved areas. NEB-GEC funding was eliminated after grant year-2 when Congress eliminated nearly all Title VII program funding in the Fiscal Year 2006 budget. Aggressive advocacy efforts to members of Congress by representatives from the National Association of Geriatric Education Centers, and individual practitioners including Nebraska therapists, proved successful as new 2007 legislation resulted in a new GEC grant funding announcement issued April 2007.

Importance to Members: The high rate of participation by PT associated learners, especially those from underserved areas, suggests there is a tremendous need for advanced interdisciplinary training in geriatrics delivered in a variety of formats. APTA members may have similar unmet needs and may be unaware of the relatively inexpensive, accessible and evidence-based geriatric information available through existing GECs. In addition, advocacy by APTA members for Title VII funded GECs is needed to help address workforce shortages and training in geriatric care to better serve the growing US older population. Funded by DHHS/HRSA/BHPr 1D31HP03134-01-00.

KEYWORDS: rural, political advocacy, geriatrics.

PRESENTER: Herr, Roger

TITLE: Optimal components for state legislative success

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : Identify a template to describe key variables and timing of state legislative activity for successful development of a bill through signing into law.

Description : Identifying the key areas of membership activism, community collaboration, public relations, grassroots, education, patient involvement, and promoting physical therapy issues across the continuum that contribute to legislative success. Utilizing the Physical Therapist Assistance licensure addition to the Washington State Physical Therapy Practice Act as a practical example.

Summary of Use : State practice act changes require district and special interest groups membership activities, soliciting input and facilitating debate and support for a collaborative legislative outcome in one legislative session.

Importance to Members: Identify the variety of roles, activities, timing, organization, and refinement essential to success in importance in state practice act legislation.

KEYWORDS: Legislative, Advocacy, practice act.

PRESENTER: John, Demetra

TITLE: Development of a Comprehensive Diabetes Health Intervention Program for an Urban Hospital

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The project aim was to perform a needs assessment, and based on these findings, design a comprehensive diabetes education, nutrition, and exercise program for a specific urban hospital population to create behavioral changes in patients' management of diabetes. Type II diabetes is a major public health concern. The number of people who do not manage their diabetes is rising with prevalence of the disease. Improper management leads to increased risk for secondary conditions such as heart attack, stroke, kidney damage, nerve damage, skin disorders, infection, and amputation. Providing education about the disease is important but must be complimented with intervention strategies to maximize proper behavioral changes and improve patient outcomes.

Description : A needs assessment was performed to determine the needs and desires of an urban hospital to properly manage patients with diabetes and to establish priorities, goals, and objectives to meet these desires. Key staff members at the hospital were interviewed to determine contributing factors to poor diabetes management and resources available to implement a comprehensive diabetes program. Staff members included health education staff and health practitioners who work with the patient population. An assessment of community issues and resources in the surrounding region was performed by interviewing staff from a local outreach program, touring the community, and reviewing publicly available census data. Significant needs assessment findings included: a desire to increase health literacy of type I and type II diabetes, improve understanding of culturally sensitive dietary needs, develop a culturally sensitive functionally based exercise protocol, and increase awareness of proper foot care. A literature review was performed to identify diabetes education, nutrition, and exercise programs that have previously shown positive effects and behavioral changes. Studies that used primarily Hispanic subjects were reviewed preferentially due to a primarily Hispanic patient population. Based on the needs assessment and literature review, a comprehensive diabetes program was proposed and presented to a clinical department at the urban hospital. The program, based upon principles of behavioral change and self-efficacy includes objectives for disease management, nutritional, and exercise components, and a plan for program evaluation.

Summary of Use : Using community and organizational needs assessments, combined with a focused literature review on these needs can aid in the design of a comprehensive diabetes education, nutrition, and exercise program targeted for urban populations.

Importance to Members: Diabetes has become a health care epidemic growing in prevalence each year. To provide a significant impact on this issue, programs based upon needs and resources of the patient population and the service provider combined with behavioral change strategies are likely to be more effective than didactic learning in assisting patients to make necessary life changes to self-manage diabetic syndromes.

KEYWORDS: diabetes, Exercise class, needs assessment.

PRESENTER: Lawrence, Suzanne

TITLE: An effective model for patient and family traumatic brain injury education: tools, process and resources

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : This presentation will describe an evidence based tool that helps to identify the patient's and family's need for support and TBI education, an effective educational process, and multi-modal educational resources.

Description : Clinicians at our acute inpatient rehabilitation center expressed concern about the inconsistencies and adequacy of traumatic brain injury (TBI) education for patients and their families. We initiated an inter-disciplinary quality improvement project to tackle the problem. After completing a search of the literature and contacting 5 Model TBI Centers, we determined that there were no national standards for educating patients and their families about TBI. Feedback was gathered from patients and families using post-discharge phone surveys. Our survey results were consistent with research findings, patients and families are dissatisfied with the support and education they received. Staff were surveyed to identify critical educational topics, current practice, and areas of needed improvement. They reported dissatisfaction with the current educational process. The "TBI Family Needs Questionnaire" (FNQ), a standardized TBI outcomes tool on the COMBI web site, was trialed with 5 patient-families. This tool did not meet the patient-family needs due to its length, complexity, and lack of clarity. The questionnaire was modified using the feedback from patients, families, clinicians, and research. A new tool, "TBI Family Education Questionnaire", was developed and trialed. This tool received favorable feedback. Like the FNQ, this new tool was designed to help identify the patient and family TBI educational and support needs. Concurrently, a new TBI education process for the administration of the questionnaire, delineation of discipline-specific and inter-disciplinary staff responsibilities for education, and clinical documentation was developed. Web-based educational materials were researched, the TBI Education Manual updated, and a user-friendly web-based educational resource list implemented. Informal feedback has been positive. A post-implementation survey were carried out with patients, families and clinicians. The clinician survey results demonstrate greater satisfaction with the educational process, interdisciplinary cooperation, clarity about staff roles and responsibilities. Families and clinicians feel that this new education approach is more patient and family centered.

Summary of Use : Research has shown that patient and family TBI education often results in dissatisfaction and a lack of preparedness for community re-entry. This project describes new tools, process and resources for patient and family TBI education and support that provide the consumer and clinicians with greater satisfaction.

Importance to Members: Effective patient and family TBI education and support is essential for recovery and reintegration. Clinicians with an inpatient rehab or outpatient TBI clinical practice will find these tools, processes and resources immediately helpful.

KEYWORDS: Traumatic Brain Injury, Patient and Family education, Clinical tools.

PRESENTER: Obispo, Marangela

TITLE: An Interdisciplinary Treatment Model for the Outpatient Setting

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Background & Purpose : The interdisciplinary team is one of the most generally accepted innovations in the delivery of inpatient medical and mental health care services. Descriptions of models of interdisciplinary clinics in the outpatient setting is very limited in current literature, particularly within the US. Throughout the literature, the use of an interdisciplinary approach is recommended for the effective and efficient rehabilitation of patients with complex chronic conditions such as Parkinson’s disease (PD), amyotrophic lateral sclerosis (ALS), post-polio syndrome (PPS), cancer, heart failure, and several other conditions, including the management of elderly patients. However, these studies focus primarily on inpatient settings. The purpose of this case report is to describe a model of interdisciplinary clinics in the outpatient setting for the management of the rehabilitation needs of patients with chronic complex conditions. The intent of using an interdisciplinary clinic approach is to maximize patients’ independence and to extend the patients’ ability to remain in the community with a high quality of life.

Case Description : Interdisciplinary clinic models were developed for the outpatient setting in a rehabilitation hospital in Florida for the treatment and management of PPS, PD, ALS, and Head and Neck Cancer. The interdisciplinary clinics (each condition has a separate clinic) are designed to offer coordinated interdisciplinary services for patients in a single day. Patients are treated by health professionals with special interest and training in each of the particular conditions, therefore patients receive true “specialty care”. Patients are evaluated by several disciplines in one day, eliminating the need to travel to multiple offices for the various services. The disciplines involved vary depending on the nature of the condition, however, physical therapists are integral team members in all of the clinics. Other team members include physician, nurse, occupational therapist, speech therapist, psychologist, and social worker. Patients discuss all concerns regarding their disease and plan of care with each of the health care professionals. The team’s focus is to implement a coordinated plan of treatment toward the common goal of improving quality of life.

Outcomes : Patient satisfaction surveys were used to assess the effectiveness of the interdisciplinary clinic model. To date, twenty patients from the ALS, PD, and PPS clinics have participated in the survey. The participants were positive regarding the interdisciplinary approach. Survey results showed that 100% of the participants found the clinic experience valuable and most preferred this model. 100% would recommend the clinics.

Discussion : This report supports the use of an interdisciplinary approach for the treatment of patients with complex needs. Further research should assess the effects such clinics have on total healthcare and societal costs. This care model in the outpatient setting could be a mechanism to reduce institutionalization costs through prevention and disease management.

KEYWORDS: Interdisciplinary, Outpatient, Rehabilitation.

PRESENTER: Peteet, Jean

TITLE: The Physical Therapist's Role in Promoting Health Internationally: A Student Learning Opportunity Model

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The purpose of this presentation is to discuss the potential role of physical therapists in promoting health internationally, how important principles of health promotion could be applied to international health promotion, and two student driven projects aimed at improving health for underserved populations.

Description : People in many underserved international communities are at high risk of functional decline, disability and compromised quality of life. Physical therapists have the opportunity to foster improved health and health care among underserved populations through activities such as changing cultural attitudes towards people with disabilities and providing adaptive equipment or training programs to improve management of physical limitations. To foster involvement of physical therapy in international health, we present an approach in our curriculum that allows students to develop interest, knowledge and skill in the area of international health promotion.

First, students learn critical principles of health promotion: program planning, needs assessment, cultural competence, theoretical frameworks for promoting health and educating populations as well as principles of management. Second, through a practicum experience, students can develop a project aimed at enhancing health in an underserved population of choice. These practica experiences are designed to be a combination of research, program development, and service learning.

Two student projects are used as models for this service element.

Through personal contacts, Boardman volunteered in Turkey in an orphanage and through Healing Hands for Haiti, Dennis volunteered in Haiti. Boardman developed a community-based rehabilitation (CBR) program for families in Ankara, Turkey for children with disabilities who received limited or insufficient therapeutic and rehabilitative services with the goal of decreasing Turkey's high rate of institutionalization. Dennis created a curriculum plan and manual for volunteers with the organization, Healing Hands for Haiti, to teach families whose children will receive surgery for the diagnosis of hydrocephalus. As a result of these projects, the students engaged in research and analysis that heightened their commitment to promoting health in underserved countries.

Summary of Use : To successfully promote health in international settings, physical therapists need to be sensitive to cultural diversity issues, have an understanding of local politics, be able to analyze health problems from a broad perspective, be able to partner with local health care providers and organizations, and be able to use individual, community and organizational behavior change theories to support program development.

Importance to Members: Physical therapists can have an important role in promoting health in underserved international communities and can develop necessary health promotion skills during their training.

KEYWORDS: Health Promotion, International Health, Education.

PRESENTER: Peterson, Cathryn

TITLE: University of the Pacific, Rotary Club, and the Wheelchair Foundation: Opportunities of a Lifetime

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The purpose of this poster is to share with the Physical Therapy community how one university partnered with the local Rotary Clubs to foster cultural competence.

Description : In November 2006, the local Rotary Clubs went to Ecuador for the purpose of delivering 280 wheelchairs to those in need. An adjunct faculty member who is a retired orthopedic surgeon invited one of the Physical Therapist faculty members to accompany the Rotary Club because of her expertise with physically disabled people and assistive mobility devices. This was the first time a physical therapist accompanied Rotarians from the Central Valley. She instructed several Rotarians in how to adjust the wheelchairs for the recipients and she educated family members and caregivers in transfer training and body mechanics. Upon returning from Ecuador, they recognized the value of this partnership between Rotary and the Department of Physical Therapy, and the potential impact on students and future wheelchair recipients. The Stockton Rotary Club has since committed funds for students to participate each year in similar experiences. In November 2007, two students and two faculty members will accompany the Central Valley Rotary Clubs to Peru and Mazatlan. The University is also assisting in these missions through funds made available through internal grants.

Summary of Use : This partnership has served as an impetus for engaging students and faculty actively in international service missions. These opportunities enable them to contribute their expertise while adding to their development as culturally competent clinicians and educators. Our Department's goals are to: 1. Enhance students' awareness of issues faced when providing care for diverse populations; 2. Provide insight into considerations regarding potential issues for immigrant relations; 3. Promote students' appreciation of the importance of self-reflection as a means of enrichment; and 4. Broaden the students' perspectives of international humanitarian opportunities with culturally diverse populations. In addition, graduate students in the Doctor of Physical Therapy program will collaborate with undergraduate students in the College (Spanish and Sociology). Specific objectives for those collaborations include: 1. Develop a translation booklet of common phrases used with wheelchair prescription and transfer training; and 2. Identify culturally sensitive and insensitive behaviors for interacting with members of cultures in Mazatlan and rural Mexico, as well as with Peruvians.

Importance to Members: The information in this poster will be of interest to clinicians, students, educators, and administrators. This generation of students and recent graduates has been described as service-oriented, globally concerned, and humanitarian. They have experienced more diversity in their lifetimes than other generations. With opportunities such as those described in this poster, they will likely continue to embrace a more global world view and possess a commitment to service throughout their lifetimes.

KEYWORDS: Cultural Competence, International, Rotary.

PRESENTER: Roberts, Sherry

TITLE: A statewide survey of factors affecting membership and retention in the American and Kentucky Physical Therapy Associations

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : To survey physical therapists (PT), physical therapist assistants (PTA), student PT's (SPT) and student PTA's (SPTA) in the Commonwealth of Kentucky in order to identify factors that may affect membership in the American (APTA) and Kentucky Physical Therapy Associations (KPTA).

Description : According to the APTA, in 2006 there were nearly 70,000 total members including an estimated 13,000 student members. Recruitment and retention of PT, PTA and student members is crucial to the success of the APTA and KPTA. The president of the APTA has noted that membership is "vital to protecting patients and PT's rights to practice through advocacy efforts, ensuring reimbursement and educating consumers about the value of physical therapy". Currently only 30% of licensed PT's and 11% of licensed PTA's in Kentucky are KPTA/APTA members. Nationally, the estimated number of licensed PT's and PTA's belonging to the APTA is about 40% and 8%, respectively. Approximately 60% of the combined PT and PTA students in the United States are APTA members. Factors that may influence decisions to belong to the KPTA/APTA should be analyzed to assist membership recruitment and retention efforts.

Summary of Use : A 26 item survey to identify issues surrounding KPTA/APTA membership was developed for licensed Kentucky physical therapy professionals while a modified version was developed for PT/PTA students. Hard copies were mailed to approximately 3,200 PT/PTA professionals and 324 students. The surveys for the PT's and PTA's were also made available online. Total survey response return rate was 21% for PT/PTA, and 63% for the students. Major themes identified from analysis of the data included the following: 1) few PT/PTA members have membership dues paid by employers; 2) many PT/PTA's cite cost as a major reason for letting membership lapse; 3) SPT's and SPTA's place tremendous emphasis on the importance of having academic faculty demonstrate the professional and financial value of membership; 4) SPT's and SPTA's cite that many of their clinical instructors are not APTA members and do not support the importance of membership; 5) the majority of PT's/PTA's do not regularly access the KPTA/APTA's website or fully utilize member benefits, and 6) students typically access the websites only for academic assignments.

Importance to Members: Understanding potential and real barriers to initial membership and retention of members may help to increase and retain members. It appears that students recognize the critical role that academic and clinical educators have in introducing and demonstrating the importance and value of professional membership. APTA/KPTA should identify ways to improve their websites to make them more user friendly and relevant to professional and student members. Continued efforts are needed to assist practicing clinicians and students of academic programs understand the importance of membership in helping to advance the profession and make Vision 2020 a reality.

KEYWORDS: Physical Therapy, Membership, Survey.

PRESENTER: Wagner, Barbara

TITLE: The Impact of an Immersion Experience on the Perceptions and Attitudes of Interdisciplinary Education in PT and OT Students: Project Guadalajara

PRESENTATION TYPE: Poster

SECTION: Health Policy & Administration

Abstract

ABSTRACT BODY:

Purpose : The purpose of this study was to examine changes in student perceptions as a result of interdisciplinary education. The context for the study was the interdisciplinary immersion experience that occurred during a University sponsored service learning trip to Guadalajara Mexico. In this study, students participated in pediatric clinical observation and practice in a hospital, school and community settings. This immersion experience which involves teams of students solving "real world" clinical problems provides the best foundation for developing and changing interdisciplinary perceptions and attitudes.

Description : The Interdisciplinary Education Perception Scale (IEPS) was administered in a pre-test/post-test format. The content of this scale is designed to measure the professional perceptions of students exposed to interdisciplinary settings relative to their own professions and other allied health disciplines. Following the experience, the Course Description was administered. The Course Description is a semi projective technique for assessing student's reactions to educational experiences.

Summary of Use : 23 students participated, 16 PT students (4th and 5th year) and 7 OT students (3rd and 4th year). All were all full time students at a University in northeast PA.

The response rate was 78% overall with the individual response rate for PT students at 75% and for OT students at 86%;

Results:

* Overall for entire group, there was a significant difference between pretest and posttest, $p=.183$, ($p \geq .05$)

* The IEPS results can be further categorized into the four separate components

1. Competency and autonomy; 2. Perceived need for cooperation; 3. Perception of actual cooperation; 4. Understanding others' values

* For this cohort, there was a significant change in perceived need for cooperation, $p=.186$, ($p \geq .05$)

* The result of the other components were not statistically significant

* The authors feel that the results are reflective of the entire population of students who participated in this experience

Post international experience, students completed a reflective response to the Course Description. A content analysis of the reflective responses was conducted to derive 2 scores. "Evaluative tone" scores indicated that students attributed a predominantly positive value to the experience. "Impact" scores indicated that students felt a sustained impact for personal change as a result of this experience.

Importance to Members: This study provided evidence as to the positive impact of interdisciplinary educational endeavors as part of this international service learning experience. The tools utilized by these authors can be utilized for program evaluation. This project demonstrates one method of successful integration of collaboration into the education of entry-level PT and OT practitioners

KEYWORDS: Interdisciplinary, International, collaborative learning.