

**2000 Robert G. Dicus Award**

**Acceptance Speech**

**Michael Weinper, MPH, PT**

**Broadmoor Hotel Colorado Springs, CO**

**October 28, 2000**

Mr. President, Distinguished Board of Directors, Awards Committee members, fellow Section members, and guests, I am deeply moved as I accept the 2000 Robert G. Dicus Award.

Sincerely, this is one of those moments that I will forever remember. You know what I mean; life events, we all have them: starting school, a first date, graduations, weddings, the birth of our children and, for some of us here tonight, even grandchildren. Special memory moments, for all time, etched in one's mind. I appreciate your being here tonight as I am honored as the recipient of the 2000 Robert G. Dicus award.

Like those who have also been so honored with this award can attest, this is truly the highlight of one's career. I truly believe each and every one of the previous Dicus winners would agree that all this attention is a bit embarrassing. We've made these contributions to the profession out of our love for Physical Therapy and a feeling of duty, to give something back for all we have received, as benefits from our involvement. In other words, we've already been rewarded. No one person stands before you having received this distinction, without the support, love, and sacrifices of many truly important "people behind the scenes." Please allow me a few moments to recognize them at this time.

Both my parents are responsible for me being here this evening, not just by their giving me life, but by virtue of the values they instilled in me. That result stands humbly before you, this evening.

My father passed away in 1977, shortly after the opening of my private practice. He was proud to see his son enter the world of entrepreneurialism. My Dad spent his life as a professional musician, working hard in his profession, to make ends meet for our large family. Of course, I wanted to follow in his footsteps and he said, "no way, for *you* need to be in a profession helping people." For that very reason, I can not, even to this day, read a note of music or play any musical instrument. Early in my college life, my mother, a nurse, suggested to me that I might become a Physical Therapist - a career of which I had no knowledge. Upon future examination and, after volunteering at a local veteran's hospital, I knew my career path was set. Mom passed away last year, but will always be in my heart. She was proud of me and I of her.

To my dearest daughters, Amy and Tracy, who are with me tonight, and to their Mother, Joyce, who made numerous sacrifices as I did what I believed needed to be done, won't you please join me in showing your appreciation to them. Each of you has made contributions to my success, for which I'll always be grateful. I share this award with you and I love you both and most of all, I love you!

To my wife, Ryan Sally King Weinper, for your love, your support, patience, and your guidance, in helping me do "the right thing." I love you and I share this award with you, dear.

As Francis mentioned during his introduction, Ruth Gomez, my partner in our clinical practice, has been with me since the very beginning. Ruth has been generous, beyond words, in allowing me the freedom to be involved in our profession. She, too, has served in the role of confidant, advisor, and all-around supporter of my efforts. Thank you, Ruthie. You deserve to be acknowledged for always being there for me. I share this Dicus Award with you.

Unfortunately, my former partner in PTPN, Fred Rothenberg, who retired two years ago, could not be here with us this evening. However, his daughter, Nancy, who serves as the chief operating officer of

PTPN, is with us tonight. Believe me when I say, without Nancy, I would never have been so successful with the PTPN venture. For you see, Nancy is my alter-ego. She's the one that keeps me on target through all we do at PTPN. Also here tonight are several important members of our PTPN management team: Elise Latawiec, our Director of Quality Assurance; Jeff DeGrandpre, Sales and Marketing Director, and Lisa Burroughs, Network Development and National Contracting Manager. These folks are the keys to our success at PTPN. I hold you all in high esteem and share this award with you.

Next is Stevyn Voyles, my vice president of operations for my clinical practice, PROGRESSIVE PHYSICAL THERAPY. For over ten years, Stevyn has kept the clinical ball rolling and is the one that takes care of everything that must be done in running a business. She truly is another shining star in my life. I share this award this evening with you and all of our Progressive Physical Therapy Associates!.

In addition, I would like to note a few of my mentors, who, although not present with us this evening, have greatly influenced me throughout my career. They include: Mary Ellen Etherington and Mary Bennett, my first P.T. educators, Charles Magistro, the first Dicus Award winner; Dick Matthews, a former member of the Section's Board of Directors; Patty Evans, a leader, educator and Futurist; Marilyn Moffit, known to most of us and former president of our association; and Lucy Buckley, a true leader and fellow recipient of the Dicus award. Also, two special colleagues I consider friends have traveled here just for this evening. Many thanks Don Jackson and Sue Michlovitz for being here. I'm sure I'm leaving out many that I should be recalling, at this moment. Please forgive me.

There has been another well-kept secret of my success. Over the last ten years, I have been a member of a study group, or round table, if you will, the likes that have included Al Amato, Tom Carlson, Jerry Connolly, Gini Davis, Helene Fearon, Jay Goodfarb, Francis Guglielmo, Ben Johnston, Carole Lewis, Mary Jo Marino and Rick Shutes. Al, Tom, Helene, Jay Francis and Ben have

preceded me in being honored with this Dicus Award. This group has met periodically to discuss what works and what doesn't work in private practice and to share a common concern for the future of our profession. I am so lucky to have these people in my life, and I want to take this opportunity to express my humble appreciation to each of them. This award is a tribute to their leadership abilities and the wealth of knowledge they have bestowed on me throughout the years. Thank you so very much to each and every one of you, present or not, who have been my true support system throughout my career,

I'd like to recall the words of the first Dicus Award winner, Charles Magistro, who, in 1996, at this very occasion, on the 40<sup>th</sup> anniversary celebration of the Section, remembered Bob Dicus, and I quote: "I have always stressed, how important it was, for those who receive this award, that it not lose its significance, or we allow the passage of time to erode our memories of Bob. Those of us who knew Bob well, have an obligation to make certain that we pass on the legacy of this man to those who follow in our footsteps. Future recipients of this award must have a sense of knowing the individual, who, in reality, was a father of the Private Practice Section." I agree with Charles. Therefore, I would like to spend just a few minutes to tell you about this remarkable man.

I was privileged to know Bob Dicus, first when I was a PT student and during the early, impressionable years of my career. Charles Magistro, suggested to me that I meet his dear friend who lived not far from campus. He suggested I might learn some wisdom, from his buddy, who was now confined to a wheel chair and was respirator-dependent. Curiously, I sought Bob out and met with him to learn the secrets of his success. Bob had been an early, private practitioner and, in fact, was some years earlier one of the founders of PPS, then known as the self-employed section,. I remember his pride in the role he played in the early years of private practice, which would sadly be cut short by amyotrophic lateral sclerosis, which had earned the moniker "Lou Gehrig's disease. Bob had been diagnosed in 1962 and yet did not allow that to slow him down. When I met him, eight years later, he was still active in running a motion picture company called Cinema Pictures, Inc.,

which developed short subjects on various medical and educational themes. That was not enough. He also developed the Western Independent Living Foundation with the purpose of employing the disabled, including some of his post-polio patients, in an effort to allow them to lead productive and independent lives. This change artist was not yet finished with his work, and, in 1968, he co-founded the ALS Society, which later became known as the ALS Association. In 1975, at the APTA Annual Conference in Anaheim, Bob was awarded honorary membership in the APTA. Some select company, also honored by our association, includes such notables as James Ceriax, Jacquelyn Perry, Albert Savin and Jonas Salk, but to mention a few. Yes, I'm proud to say that Bob Dicus was one of my mentors and he instilled in me the ethic that we must, each, in our own way, make a contribution back to society. Now, you can perhaps understand why, tonight, this award has even greater meaning to me.

Just as Bob Dicus was driven by goals, I, too, am goal-oriented. I'd like to share my philosophy with you this evening, in this regard.

Consider this: ***a goal without a plan is just a dream.*** We all have them, be they fleeting thoughts or the kind we share with others or commit to paper. Isn't a goal an attempt to create change? How many of us are thrilled with change? We work to maintain the status quo; our looks, our career, our families and just about everything.

But change, like gravity, cannot be avoided; it is going to happen in all aspects of our lives. So why do we often resist change? Perhaps because our level of comfort is in jeopardy. We like things to be predictable, but life just isn't that way. Famous management educator, author and all around business Guru Peter Drucker says it succinctly: ".....***the best way to predict the future is to create it!*** Can't get any simpler than that!

In 1983, managed care raised its (some would say, ugly) head to change the delivery of healthcare in ways unlike ever before. I hail from California, birthplace of PPO's. As a private practitioner, it became abundantly clear to me that we were on the outside of a system designed to selectively contract with some, but not all, providers. My early investigations revealed that insurance companies had not included private-practicing therapists in their system design. After all, I was told, "PT is provided in hospitals and some physicians' offices." They did not see a need for you or me in their system. Talk about fear, I saw all that I had done to create a private practice to be in jeopardy. Right then and there, I created a goal: my goal was simply to survive in a managed-care world. But, remember, "a goal without a plan is just a dream." So, I put a plan into action. I was fortunate to find, and partner with, Fred Rothenberg, one of the creators of the PPO concept. I brought him this idea to create a specialty organization for PT's. I'll never forget his words: ..... "What a stupid idea." Well, fortunately, that was only his first reaction. Three weeks later, we were designing the first specialty PPO in the country. As we each had other business responsibilities, he, a consultant for various Blue Cross and other insurance companies, and I, my clinical practice, the plan had to be developed evenings and weekends over our respective dining room tables. Our brainstorming looked at the concept from Fred's payer's eyes and my vantagepoint as an independent therapist. Our goal was to create an entity that would meet both the payer's and the provider's needs. But, would either side buy into our concept? That remained to be seen. Test marketing revealed an interest from both sides in this yet untried concept. I won't burden you this evening, with some of our trials and tribulations as we attempted to get this thing off the ground, but we held our collective breaths when we launched the Physical Therapy Provider Network early in 1985. Those 118 Private-Practice PT's who put their trust in us are the ones who made it happen. If you are a charter member of PTPN, please stand so others can see those of you who shared my vision. I'll always be grateful for the trust you placed in me as we rolled out our new concept. I share this Dicus Award with you!

Back then, we never conceived PTPN, as it is known today, would operate in 23 states consisting of over 1000 practices, nor did it ever occur to us that occupational therapy and speech pathology services would also be part of the scope of PTPN.

Fast forward to 1992. The California Chapter of the American Physical Therapy Association created a long-range planning task force, on which I served. We were to draft a long-range plan and, in the process, gaze into that magical crystal ball that tells the future and determine what the role of the physical therapist will be in the year 2010 that would later be used to create APTA's Vision Statement for PT 2020. I wish I had the time to focus on the various aspects of the plan, but it just isn't possible this evening. Suffice to say that, of the eighteen points identified as benchmarks of practice in the year 2000, today we have achieved only half of those goals. There is much work to be done if we are to achieve the vision as we describe as being present in the year 2010. Let me share with you how this group believed you'll be practicing, only ten years from now. Mind you, we're half-way through that timetable.

It's 2010, and Physical Therapists evaluate and diagnose conditions, perform specialized treatment procedures and work in teams of physical therapists and physical therapists assistants. Next, physical therapists initiate services subsequent to their own evaluation and **diagnosis** with or without referral from or diagnosis by another practitioner - something we have yet to attain. Most physical therapists are anticipated to be in independent practice configurations with associate or partnership relationships and most of those Physical Therapists have limited or full practice privileges in the institutional setting, such as hospitals. The majority of Physical Therapists will be board certified clinical specialists, who are recognized and sought out by the consuming public and third-party payers. Physical Therapists, ten years from now, will be able to follow the patient through a variety of clinical settings over the patient's episode of care. For example, Physical Therapists might see the patient, who has been hospitalized, and then continue to care for them following discharge to an ambulatory setting.

In 2010, payers will recognize Physical Therapists as diagnosticians and, more importantly, as an entry point into the health care system, which, as we all know, is not the case today. In the area of education, just as today's graduates are entering primarily at the master's degree level, the professional doctorate will be the standard professional educational level. Instead of 24 weeks of internship as experienced by today's graduate's, internships will last one year. On the research front, many physical therapists will be involved in clinical and basic research to establish a database of information regarding the efficacy of physical therapy diagnostic and treatment procedures. You see, there will be.....just as there has been over the last 30 years that I have been a physical therapist, a dramatic growth, or call it change, in our field. Will these predictions come true? The challenge is ours to make it happen. Not my challenges or yours, but rather ours!

Back in the late 60's, when I was a student at UCLA, John Wooden ruled the college basketball world. Of course, he did it with great talent, including the likes of Lew Alcindor, later to be known as Kareem Abdul-Jabbar. But, I would say the talent he coached would not have been as successful in their accomplishments on the basketball court, had they not had that famous coach instill life's truly important lessons as part of their training. Wooden once said, "***it is easy to be mistake-free if you do nothing, but, being a doer, means making changes.***" Few of us, in our field, take chances. I'd suggest you explore your options: challenge the status quo! Justify the efficacy of what we do for our patients. Measure changes created by your clinical intervention. Don't be complacent. Look challenge right in the eye for what it is.....an opportunity to grow, not just for yourself, but for the professional I love and I know you love, as well.

Need more convincing? Well, I have described some of the challenges that face us as we look to the future. Some equate challenges with adversity. Can you thrive in the age of adversity? At least one popular author, Paul Stoltz, with his best seller "Adversity Quotient" or "AQ" believes you can turn obstacles into opportunities. He compares achieving success to the challenge of climbing a



mountain. He describes three types of people whom we encounter along our journey up the mountain. These individuals have different responses to the ascent and, as a result, enjoy varying levels of success in their lives. He calls these three types *quitters, campers, and climbers*. **Quitters**, by definition, lead compromised lives. They have abandoned their dreams and have selected what they perceive to be a flatter, easier path. The irony, of course, is that as life wears on, the quitter suffers a far greater pain than that which they attempted to avoid by climbing the mountain. On the other hand, **Campers** are folks that go only so far and say "this is as far as I can go, or want to go" worried from their attempts to climb the mountain, they terminate their ascent and find a smooth, comfortable place from which to hide from adversity and there they choose to sit out their remaining years. Unlike quitters, they have at least accepted the challenge partway and gained some ground. But, I suggest that you will be most happy, and satisfied, if you join the ranks of **Climbers**. Regardless of the background, advantages or disadvantages, misfortune or good fortune, they continue the ascent. Stoltz calls them "energizer bunnies of the mountain." Climbers often have a strong faith in something bigger than themselves. The word **quit** is not part of their vocabulary. Oh yes, setbacks will come and go, but they carry on with courage and discipline; that is not to say that they don't grow weary as they climb the mountain. At times, they may have doubts or feel lonely, but somehow they reach deep and rejuvenate themselves as they move closer to the peak. It is the climbers that make things happen, they, unlike the other two types, work with a vision. If one path doesn't work, they retrace and regroup and try a different path, ever seeking the top. Which type are you? I'd suggest you might wish to pick up a copy of Adversity Quotient and take the test within, to determine the answer. And, if you find that you are not a climber, it is not too late to change – and achieve the satisfaction in your career you so justly deserve. Yes, you might get it wrong the first time you try something, but you will also learn something by doing, and most likely, you'll create new opportunities for success: Outcomes that I never dreamed would come true, have become reality, because I believed there was a silver lining in those dark clouds.

Let me share with you some a current example of change in our field. Most of us can remember the days when our big threat was POPTS (Physician Owned Physical Therapy Services). Due to federal regulations, promulgated by Congressman Pete Stark, there was a period of time when physicians were forced to abandon this practice out of which arose the corporate raiders - or consolidators - who also looked to acquire many of our friends and colleagues. Where are they today? Now that the trend has died down, our latest threat is, low and behold, something we'll now called PISRS (Physician In Self Referral Situations). I think PISRS is a more appropriate acronym than POPTS, anyway, so let's make that our new battle cry of change...."eliminate PISRS," through community awareness and public embarrassment, perhaps we - that's you and I - can make an impact to eliminate these inherent conflicts of interest that exist in the healthcare system.

In closing, let's remember we are the change artists who can paint the picture of the future. The canvas without the artist is only a canvas. You and I are responsible to paint that canvas of the future. I challenge you to create meaningful change; in other words "paint the picture of the future of P.T. that will benefit not only our patients, but our future colleagues, who will inherit the results of our efforts and will perhaps, someday, be Dicus Award recipients.

I am truly humbled by this award; I am forever appreciative to you for all you do to "make me look good" and I promise to continue to my efforts in the spirit of Bob Dicus to create change, hopefully for the betterment of our profession and the patients we serve.

Thank you so very, very much for this memory moment that will be forever etched in my mind.

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