

Direction And Supervision of The Physical Therapist Assistant



HOD P08-22-09-11 [Amended HOD P06-18-28-35; HOD P06-05-18-26; HOD 06-00-16-27; HOD 06-99-07-11; HOD 06-96-30-42; HOD 06-95-11-06; HOD 06-93-08-09; HOD 06-85-20-41; Initial HOD 06-84-16-72/HOD 06-78-22-61/HOD 06-77-19-37] [Position]

Physical therapist services are always provided directly by the physical therapist and with responsible utilization, direction, and supervision of the physical therapist assistant when appropriate. The physical therapist assistant is the only individual who assists a physical therapist in the provision of physical therapist services and is licensed or certified in the jurisdiction in which they work. The use of other support personnel, whether in the performance of tasks or clerical activities, relates to the efficient operation of the physical therapy service.

Physical therapists shall provide safe, accessible, cost-effective, and evidence-based services. The physical therapist is responsible for patient and client management including examination, evaluation, diagnosis, prognosis, intervention, and outcomes. When the physical therapist utilizes a physical therapist assistant to perform components of intervention and collect selected examination and outcomes data, collaboration, as defined in the Core Values for the Physical Therapist and Physical Therapist Assistant, between the physical therapist and physical therapist assistant is essential.

Regardless of the setting in which the physical therapist service is provided, the following actions must be conducted, and responsibilities must be borne solely by the physical therapist:

1. Interpretation of referrals when available.
2. Initial examination and reexamination.
3. Evaluation, diagnosis, and prognosis.
4. Development or modification of a management plan and plan of care, which is based on the initial examination or reexamination and includes the physical therapy goals and outcomes.
5. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render services and when it may be appropriate to utilize the physical therapist assistant.
6. Revision of the management plan and plan of care when indicated.
7. Conclusion of an episode of care.
8. Responsibility for any "hand off" communication.
9. Oversight of all documentation for services rendered to each patient or client.
10. Consultation.

The physical therapist remains responsible for physical therapist services provided when the physical therapist's management plan and plan of care involves a physical therapist assistant. Regardless of the setting in which the service is provided, the determination to utilize a physical therapist assistant as part of the patient's or client's interprofessional services team requires the education, expertise, and professional judgment of a physical therapist as described by the Standards of Practice for Physical Therapy, the Code of Ethics for the Physical Therapist, and the APTA Guide for Professional Conduct.

In determining the appropriate extent of assistance from and collaboration with the physical therapist assistant, the physical therapist considers:

- The physical therapist assistant's education, training, experience, and skill level.
- Patient or client criticality, acuity, stability, and complexity.
- The predictability of the consequences.
- The setting in which the care is being delivered.
- Federal and state statutes, and rules or regulations.
- Liability and risk management concerns.

- The mission of physical therapist services for the setting.
- The needed frequency of reexamination.

Services provided by the physical therapist assistant must be consistent with safe and legal physical therapist practice and shall be predicated on the following factors: complexity and acuity of the patient's or client's needs; proximity and accessibility to the physical therapist; supervision available in the event of emergencies or critical events; and type of setting in which the service is provided. The physical therapist assistant makes modifications to elements of the intervention either to progress the patient or client as directed by the physical therapist or to ensure patient or client safety and comfort.

The physical therapist is directly responsible for the actions of the physical therapist assistant in all practice settings. The physical therapist assistant shall provide services under the direction and at least general supervision of the physical therapist. In general supervision, the physical therapist is not required to be on site for direction and supervision but must be available at least by telecommunication. The ability of the physical therapist assistant to provide services shall be assessed on an ongoing basis by the supervising physical therapist.

When supervising the physical therapist assistant in any offsite setting, the following requirements must be observed:

1. A physical therapist must be accessible by telecommunication to the physical therapist assistant at all times while the physical therapist assistant is providing services to patients and clients.
2. There must be regularly scheduled and documented collaboration with the physical therapist assistant regarding patients and clients, the frequency of which is determined by the needs of the patient or client and the needs of the physical therapist assistant.
3. In situations in which a physical therapist assistant is involved in the care of a patient or client, a supervisory visit by the physical therapist:
 - a. Shall be made upon the physical therapist assistant's request for a reexamination, when a change in the management plan or plan of care is needed, prior to any planned conclusion of the episode of care, and in response to a change in the patient's or client's medical status.
 - b. Shall be made at least once a month, or at a higher frequency when established by the physical therapist, in accordance with the needs of the patient or client.
 - c. Shall include:
 - i. An onsite reexamination of the patient or client.
 - ii. Onsite review of the plan of care with appropriate revision or termination.
 - iii. Evaluation of need and recommendation for utilization of outside resources.

Explanation of Reference Numbers:

HOD P00-00-00-00 stands for House of Delegates/month/year/page/vote in the House of Delegates minutes; the "P" indicates that it is a position (see below). For example, HOD P06-17-05-04 means that this position can be found in the June 2017 House of Delegates minutes on Page 5 and that it was Vote 4.

E: Binding Ethical Document | P: Position | Y: Policy

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