Physical therapists have a responsibility to deliver services in ways that protect the public safety and maximize the availability of their services. They do this through direct delivery of services in conjunction with responsible utilization of physical therapist assistants who assist with selected components of intervention. The physical therapist assistant is the only individual permitted to assist a physical therapist in selected interventions under the direction and supervision of a physical therapist.

Direction and supervision are essential in the provision of quality physical therapy services. The degree of direction and supervision necessary for assuring quality physical therapy services is dependent upon many factors, including the education, experiences, and responsibilities of the parties involved, as well as the organizational structure in which the physical therapy services are provided.

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

1. Interpretation of referrals when available.
2. Initial examination, evaluation, diagnosis, and prognosis.
3. Development or modification of a plan of care which is based on the initial examination or reexamination and which includes the physical therapy goals and outcomes.
4. Determination of when the expertise and decision-making capability of the physical therapist requires the physical therapist to personally render physical therapy interventions and when it may be appropriate to utilize the physical therapist assistant. A physical therapist shall determine the most appropriate utilization of the physical therapist assistant that provides for the delivery of service that is safe, effective, and efficient.
5. Reexamination of the patient/client in light of their goals, and revision of the plan of care when indicated.
6. Establishment of the discharge plan and documentation of discharge summary/status.
7. Oversight of all documentation for services rendered to each patient/client.

The physical therapist remains responsible for the physical therapy services provided when the physical therapist’s plan of care involves the physical therapist assistant to assist with selected interventions. Regardless of the setting in which the service is provided, the determination to utilize physical therapist assistants for selected interventions requires the education, expertise, and professional judgment of a physical therapist as described by the Standards of Practice, Guide to Professional Conduct, and Code of Ethics.

In determining the appropriate extent of assistance from the physical therapist assistant (PTA), the physical therapist considers:

- The PTA’s education, training, experience, and skill level.
- Patient/client criticality, acuity, stability, and complexity.
- The predictability of the consequences.
- The setting in which the care is being delivered.
- Federal and state statutes.
- Liability and risk management concerns.
- The mission of physical therapy services for the setting.
- The needed frequency of reexamination.

Physical Therapist Assistant

Definition
The physical therapist assistant is a technically educated health care provider who assists the physical therapist in the provision of physical therapy. The physical therapist assistant is a graduate of a physical therapist assistant associate degree program accredited by the Commission on Accreditation in Physical Therapy Education (CAPTE).

Utilization
The physical therapist is directly responsible for the actions of the physical therapist assistant related to patient/client management. The physical therapist assistant may perform selected physical therapy interventions 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 telecommunications. The ability of the physical
therapist assistant to perform the selected interventions as directed shall be assessed on an ongoing basis by the
supervising physical therapist. The physical therapist assistant makes modifications to selected interventions either to
progress the patient/client as directed by the physical therapist or to ensure patient/client safety and comfort.

The physical therapist assistant must work under the direction and at least general supervision of the physical therapist. In
all practice settings, the performance of selected interventions 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/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.

When supervising the physical therapist assistant in any off-site setting, the following requirements must be observed:
1. A physical therapist must be accessible by telecommunications to the physical therapist assistant at all times while
   the physical therapist assistant is treating patients/clients.
2. There must be regularly scheduled and documented conferences with the physical therapist assistant regarding
   patients/clients, the frequency of which is determined by the needs of the patient/client and the needs of the physical
   therapist assistant.
3. In those situations in which a physical therapist assistant is involved in the care of a patient/client, a supervisory visit
   by the physical therapist will be made:
   a. Upon the physical therapist assistant's request for a reexamination, when a change in the plan of care is
      needed, prior to any planned discharge, and in response to a change in the patient's/client's medical status.
   b. At least once a month, or at a higher frequency when established by the physical therapist, in accordance with
      the needs of the patient/client.
   c. A supervisory visit should include:
      i. An on-site reexamination of the patient/client.
      ii. On-site review of the plan of care with appropriate revision or termination.
      iii. Evaluation of need and recommendation for utilization of outside resources.

Relationship to Vision 2020: Professionalism; (Practice Department, ext 3176)

Explanation of Reference Numbers:
BOD P00-00-00-00 stands for Board of Directors/month/year/page/vote in the Board of Directors Minutes; the "P"
indicates that it is a position (see below). For example, BOD P11-97-06-18 means that this position can be found in the
November 1997 Board of Directors minutes on Page 6 and that it was Vote 18.