Supervision of PTA, PT aides and Students.

Definitions

DIRECT SUPERVISION: Means the Physical Therapist is physically present on the premises and immediately available for direction and supervision. The Physical Therapist will have DIRECT CONTACT WITH THE PATIENT DURING EACH VISIT. Telecommunications does not meet the requirement for direct supervision.

ONSITE SUPERVISION: Means the supervising Physical Therapist is onsite and present in the department or facility where services are provided, is immediately available to the person being supervised, and maintains continued involvement in appropriate aspects of each treatment session in which supportive personnel are involved in components of care.

DELEGATION OF RESPONSIBILITY: When a Physical Therapist delegates patient care responsibilities to a PTA or Aide the Physical Therapist HOLDS RESPONSIBILITY for supervision of the PT program. Adequate supervision requires at a minimum that the Physical Therapist perform the following activities:

1) Designate or establish channels of written and oral communication.
2) Interpret available information concerning the individual under care.
3) Provide initial evaluation.
4) Develop plan of care, including short-term and long term goals.
5) Select and delegate appropriate tasks for plan of care.
6) Assess competence of supportive personnel to perform assigned tasks.
7) Direct and supervise supportive personnel in delegated tasks.
8) Identify and document precautions, goals, anticipated progress, and plans for reevaluation.
9) Reevaluate, adjust plan of care when necessary, perform final evaluation, and establish follow up plan of care.

Supervision of the Physical Therapist Assistant: The Physical Therapist Assistant shall perform specific physical therapy duties under the supervision of a Physical Therapist who is properly CREDENTIALED IN THE JURISDICTION in which the PTA practices.

Supervision of PTA in Home Health, Long Term Care and School Setting:

1) A qualified Physical Therapist must be ACCESSIBLE by communication to the PTA AT ALL TIMES while the PTA is treating the patient.
2) An initial visit must be made by a qualified Physical Therapist for evaluation of the patient and establishment of a plan of care.
3) A joint visit by the Physical Therapist and the PTA or a CONFERENCE between the PT and PTA must be made PRIOR TO OR ON the first visit to the patient. THE PHYSICAL THERAPIST MUST COMPLETE THE INITIAL EVALUATION.
4) At least ONCE EVERY SIXTH PTA VISIT or at least ONCE EVERY THIRTY CALENDAR DAYS, WHICHEVER COME FIRST, the Physical Therapist must visit the patient.
Supervision of the PTA in hospitals or other clinical settings

1) Require constant onsite supervision
2) A joint treatment with the PT and PTA or a direct treatment by the PT with a conference between the PT and PTA must occur at least ONCE PER WEEK.

Physical Therapy Aides

1) Carry out established procedures for the care of equipment and supplies
2) Prepare, maintain and clean up treatment areas and maintain a supportive area.
3) Transport patients, records, equipment and supplies in accordance with established policies and procedures.
4) Assemble and disassemble equipment and accessories.
5) UNDER THE DIRECT SUPERVISION of a Physical Therapist, assist in preparation for and perform routine tasks as assigned. (this supervision may extend to offsite supervision of the aide only when the physical therapy aide is accompanying and WORKING DIRECTLY with a PTA WITH A SPECIFIC PATIENT or when performing non-patient related tasks)

IF AIDES OR STUDENTS PROVIDE PHYSICAL THERAPY SERVICES OTHER THAN UNDER DIRECT SUPERVISION OF A LICENSED PHYSICAL THERAPIST, THEY ARE IN VIOLATION OF NORTH DAKOTA CENTURY CODE 43-26.1