- WAC 246-915-181 Supervision responsibilities. A physical therapist is professionally and legally responsible for patient care given by assistive personnel under his or her supervision. If a physical therapist fails to adequately supervise patient care given by assistive personnel, the board may take disciplinary action against the physical therapist.
- (1) Regardless of the setting in which physical therapy services are provided, only the licensed physical therapist may perform the following responsibilities:
 - (a) Interpretation of referrals;
- (b) Initial examination, problem identification, and diagnosis for physical therapy;
- (c) Development or modification of a plan of care that is based on the initial examination and includes the goals for physical therapy intervention;
- (d) Determination of which tasks require the expertise and decision-making capacity of the physical therapist and shall be personally rendered by the physical therapist, and which tasks may be delegated;
- (e) Assurance of the qualifications of all assistive personnel to perform assigned tasks through written documentation of their education or training that is maintained and available at all times;
- (f) Delegation and instruction of the services to be rendered by the physical therapist, physical therapist assistant, or physical therapy aide including, but not limited to, specific tasks or procedures, precautions, special problems, and contraindicated procedures;
- (g) Timely review of documentation, reexamination of the patient, and revision of the plan of care when indicated;
 - (h) Establishment of a discharge plan.
- (2) If patient care given by the physical therapist assistant, or other assistive personnel, supervision by the physical therapist requires that the patient reevaluation is performed:
- (a) The later of every fifth visit or every thirty days if a physical therapist has not treated the patient for any of the five visits or within the thirty days;
- (b) When there is any change in the patient's condition not consistent with planned progress or treatment goals.
- (3) Patient reexamination means the licensed physical therapist shall physically observe and interview the patient and reexamine the patient as necessary during an episode of care to evaluate progress or change in patient status and modify the plan of care accordingly or discontinue physical therapy services.
- (4) For patient reevaluations the licensed physical therapist shall at a minimum visually see the patient.
 - (5) Supervision of assistive personnel means:
- (a) Physical therapist assistants may function under direct or indirect supervision;
- (b) Physical therapy aides shall function under direct supervision at all times. Other assistive personnel must function under direct supervision when treating a patient under a physical therapy plan of care:
- (c)(i) Except as provided in (c)(ii) of this subsection, at any one time, the physical therapist may supervise up to a total of three assistive personnel, who may be physical therapist assistants, other assistive personnel, or physical therapy aides. If the physical therapist is supervising the maximum of three assistive personnel at any one time, no more than one of the assistive personnel may be a physical therapy aide. The physical therapist has the sole discretion,

based on the physical therapist's clinical judgment, to determine whether to utilize assistive personnel to provide services to the patient;

- (ii) A physical therapist working in a nursing home as defined in RCW 18.51.010 or in the public schools as defined in RCW 28A.150.010, may supervise a total of only two assistive personnel at any one time;
- (iii) In addition to the assistive personnel authorized in (c)(i) and (ii) of this subsection, the physical therapist may supervise a total of two persons who are pursuing a course of study leading to a degree as a physical therapist or a physical therapist assistant.

[Statutory Authority: RCW 18.74.023, chapter 18.74 RCW and 2018 c 222. WSR 20-06-029, \$ 246-915-181, filed 2/26/20, effective 3/28/20. Statutory Authority: RCW 18.74.023 and chapter 18.74 RCW, RCW 18.340.020. WSR 18-15-067, \$ 246-915-181, filed 7/17/18, effective 8/17/18.]