

## Supervision

### Standard

The physiotherapist is responsible and accountable for the physiotherapy services provided by personnel working under their **supervision (supervisees)**, and for providing appropriate supervision, in accordance with the patient's needs, supervisee's skills and competencies, identified risks, and the context of practice.

### Expected outcome

Patients can expect that they are informed of the roles and responsibilities of supervisees, have consented to services being provided by supervisees, and that the physiotherapy services provided by supervisees are supervised by the physiotherapist.

### Performance expectations

#### Related to All Supervision Activities

The physiotherapist:

- Ensures that the supervisee has the knowledge, skills, and judgement to deliver safe and competent care.
- Does not assign care to or provide supervision for a person with whom they have a **close personal relationship**.
- Communicates to patients the roles and responsibilities of supervisees participating in the delivery of physiotherapy services.
- Obtains patients' informed consent for the delivery of physiotherapy services by supervisees.
- Uses mechanisms (e.g., introduction, name tags) so that supervisees are readily identifiable.
- Employs direct or indirect supervision strategies appropriate to the competence of the supervisee, the patient's care needs, identified risks, and **other factors** related to the practice environment.
- Establishes ongoing and timely communication with supervisees.
- Monitors and evaluates the delivery of physiotherapy services by supervisees.
- Does not delegate controlled acts that the physiotherapist is not rostered to perform.

- Reassigns the supervision of supervisees when the physiotherapist is not available to supervise.

### **Related to the Supervision of Physiotherapist Assistants (PTAs)**

In addition to the general supervision requirements, the physiotherapist:

- Ensures that they are listed as a supervisor of PTAs on the College's Public Register.
- Assesses patients to determine those appropriate to receive physiotherapy services from PTAs.
- Assigns only those tasks/activities that the supervisor is competent to perform, and that fall within the PTA's competence.
- Is accountable for documentation prepared by PTAs, and monitors the documentation of physiotherapy services by PTAs to confirm that the documentation is consistent with the College's standards.
- Reassesses patients, adjusting or reassigning service delivery by PTAs as needed to meet patients' needs and achieve desired outcomes.
- Ensures that the PTA's name and job title appear on invoices whenever they have provided all or part of the treatment, along with the name of the supervisor.
- Maintains a written communication protocol with PTAs that states:
  - How and when they will discuss patient care with the PTA,
  - How to contact the supervising physiotherapist, and
  - How to contact the alternate supervisor if the supervising physiotherapist cannot be reached.
- Designates an alternate physiotherapist as a contact for PTAs when the supervisor is unavailable to fulfill their usual responsibilities, ensuring that the alternate supervisor:
  - Can assume responsibility for patient care and oversight of the PTA,
  - Has the required knowledge, skills, and judgement to perform the assigned care, and
  - Is available to intervene as per the communication protocol.
- Advises PTAs that delivery of physiotherapy services must be discontinued when the physiotherapist is not available to provide a level of supervision appropriate for the clinical context.

- Must not assign the following activities to PTAs:
  - Any controlled act that has been delegated to the supervising physiotherapist by another health professional.
  - The controlled acts of acupuncture, communicating a diagnosis, spinal manipulation, or internal assessment or internal rehabilitation of pelvic musculature<sup>1</sup>.
  - Interpretation of referrals, diagnosis or prognosis.
  - Initial discussion of treatment rationale, clinical findings and prognosis with patients.
  - Interpretation of assessment findings, determination of treatment procedures and treatment goals, and the planning, development or modification of treatment plans.
  - Discharge planning.
  - Any treatment that would require the PTA to employ clinical reasoning, analysis and decision making to change the established plan of care without the input of the supervising physiotherapist.

### **Related to the Supervision of Physiotherapy Students**

In addition to the general supervision requirements, the physiotherapist:

- Assesses patients to determine those appropriate to receive physiotherapy services from students.
- Assigns only those tasks/activities that the supervisor is competent to perform, and that fall within the student's competence.
- Monitors documentation of physiotherapy services by students to confirm that the documentation is consistent with the College's standards.
- Reassesses patients, adjusting or reassigning service delivery by students as needed to meet patients' needs and achieve desired outcomes.
- Ensures that the student's name and, if applicable, job title appear on invoices whenever they have provided all or part of the treatment, along with the name of the supervisor.
- Ensures that patient records and related documentation completed by a student include the student's name and status and the co-signature of the student's direct supervisor.

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<sup>1</sup> The controlled acts of administering a substance by inhalation and tracheal suctioning may be delegated provided the supervisor is rostered to perform these acts.

- Only delegates controlled acts with direct supervision until the student can perform the controlled act with a consistent level of competency.
- Must not delegate to physiotherapy students any controlled act that has been delegated to the supervising physiotherapist by another health professional.
- Advises students that delivery of physiotherapy services must be discontinued when the physiotherapist is not available to provide a level of supervision appropriate for the clinical context.

### **Related to the Supervision of Members of the College, such as Physiotherapist Residents or Other Physiotherapists**

In addition to the general supervision requirements, the physiotherapist:

- Ensures that the supervised member performs only those activities that the supervisor is competent to perform and supervise.
- Maintains records that demonstrate the adequacy of their supervision.

### **Definitions**

**Close personal relationship** – where the physiotherapist’s ability to be objective and impartial, and to fulfill their professional obligations may be impaired due to the nature of the personal relationship. Close personal relationships typically exist between an individual and their romantic or sexual partner, children, parents, and close friends, but may also exist between individuals and other relatives, business partners, past romantic partners and others.

**Controlled acts** are acts which may be performed only by authorized regulated health professionals under the *Regulated Health Professions Act, 1991* (RHPA). Controlled acts are considered potentially harmful if performed by someone who does not have the required knowledge, skill and judgment.

The *Physiotherapy Act, 1991* authorizes physiotherapists to perform specific controlled acts when providing services to patients. Physiotherapists who perform controlled acts under their own authority must roster for each of these activities with the College. These include:

- tracheal suctioning
- spinal manipulation
- acupuncture (including dry needling)
- treating a wound below the dermis

- pelvic internal exams (this includes putting an instrument, hand or finger, beyond the labia majora, or beyond the anal verge)
- administering a substance by inhalation

**Other factors** refer to additional considerations that may influence the level of supervision required in the practice environment, including factors that relate to:

- The patient, such as their needs, best interests, ability to communicate, and any relevant physical, health, mental, and social aspects,
- The environment, such as the availability of resources and workload demands, Physiotherapy treatment, such as the level of technical skill required, complexity of tasks, and potential risk of harm related to the intervention, and
- The physiotherapist, such as the ability to provide supervision, their scope of practice, and their individual sphere of competence.

**Physiotherapist Assistant (PTA)** – an individual who provides care on behalf of or under the direction of a registered physiotherapist. PTAs may have diverse educational backgrounds and levels of experience. In Ontario, there is no specific educational or licensing requirement for this role, and PTAs are not regulated as a distinct health profession.

**Supervisees** are individuals working under the supervision of a physiotherapist. This includes physiotherapist assistants (PTAs), physiotherapy students, physiotherapist residents, and other physiotherapists under supervision, who provide physiotherapy services within the scope of their competence.

**Supervision** refers to the oversight provided by a physiotherapist, who remains accountable and responsible for the care being delivered. Supervision may be direct or indirect, and involves guiding, monitoring, and ensuring appropriate patient care.