

**DEPARTMENT OF HEALTH
HEALTH REGULATION AND LICENSING ADMINISTRATION**

BOARD OF PHYSICAL THERAPY
AUTHORITY FOR GUIDANCE

September 8, 2021
DATE OF POLICY

21-001
POLICY NO.

POLICY STATEMENT

**GUIDANCE ON REMOTE SUPERVISION DURING THE COVID-19 PUBLIC
EMERGENCY**

EXTENSION

In light of the current Public Emergency (which is extended until October 8, 2021) the Board of Physical Therapy (Board) has adopted the following policy and offered this guidance related to the supervision of physical therapy practice in the District. The policy, No. 20-001, was in effect during calendar year 2020 and expired on December 31, 2020. This **policy statement, No. 21-001**, is now issued to extend the guidance **until July 31, 2022**. (While the “Public Health Emergency” expired on July 25, 2021, the District is currently in a “Public Emergency” until October 8, 2021. **Mayor’s Order 2021-096**.) Further guidance statements will be forthcoming to meet the evolving situation as it develops.

Under DC law, physical therapists (PTs) licensed in the District may practice independently; however, physical therapist assistants (PTAs) are allowed to practice only under supervision of a PT. Sections 6712.2 and 8209.2 of Title 17 of the District of Columbia Municipal Regulations (DCMR) provide that a PTA may perform certain functions only under direct supervision of a PT. In addition, although unlicensed, a PT student or a recent PT graduate with a pending license application are permitted to practice physical therapy but only under the direct supervision of a PT. 17 DCMR § 6711.5. Direct supervision is defined as “the supervision in which a physical therapist is personally present and immediately available within the treatment area to give aid, direction, and instruction when physical therapy procedures or activities are performed.” 17 DCMR § 6799.1

On March 11, 2020, Mayor Muriel Bowser declared a state of public health emergency in the District due to the threat of the COVID-19 pandemic. Mayor’s Order 2020-045. Following this declaration, the Mayor issued an order prohibiting mass gatherings of fifty (50) or more persons on March 16, 2020. Mayor’s Order 2020-048. On March 24, 2020, non-essential businesses were ordered closed. Mayor’s Order 2020-053. A stay-at-home order was issued on March 30, 2020, prohibiting District residents from leaving their home except for certain specified essential businesses. Mayor’s Order 2020-054.

As a result of these emergency restrictions, health care practitioners are forced to provide care through telehealth, which is used here to refer to a health care practice or provision of care or

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treatment in the District remotely through the use of communication technology. To support safe and effective telehealth practice, the Department of Health issued a Guidance dated March 12, 2020 (Guidance) to clarify the standards and requirements for tele-practice.

The Guidance stipulates that health care providers are permitted to deliver services to clients through the use of communication technology so long as they conform to the acceptable standards of care and comply with privacy requirements. For additional guidance, providers may consult 17 DCMR § 4618 (Telemedicine), which the Board now temporarily adopts as framework for tele-practice of physical therapy. Further, the Guidance provides that a practitioner may establish new patients via the use of real-time telehealth.

However, **practitioners seeking to practice telehealth to District clients must be properly licensed in the District.** An exception to this requirement applies to practitioners licensed in another jurisdiction who are “temporary agents” of the District in one of two ways: a) the practitioner is providing health care to individuals at a District licensed health care facility; or b) the practitioner is providing continued care based on an existing relationship to a client who returned to the District. Administrative Order No. 2020-02, dated March 13, 2020.

Based on the Guidance above, therefore, the Board has determined that PTs and PTAs licensed in the District may engage in telehealth practice including providing supervision via communication technology, provided that licensees comply with the applicable standards of care and privacy mandates as well as the provisions included in this Policy Statement. All other requirements for supervision remain in effect. Subject to the existing requirements as well as the provisions in this Policy Statement, supervision may be conducted via synchronous (telephone and video conferencing) and asynchronous (e-mail and text messaging) communication.

However, the requirement of “**direct supervision**” is hereby modified to permit, in addition to **in-person interaction, real-time, synchronous communication between the supervisor and the supervisee through the use of appropriate real-time technology such as telephone or audiovisual telecommunication.** The use of technology that does not involve real-time communication, such as e-mail or text messaging, while permissible as part of tele-practice and tele-supervision, does not constitute direct supervision.

It is important to note that direct supervision is required for PTAs as well as students and graduates with pending application. However, since students and graduates are not licensed, the levels of supervision required for their practice must necessarily be different from that required for PTAs. Accordingly, to ensure effective and safe practice by licensees and their supervisees, the Board requires compliance with the following guidelines:

1. Prior to adopting and engaging in tele-practice or tele-supervision, the supervisor must evaluate the benefits and limitations related to a given technology medium or platform to ensure the protection of clients’ privacy and confidentiality and ensure that the supervisee is able to use the chosen technology safely and effectively

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2. The PT is responsible for determining when tele-practice may be used, whether by the PT themselves or a supervisee, for effective assessment or treatment and when in-person practice is required.
3. The PT must obtain clear informed consent from the client with regard to the use of technology (including all known limitations and risks).
4. A PTA may engage in tele-practice with clients where both the PTA and the client are located in different locations, provided that the client is first seen and evaluated by the supervising PT. The PT is not required to be in the same location as the PTA but must be able to provide direct supervision – engaging in real-time, synchronous communication with the PTA – either immediately upon initiation of the request for supervision by the PTA or no later than fifteen (15) minutes after the initiation of the request. Both the supervisor and the supervisee must fully document all interactions with the client and all decisions made.
5. A physical therapy student (whether studying to be PT or PTA) or applicant with pending application may engage in tele-practice only if the client, the supervising PT, and the student or applicant are all in different locations and all parties are engaged simultaneously in real-time, synchronous communication. Alternatively, a student or applicant may engage in tele-practice with only the client in a different location while the supervising PT and the student or applicant are together in the same location.
6. A physical therapy aide MAY NOT engage in tele-practice and may perform allowable functions only while in the same physical location as the supervising PT and the client.

All inquiries pertaining to the practice of physical therapy, including the continuing education requirements, may be directed to the Board's Health Licensing Specialist, Mr. David Walker, at (202)727-1611 or David.walker2@dc.gov