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# The Wisconsin Physical Therapy Practice Act

## An Overview of the Statutes and Administrative Rules Governing PT Practice in Wisconsin

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Note to Participants: There are interactive pop-up questions throughout this lecture. If you choose to pause the lecture and return at a later time, a natural break time would be after answering the interactive questions. (You are able to pause at any time and the presentation will "remember" where you were. It's just a more natural time to pause after the interactive questions.) For your convenience, this outline reflects where/when within the lecture the interactive questions occur.

This lecture has 70 slides and is 98 minutes in duration.

### I. Course objectives

#### II. Understanding the DSPS website

- A. Navigating the website
- B. Statutes and annotations

#### III. Responsibilities of the PTEB

- A. Grant licenses to PTs and PTAs (Ch. 1, 2)
- B. Grant temporary licenses to PTs and PTAs (Ch. 3)
- C. Administer oral exams, when necessary (Ch. 2)
- D. Investigate alleged violations of the practice act
- E. Apply sanctions
  1. Deny licensure
  2. Reprimand
  3. Limit or suspend license
  4. Revoke license
- F. Create and distribute an annual report of disciplinary action taken against licensees
- G. Audit licensure renewals for evidence of continued competency
- H. Promulgate rules to administer the statute (Ch. 448, subchapter III)

#### IV. Composition of the PTEB

#### V. Statute vs. rules

- A. Statute
  1. Establishes policy
  2. Requires a bill to pass the State Assembly and State Senate, and be signed by the governor
- B. Rules
  1. Provide details and expertise to supplement, implement, and interpret legislation
  2. Have the force of law

Notes

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### 3. Procedure

- a. PTEB drafts scope statement
- b. Governor approves scope statement
- c. PTEB drafts rule
- d. Wisconsin Legislative Council Rules  
Clearinghouse reviews the proposal and holds a public hearing
- e. Rules go to Governor for approval
- f. Review by a committee in the Senate and in the Assembly
- g. Review by Joint Committee for the Review of Administrative Rules (JCRAR)
- h. JCRAR could approve rule, request modification, or submit bill objecting to rule

Notes

#### Interactive Questions — slide 22 @ 20 minutes

#### VI. Direct access: 448.56 and Chapter PT 6

- A. Referral not required
  1. Services in schools to children with disabilities
  2. Services as part of home health care agency
  3. Services as part of plan of care in a nursing home
  4. Services related to athletic activities, conditioning, injury prevention
  5. Services to individual with previously diagnosed condition, inform the healthcare provider who made the diagnosis
  6. Conditioning (in all environments)
  7. Injury prevention and biomechanics (all environments)
  8. Musculoskeletal injuries except acute fractures, avulsions
- B. Duty to refer if services needed beyond therapist's scope
- C. Duty to communicate back to referring entity
- D. Barriers to direct access
  1. Facility policies
  2. Third party payer reimbursement
  3. Consumer knowledge

#### Interactive Questions — slide 28 @ 31 minutes

#### VII. Restrictions on physical therapist practice

- A. 448.50(1r): Physical therapists cannot make a chiropractic or medical diagnosis
  - B. 448.50(4b): Physical therapy does not include using roentgen rays or radium for any purpose
  - C. 448.50(4b): Physical therapy does not include using electricity for surgical purposes, including cauterization
  - D. 448.50(4b): Physical therapy does not include prescribing drugs or devices
  - E. 448.522: Can't claim any joint manipulation is a chiropractic adjustment to correct a spinal subluxation
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VIII. Utilization and supervision: 448.56(6); Ch. PT 5

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- A. PTAs
  - 1. Delegate consistent with PTA education, training, experience
  - 2. Written policy/procedure for written and verbal communication
  - 3. Direct face-to-face contact every 14 calendar days
  - 4. Onsite patient assessment and re-eval every 10 treatment days or 1x/month
  - 5. Coordinate discharge plan and final assessment
  - 6. Supervise 2 PTA FTEs
- B. Unlicensed personnel (i.e., aide)
  - 1. Anyone not licensed as a PT or a PTA; may hold another license (massage therapist, athletic trainer)
  - 2. Determine and establish written verification of aide's competence to perform skills
  - 3. Direct all necessary parameters for completion of the delegated task
  - 4. Must provide on-premises supervision at all times (see def. PT 1.02(4))
  - 5. Must assess patient before and after treatment
  - 6. Max number of aides is four
- C. Total combined PTAs, aides, and PTs/PTAs with temporary licenses that can be supervised is four

Interactive Questions — slide 43 @ 50 minutes

IX. Professional behavior and ethics

- A. 448.50(5): Definition of sexual misconduct
  - 1. Cannot have even a consensual sexual relationship with a patient
    - a. Ch. PT 7: adult is a patient for 6 months after discontinuation of care
    - b. Ch. PT 7: minor is a patient until 2 years after age of majority
  - 2. Can't engage in even verbal conduct of a sexual nature with a patient
  - 3. Cannot look at a disrobed patient unless necessary for diagnosis or treatment
- B. 448.527: PTEB shall promulgate rules establishing a code of ethics
- C. Chapter PT 7: Unprofessional conduct
  - 1. Core values listed (PT 7.01(2))
    - a. Accountability
    - b. Altruism
    - c. Compassion/caring
    - d. Excellence
    - e. Integrity
    - f. Professional duty
    - g. Social responsibility

2. Obligation to act with:
    - a. Honesty
    - b. Compliance with law
    - c. Reasonable judgment
    - d. Competence
    - e. Respect for patient's dignity
  3. 7.025(2): Violation of PT Code of ethics
    - a. Respect dignity and rights
    - b. Trustworthy and compassionate
    - c. Sound professional judgments
    - d. Integrity
    - e. Fulfill legal and professional obligations
    - f. Lifelong learning
    - g. Promote organizational and business practices that benefit the patient
    - h. Address local, national, and global health needs
  4. 7.025(3): Violation of Standards of Ethical Conduct for the PTA
    - a. Respect dignity and rights
    - b. Trustworthy and compassionate
    - c. Sound decisions in collaboration with PT
    - d. Integrity
    - e. Fulfill legal and professional obligations
    - f. Lifelong learning
    - g. Promote organizational and business practices that benefit the patient
    - h. Address local, national, and global health needs
  5. Failure to provide adequate supervision to PTA/aide
  6. Incompetence or negligence, even if no harm results
    - a. Highest percentage of claims by injury type
    - b. Highest claim percentage by allegation
  7. Failure to obtain or document informed consent-expand on this
  8. Failure to inform patient care may or will be provided by unlicensed personnel
  9. Failure to complete and sign healthcare records within 60 days
  10. Failure to report a PT or PTA for an unprofessional, incompetent, or illegal act within 30 days
- D. PT 7.03: link to complaint process
- X. Continued competence: 448.55(3); Ch. PT 8, 9
- A. Licensure renewal is February of odd-numbered years
  - B. PTs must complete 30 hours of CE; 4 in ethics/jurisprudence
  - C. PTAs must complete 20 hours of CE; 4 in ethics/jurisprudence
  - D. Many options to earn CE units
    1. Conference/workshop offerings
    2. Online education
    3. Employer-provided CE
    4. Academic coursework

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5. Presenting a course/seminar
  6. Academic teaching
  7. Clinical specialist certification
  8. Completion of residency program
  9. Authorship
  10. Clinical instructor
  11. Study group
  12. Service to APTA
- E. Random audit of all licensees
- F. Audit of any licensee under investigation for alleged misconduct

Notes

Interactive Questions — slide 68 @ 97 minutes

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