

Scope of Practice Comparison

Recreational Therapy, Physical Therapy, and Occupational Therapy

The scope of practice as outlined in the proposed Recreational Therapy licensure bill **DOES NOT** infringe on the Physical Therapy Practice Act or Occupational Therapy Practice Act. Key words in the scope of practice are highlighted in **blue**, along with an explanation in **red**. If you have questions, please contact Dr. Heather Porter at hporter@temple.edu (Chair of the Recreational Therapy Licensure Committee for Pennsylvania).

Recreational Therapy Licensure Bills (HB 1761, SB 1053)	Physical Therapy (PT) Practice Act	Occupational Therapy (OT) Practice Act
<p>"Recreational therapy." A service designed to treat an individual affected by an illness or disabling condition in order to accomplish any of the following:</p> <ul style="list-style-type: none"> (1) Restore, remediate or rehabilitate a person's level of functioning and independence in life activities. (2) Promote health and wellness. (3) Reduce or eliminate limitations and restrictions to participation in life situations. <p>"Recreational therapy services." The techniques used by recreational therapists to treat individuals, including all of the following:</p> <ul style="list-style-type: none"> (1) Conducting an individualized assessment for the purpose of collecting systematic, comprehensive and accurate data necessary to determine the course of action and subsequent individualized treatment plan. (2) Planning and developing an individualized RT treatment plan that identifies an individual's goals, objectives and potential treatment intervention strategies for play, recreation, leisure and community activities. (3) Implementing an individualized RT treatment plan that is consistent with the overall treatment plan. (4) Systemically evaluating and comparing the individual's response to the individualized RT treatment plan and making modifications as appropriate. 	<p>"Physical Therapy" means any of the following:</p> <ul style="list-style-type: none"> (1) The evaluation, examination and testing of individuals with mechanical, physiological and developmental impairments, functional limitations and disabilities, other health-related or movement-related conditions, performed to determine a diagnosis, prognosis and plan of treatment intervention within the scope of this act or to assess the ongoing effects of intervention. *The RT licensure bill does NOT conflict with the PT Practice Act in regards to "evaluation." The RT licensure bill states that an assessment is conducted "for the purpose of collecting systematic, comprehensive and accurate data necessary to determine the course of action and subsequent individualized treatment plan" – see #1 in the RT licensure bill. The PT Practice Act states that an assessment is conducted to "determine a diagnosis, prognosis, and plan of treatment intervention." The RT licensure bill does NOT utilize the terms "diagnosis" or "prognosis." However, all healthcare professions conduct an evaluation to determine a treatment plan. (2) The performance of tests and measurements as an aid in diagnosis or evaluation of function and the treatment of the individual through the utilization of the effective properties of physical measures such as mechanical stimulation, heat, cold, light, air, water, electricity, sound, massage or mobilization-manual therapy. *RT does NOT utilize these techniques, and therefore they are NOT listed in the RT licensure bill. RT uses "play, recreation, leisure, and community activities as modalities to advance health and functioning" – see #10 in the RT licensure bill. 	<p>"Occupational therapy." The evaluation of learning and performance skills and the analysis, selection and adaptation of activities for an individual whose abilities to cope with the activities of daily living, to perform tasks normally performed at a given stage of development and to perform essential vocational tasks which are threatened or impaired by that person's developmental deficiencies, aging process, environmental deprivation or physical, psychological, injury or illness, through specific techniques which include: *The RT licensure bill does NOT include an evaluation of activities of daily living or vocational tasks. RT focuses on play, recreation, leisure, and community activities, which is listed repetitively throughout the RT licensure bill.</p> <ul style="list-style-type: none"> (1) Planning and implementing activity programs to improve sensory and motor functioning at the level of performance normal for the individual's stage of development. *The RT licensure bill does NOT use the term "activity programs", but rather specifies and limits its scope of practice to the use of play, recreation, leisure, and community activities only. Play, recreation, leisure, and community activities are utilized by RT also address skill recovery in all areas of health (see #7, #9, #10, #11), including psychological, social, and physical domains, which are not listed in the OT Practice Act.

<p>(5) Developing a discharge plan in collaboration with the individual and the individual's family, treatment team and other identified support networks where appropriate.</p> <p>(6) Identifying and training in the use of adaptive play, recreation and leisure equipment.</p> <p>(7) Identifying, providing and educating individuals to use play, recreation, leisure and community resources that support a healthy, active and engaged life.</p> <p>(8) Providing leisure education and counseling to address issues that hinder health and engagement in play, leisure, recreation and community activities.</p> <p>(9) Providing community integration, reintegration, inclusion and transition services to maximize health and participation in play, recreation, leisure and community activities.</p> <p>(10) Addressing functional skill recovery, development or maintenance related to health and participation in play, recreation, leisure and community activities and utilizing play, recreation, leisure and community activities as modalities to advance health and functioning.</p> <p>(11) Assisting individuals in constructing a healthy leisure lifestyle that supports continued recovery, health promotion and quality of life.</p> <p>(12) Providing play, recreation, leisure and community opportunities for individuals with illness, disability or challenges for therapeutic purposes.</p> <p>(13) Minimizing personal and environmental contextual barriers and maximizing personal and environmental contextual facilitators to enhance health and participation in play, recreation, leisure and community activities.</p> <p>(14) Collaborating with and educating the individual, family, caregiver and others to foster an environment that is responsive to the health, play, recreation, leisure and community engagement needs of the individual.</p> <p>(15) Consulting with groups, programs, organizations or communities to improve physical, social and programmatic accessibility in play, recreation, leisure and community activities.</p>	<p>(3) The use of therapeutic exercises and rehabilitative procedures, including training in functional activities, with or without the utilization of assistive devices, for the purpose of limiting or preventing disability and alleviating or correcting any physical or mental conditions. *RT does NOT prescribe therapeutic exercises, and therefore this is NOT listed in the RT licensure bill. The RT licensure bill does NOT utilize the term "rehabilitative procedures", but rather states that RT uses "play, recreation, leisure, and community activities as modalities to advance health and functioning" – see #10 in the RT licensure bill.</p> <p>(4) Reducing the risk of injury, impairment, functional limitation and disability, including the promotion and maintenance of fitness, health and wellness in populations of all ages as well as engaging in administration, consultation, education and research. *The RT licensure bill does NOT mention "risk of injury" or "impairment." Like PT however, RT strives to "reduce or eliminate limitations", which is an outcome of all therapy professions. The difference is that PT provides a blanket non-descriptive statement about this, whereas the RT licensure bill is more specific, stating that RT strives to reduce limitations related to "participation in play, recreation, leisure, and community activities" – see #13 in RT licensure bill. The PT Practice Act also includes "promotion and maintenance of fitness, health, and wellness." RT also promotes health and wellness by "Assisting individuals in constructing a health leisure lifestyle that supports continued recovery, health promotion, and quality of life", as do many other healthcare disciplines since this is the cornerstone of healthcare – see #11 in RT licensure bill.</p>	<p>2) Teaching skills, behaviors and attitudes crucial to the individual's independent, productive and satisfying social functioning. *The RT licensure bill does NOT use the specific term of "social functioning", however RT does address "functional skill recovery, development or maintenance related to health and participation in play, recreation, leisure, and community activities" (see #10), which could include social functioning.</p> <p>(3) The design, fabrication and application of orthotics to enhance performance in occupations, not to include prosthetic devices, and the adaptation of equipment necessary to assist patients in adjusting to a potential or actual impairment and instructing in the use of such devices and equipment. *The RT licensure bill does NOT include orthotics. The RT licensure bill does NOT stipulate the "design and fabrication" of adaptive equipment to "adjust to impairment", but rather "identify and train individuals in the use of adaptive play, recreation, and leisure equipment."</p> <p>(4) Analyzing, selecting and adapting activities to maintain the individual's optimal performance of tasks to prevent disability. *The RT licensure bill does NOT use the broad term "activities", but rather specifies and limits its scope of practice to "play, recreation, leisure, and community activities" throughout the licensure bill.</p>
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