PT and PTA CPI Revision Process: Initial Revisions to Criteria and Descriptions

feedback and input from the volunteer panels.



From HumRRO's Phase IV Technical Report to Revise Provides a comparison of CPI 2.0 criteria to CPI 3.0 criteria based on the PT and PTA CPI Performance Criteria and Rating Scales.

> Appendix B: Initial Revisions to the PT CPI Performance Criteria and Descriptions (Post-Content Revision Activity)

Table B 1. Current FT CFT Ferrormance Criteria and Descriptions vs. Initial Revision							
Existing PT Performance Criteria			Initial Revision of PT Performance Criteria				
Performance Criteria (18)	Description Outcome and Rationale		Revised Performance Criteria (11)	Description			
SAFETY	Practices in a safe manner that minimizes the risk to patient, self, and others.	Did not need to be a standalone criterion; incorporated into 'Clinical Reasoning'; Stakeholder feedback indicates that safety issues are an immediate contact via phone/email, not delayed until completing the CPI.			Professionalism		
PROFESSIONAL BEHAVIOR	Demonstrates professional behavior in all situations.	Incorporated into the 'Professionalism' competency		ETHICAL PRACTICE	Demonstrates professional behavior in the clinical setting; practices according to legal and professional standards and ethical guidelines;		

Table B 1. Current PT CPI Performance Criteria and Descriptions vs. Initial Revision



Existing PT Performance Criteria			Initial Revision of PT Performance Criteria		
					demonstrates respect for self, patients, and colleagues in all situations.
ACCOUNTABILITY	Practices in a manner consistent with established legal and professional standards and ethical guidelines.	Now 'Ethical Practice'		PROFESSIONAL GROWTH	Accepts and is receptive to feedback; participates in planning and/or self- assessment to improve clinical and professional performance; seeks out opportunities for professional development.
COMMUNICATION	Communicates in ways that are congruent with situational needs.	Maintained; description now more detailed			Interpersonal
CULTURAL COMPETENCE	Adapts delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs.	Now 'Inclusivity;' description now more detailed		COMMUNICATION	Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues); ongoing communication with physical therapist assistants regarding patient care; adapts verbal and nonverbal communication styles based on the patient's cognitive status and/or literacy level; utilizes communication resources (e.g., translators) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients and others.
PROFESSIONAL DEVELOPMENT	Participates in self- assessment to improve clinical and	Now 'Professional Growth'		INCLUSIVITY	Adapts the delivery of physical therapy services with consideration for patient diversity; encourages



Existing PT Performance Criteria			Initial Revis	ion of PT Performance Criteria	
	professional performance.				equity and is inclusive to all regardless of race, gender, age, etc.
CLINICAL REASONING	Applies current knowledge, theory, clinical judgment, and the patient's values and perspective in patient management.	Maintained; description now more detailed		Τι	echnical/Procedural
SCREENING	Determines with each patient encounter the patient's need for further examination or consultation* by a physical therapist or referral to another health care professional.	Incorporated into 'Examination and Evaluation' as students should be screening for differential diagnoses, vitals, red flags, etc. as part of the examination; would reduce redundancy		CLINICAL REASONING	Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement leading to accurate and efficient evaluations including: selection of examination techniques, diagnosis, prognosis, goals, and plan of care; ensures patient safety with medical screening during the episode of care and when making discharge and progression decisions; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues).
EXAMINATION	Performs a physical therapy patient examination using evidenced-based tests and measures.	Combined with 'Evaluation' as Examination and Evaluation co-occur; separation was "artificial"		EXAMINATION, EVALUATION, AND DIAGNOSIS	Performs evidence-based initial and re-examination tests and measures that are relevant to the practice setting; rules out other pathologies and refers to other healthcare professionals as necessary; evaluates data from the patient examination (e.g., history, systems



	Existing PT Performance Criteria			Initial Revisi	on of PT Performance Criteria
					review, tests and measures, screening, and outcome measures) to make clinical decisions, including the determination of a diagnosis to guide future patient management.
EVALUATION	Evaluates data from the patient examination (history, systems review, and tests and measures) to make clinical judgments.	Combined with 'Examination' as Examination and Evaluation co-occur; separation was "artificial"		PLAN OF CARE AND CASE MANAGEMENT	Establishes a physical therapy plan of care that is safe, effective, patient- centered, and evidence-based while also considering prognostic factors; adapts plan of care as appropriate by utilizing test and retest measures, outcome measures, and caseload discussions to ensure patients are progressing toward discharge goals.
DIAGNOSIS AND PROGNOSIS	Determines a diagnosis and prognosis that guides future patient management.	Incorporated into 'Examination and Evaluation' and 'Plan of Care and Case Management.' The diagnosis is the result of the Examination and Evaluation process and the prognosis is an important factor in determining/revising the Plan of Care; would reduce redundancy		INTERVENTIONS AND EDUCATION	Selects and performs appropriate physical therapy interventions (e.g., therapeutic exercise, therapeutic activity, neuromuscular re-education, application of modalities, manual therapy) that are evidence-based and completed in a competent and efficient manner; educates patients and caregivers using multimodal approach based on patient's learning style; educates healthcare team on relevant topics by taking active an role in activities (e.g., journal clubs) or other in-service opportunities.
PLAN OF CARE	Establishes a physical therapy plan of care that is safe, effective,	Now 'Plan of Care and Case Management'			Business



Existing PT Performance Criteria			Initial Revision of PT Performance Criteria		
	patient-centered, and evidence-based.				
PROCEDURAL INTERVENTIONS	Performs physical therapy interventions in a competent manner.	Combined with 'Educational Interventions;' there is overlap in the types of interventions and, generally, both educational and procedural interventions are provided to the patient to the extent that this doesn't need to be evaluated separately.	DOCUMENTATION	Produces quality documentation in a timely manner to support the delivery of physical therapy services.	
EDUCATIONAL INTERVENTIONS	Educates others (patients, caregivers, staff, students, other health care providers, business and industry representatives, school systems) using relevant and effective teaching methods.	Combined with 'Procedural Interventions;' there is overlap in the types of interventions and, generally, both educational and procedural interventions are provided to the patient to the extent that this doesn't need to be evaluated separately.	FINANCIAL MANAGEMENT AND FISCAL RESPONSIBILITY	Identifies financial barriers and limitations to patient care (e.g., authorization limits, cost to patient); adjusts plan of care and schedule frequency based on the patient's financial concerns or needs; understands nuances of insurance including copay, co-insurance, out-of- pocket max, deductible, etc.; appropriately bills patients according to legal guidelines and insurance regulations; demonstrates appropriate understanding of other fiscally responsible behaviors including time management and appropriate use of clinical supplies and equipment when providing physical therapy services.	
DOCUMENTATION	Produces quality documentation in a timely manner to support the delivery of	Maintained		Responsibility	



	Existing PT Performance Criteria			Initial Revision of PT Performance Criteria		
	physical therapy services.					
OUTCOMES ASSESSMENT	Collects and analyzes data from selected outcome measures in a manner that supports accurate analysis of individual patient and group outcomes.	Incorporated into 'Examination and Evaluation' and 'Plan of Care and Case Management;' These behaviors occur during the Examination process and reoccur during the Plan of Care and Case Management stage; would reduce redundancy.		GUIDING AND COORDINATING SUPPORT STAFF	Actively participates in caseload discussions to optimize patient outcomes; delegates tasks to support staff as appropriate; identifies patient complexity model of care when scheduling patients with a physical therapist assistant versus a physical therapist.	
FINANCIAL RESOURCES	Participates in the financial management (budgeting, billing and reimbursement, time, space, equipment, marketing, public relations) of the physical therapy service consistent with regulatory, legal, and facility guidelines.	Now 'Financial Management and Fiscal Responsibility;' description now more detailed			1	
DIRECTION AND SUPERVISION OF PERSONNEL	Directs and supervises personnel to meet patient's goals and expected outcomes according to legal standards and ethical guidelines.	Now 'Guiding and Coordinating Support Staff'				



Appendix C: Initial Revisions to the PTA CPI Performance Criteria and Descriptions (Post-Content Revision Activity)

Existing PTA Performance Criteria			Initial Revision of PTA Performance Criteria		
Performance Criteria (14)	Description	Outcome and Rationale	Revised Performance Criteria (9)	Description	
SAFETY	Performs in a safe manner that minimizes the risk to patient, self, and others.	Did not need to be a standalone criterion; incorporated into 'Clinical Reasoning;' Stakeholder feedback indicates that safety issues are an immediate contact via phone/email, not delayed until completing the CPI.	Profe	essionalism	
CLINICAL BEHAVIORS	Demonstrates expected clinical behaviors in a professional manner in all situations.	Incorporated into 'Ethical Practice;' both encompass Professionalism	ETHICAL PRACTICE	Demonstrates professional behavior in the clinical setting; practices according to legal and professional standards and ethical guidelines; demonstrates respect for self, patients, and colleagues in all situations.	
ACCOUNTABILITY	Performs in a manner consistent with established legal standards, standards of the profession, and ethical guidelines.	Now 'Ethical Practice'	Interpersonal		

Table C 1. Current PTA CPI Performance Criteria and Descriptions vs. Initial Revision



Existi	Existing PTA Performance Criteria			Initial Revision of F	PTA Performance Criteria
CULTURAL COMPETENCE	Adapts delivery of physical therapy services with consideration for patients' differences, values, preferences, and needs.	Now 'Inclusivity;' description now more detailed		COMMUNICATION	Demonstrates professional verbal and nonverbal communication with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues); ongoing communication with physical therapists regarding patient care; adapts verbal and nonverbal communication styles based on the patient's cognitive status and/or literacy level; utilizes communication resources (e.g., translators) as appropriate; incorporates appropriate strategies to engage in challenging encounters with patients and others.
COMMUNICATION	Communicates in ways that are congruent with situational needs.	Maintained; description now more detailed		INCLUSIVITY	Adapts the support of physical therapy services with consideration for patient diversity; encourages equity and is inclusive to all regardless of race, gender, age, etc.
SELF-ASSESSMENT AND LIFELONG LEARNING	Participates in self- assessment and develops plans to improve knowledge, skills, and behaviors.	Removed. Most stakeholder comments were similar to: "Students are very focused on keeping their heads above water and learning clinical, hands-on skills. Future learning is not on their		Technical/Procedural	



Existing PTA Performance Criteria			Initial Revision of P	PTA Performance Criteria
		agenda." This was also described as "something that is not easily measured while in clinicals."		
CLINICAL PROBLEM SOLVING	Demonstrates clinical problem solving.	Now 'Clinical Reasoning;' description now more detailed	CLINICAL REASONING	Strategically gathers, interprets, and synthesizes information from multiple sources to make effective clinical judgments; applies current knowledge and clinical judgement while supporting the physical therapist with clinical activities; ensures patient safety during the episode of care; presents a logical rationale for clinical decisions with all stakeholders (e.g., patients, caregivers, intra/interdisciplinary colleagues).
INTERVENTIONS: THERAPEUTIC EXERCISE	Performs selected therapeutic exercises in a competent manner.	Combined with 'Interventions: Therapeutic Techniques;' application requires the same general skill set and knowledge.	INTERVENTIONS: THERAPEUTIC EXERCISE AND TECHNIQUES	Performs selected manual therapy, airway clearance, and integumentary repair and protection techniques in a competent manner.
INTERVENTIONS: THERAPEUTIC TECHNIQUES	Applies selected manual therapy, airway clearance, and integumentary repair and protection techniques in a competent manner.	Combined with 'Interventions: Therapeutic Exercise;' application requires the same general skill set and knowledge.	INTERVENTIONS: PHYSICAL AGENTS, MECHANICAL AND ELECTROTHERAPEUTIC MODALITIES	Applies selected physical agents, mechanical modalities, and electrotherapeutic modalities in a competent manner.



Existing PTA Performance Criteria				Initial Revision of F	PTA Performance Criteria
INTERVENTIONS: PHYSICAL AGENTS AND MECHANICAL MODALITIES	Applies selected physical agents and mechanical modalities in a competent manner.	Combined with 'Interventions: Electrotherapeutic Modalities;' the skills are consistent here: application of a modality that requires the same psychomotor skill sets.		INTERVENTIONS: FUNCTIONAL TRAINING AND APPLICATION OF DEVICES AND EQUIPMENT	Performs functional training in self-care and home management; performs application and adjustment of devices and equipment in a competent manner.
INTERVENTIONS: ELECTROTHERAPEUTIC MODALITIES	Applies selected electrotherapeutic modalities in a competent manner.	Combined with 'Interventions: Physical Agents and Mechanical Modalities;' the skills are consistent here: application of a modality that requires the same psychomotor skill sets.		В	usiness
INTERVENTIONS: FUNCTIONAL TRAINING AND APPLICATION OF DEVICES AND EQUIPMENT	Performs functional training in self-care and home management and application and adjustment of devices and equipment in a competent manner.	Maintained		DOCUMENTATION	Produces quality documentation in a timely manner to support the delivery of physical therapy services.
DOCUMENTATION	Produces quality documentation in a timely manner to support the delivery of physical therapy services.	Maintained		RESOURCE MANAGEMENT	Participates in the efficient delivery of physical therapy services; demonstrates appropriate understanding of time management and appropriate use of clinical supplies and equipment when



Existing PTA Performance Criteria				Initial Revision of F	PTA Performance Criteria
RESOURCE MANAGEMENT	Participates in the efficient delivery of physical therapy services.	Maintained; description now more detailed	_		supporting physical therapy services.

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