

Modernization of the Florida Physical Therapy Practice Act - Summary



Today marks a big moment for physical therapy in the state of Florida. After more than 30 years, the Physical Therapy Practice Act, which defines and governs the practice of physical therapy, has been updated. Florida Governor Ron DeSantis signed FPTA’s major legislative initiative into law on June 29, 2020, clearly defining the practice of physical therapy and recognizing the current set of skills and value physical therapists and physical therapist assistants provide their patients.

The changes to Chapter 486, Florida Statutes were derived from *The Model Practice Act for the Practice of Physical Therapy 6th Edition*, as developed by the Federation of State Boards of Physical Therapy. It is regarded as the preeminent standard and most effective tool available for legislative change when revising and modernizing physical therapy practice acts.

Many people volunteered their time to help modernize physical therapy practice in Florida. In fact, with your help and our digital advocacy campaign, FPTA was able to generate over 40,000 emails to state legislators advocating for the updated law. I would like to thank all of those who contributed to our success including our CEO, Tad Fisher, our COO, Michelle Higdon, our lobbying team at Metz, Husband and Daughton, and Cynthia Mikos, FPTA Legal Counsel, as well as all of our consultants. FPTA leadership worked with many professional organizations across Florida including the Florida Medical Association, Florida Osteopathic Medical Association, Florida Orthopedic Society, Florida Chiropractic Association and the Florida Occupational Therapy Association to ensure there was no resistance to the legislation as it moved forward. Thanks to all of you who were involved.

Impact of the legislation to Chapter 486, Florida Statutes

Section 486.021 (10) – “Physical therapy assessment” Changes in this section more clearly delineate what physical therapy assessment means, for example the new language correctly identifies “human movement system” specifically as a specialization of the physical therapist.

Section 486.021 (11) – “Practice of physical therapy” Changes in this section deleted outdated language and defined modern areas of treatment physical therapists are educated and trained to provide to patients. Now expressly included in the new definition are manual therapy, airway clearance and wound care, as well as other clarifying language that brings the definition more in line with modern practice. **Section 486.025 – “Powers and duties of the Board of Physical Therapy Practice”** This revision adds responsibility to the Board for establishing standards of practice for the performance of dry needling by physical therapists who wish to avail themselves of this modern treatment tool.

Section 486.117 – “Physical Therapist; performance of dry needling” This new section of law sets out the minimum standards for a physical therapist who wants to perform dry needling in Florida and is described more fully below.

Minimum Standards of Practice for the Performance of Dry Needling

Once HB 467 becomes effective July 1, 2020, licensed physical therapists, who meet the requirements of minimum standards of practice will be able to practice dry needling. Additionally, the Florida Board of Physical Therapy Practice is charged with establishing rules delineating the minimum standards of practice for the performance of dry needling by a physical therapist. Rulemaking discussion has begun but will not be completed for a few months.

Clearly, there are Florida licensed physical therapists currently practicing in Florida who may already meet the minimum standards of practice, which include:

- Completion of 2 years of licensed practice as a physical therapist.
- Completion of 50 hours of face-to-face continuing education from an entity accredited in accordance with s. 486.109 on the topic of dry needling which must include a determination by the physical therapist instructor that the physical therapist demonstrates the requisite psychomotor skills to safely perform dry needling. The continuing education must include instruction in all of the following areas:
 - Theory of dry needling
 - Selection and safe handling of needles and other apparatus or equipment used in dry needling, including instruction on the proper handling of biohazardous waste.
 - Indications and contraindications for dry needling.
 - Psychomotor skills needed to perform dry needling.
 - Postintervention care, including adverse responses, adverse event recordkeeping, and any reporting obligations.
- Completion of at least 25 patient sessions of dry needling performed under the supervision of a physical therapist who holds an active license to practice physical therapy in any state or the District of Columbia, who has actively performed dry needling for at least 1 year, and who documents that he or she has met the supervision and competency requirements and needs no additional supervised sessions to perform dry needling; **or**
- Completion of 25 patient sessions of dry needling performed as a physical therapist licensed in any state or in the United States Armed Forces.
- A requirement that dry needling may not be performed without patient consent and must be a part of a patient's documented plan of care.
- A requirement that dry needling may not be delegated to any person other than a physical therapist who is authorized to engage in dry needling under this chapter.
- The Board of Physical Therapy Practice shall establish additional supervision and training requirements before the performance of dry needling of the head and neck or torso by a physical therapist as the board deems it necessary for patient safety.

So, what does this mean?

Those physical therapists who can demonstrate that they meet all of the statutory criteria will be able to practice dry needling beginning July 1st. Once the Board of Physical Therapy Practice establishes rules - there may be a requirement for licensees to attest that they have the competencies needed to practice dry needling. Once the final rule and forms are available from the Board of Physical Therapy Practice, we will share it through FPTA communications. Physical therapist who do not meet the above criteria will need to begin work on completing the hours of education and observed practice as indicated above. As with any other area of practice it will be up to the individual licensee to prove they are competent to practice this intervention should they be called to do so.

I hope this brings some great news during this time of chaos associated with COVID-19. Please stay tuned to your *Weekly Update* and other FPTA communications regarding the impact the changes in the practice act will have on our profession.



Jamie Dyson, PT, DPT

A handwritten signature in black ink that reads "Jamie Dyson". The signature is fluid and cursive, with the first name "Jamie" and last name "Dyson" clearly distinguishable.

President, Florida Physical Therapy Association