

VALUES-BASED BEHAVIORS FOR THE PHYSICAL THERAPIST ASSISTANT

**American Physical Therapy Association
Department of Physical Therapist Assistant Services and
Department of Academic/Clinical Education Affairs
1111 North Fairfax Street
Alexandria, Virginia 22314**



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Introduction

In 2000, the House of Delegates adopted Vision 2020¹ and the Strategic Plan for Transitioning to a Doctoring Profession, citing professionalism as one of 6 key elements of this vision. As a follow-up, the document Professionalism in Physical Therapy: Core Values was developed to define and describe the concept of professionalism by stating what behaviors a graduate of a physical therapist program should demonstrate. In 2003 the APTA Board of Directors adopted Professionalism in Physical Therapy: Core Values² as a core document on professionalism in physical therapist practice, education, and research.

In June 2009, the House of Delegates revised the core ethics documents for the profession, including Standards of Ethical Conduct for the Physical Therapist Assistant (PTA).³ This document originally included references to “core values,” which the House related to Professionalism in Physical Therapy: Core Values.² The APTA Board of Directors determined that Professionalism in Physical Therapy: Core Values was designed for and applicable to physical therapists (PTs), and so it charged the Advisory Panel of Physical Therapist Assistants to draft a new document describing the core values of the PTA, to be titled Values-Based Behaviors for the Physical Therapist Assistant.

The advisory panel met in September 2009 to begin drafting Values-Based Behaviors for the Physical Therapist Assistant. Their work was guided by numerous APTA documents, including Professionalism in Physical Therapy: Core Values,² *A Normative Model of Physical Therapist Assistant Education: Version 2007*,⁴ the PTA Clinical

Performance Instrument: Version 2009,⁵ Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level,⁶ the newly adopted ethics documents,^{3,7} the problem solving algorithm utilized by ptas in patient/client intervention,⁸ and applicable APTA positions and policies.

The advisory panel gleaned 8 values-based behaviors from existing APTA documents and reflection on the contemporary work of the PTA. These values-based behaviors are listed below in alphabetical order with no preference or ranking given. They are considered to be of sufficient breadth and depth to incorporate the many values and attributes that PTAs demonstrate. The panel made every effort to state each value and its accompanying definition and indicators so that it would resonate with and be understandable to PTAs.

The table that follows provides definitions and sample indicators (not exhaustive) that describe the actions the PTA would perform to express the 8 values-based behaviors:

1. Altruism
2. Caring and Compassion
3. Continuing Competence
4. Duty
5. Integrity
6. PT/PTA Collaboration
7. Responsibility
8. Social Responsibility

For each values-based behavior listed, a definition is provided with sample indicators (not exhaustive) that describe what one would see if the physical therapist assistant were demonstrating that values-based behavior in his or her daily work.

Values-Based Behavior With Definition	Sample Indicators
Altruism Altruism is the primary regard for or devotion to the interests of the patient/client, assuming responsibility of placing the needs of the patient/client ahead of the PTA's self interest.	1. Providing patient/client-centered interventions. 2. Readily offering to assist the physical therapist in providing patient/client interventions. 3. Generously providing the necessary time and effort to meet patient/client needs. 4. Placing the patient/client's needs ahead of one's own, as evidenced by willingness to alter one's schedule, delay other projects or tasks, etc. 5. Contributing, as able, to the provision of physical therapy services to underserved and underrepresented populations.
Caring and Compassion Compassion is the desire to identify with or sense something of another's experience; a precursor of caring. Caring is the concern, empathy, and consideration for the needs and values of others.	1. Actively listening to the patient/client and considering the patient/client's needs and preferences. 2. Exhibiting compassion, caring, and empathy in providing services to patients/clients. 3. Demonstrating respect for others and considering others as unique and of value. 4. Considering social, emotional, cultural, psychological, environmental, and economic influences on the patient/client (eg, learning styles, language abilities, cognitive abilities) and adapting approach accordingly. 5. Recognizing and refraining from acting on one's social, cultural, gender, and sexual biases; ie, demonstrates a nonjudgmental attitude.
Continuing Competence Continuing competence is the lifelong process of maintaining and documenting competence through ongoing self-assessment, development, and implementation of a personal learning plan, and subsequent reassessment.⁹	1. Identifying strengths and limitations in knowledge, skills, and behaviors through self-assessment and feedback from physical therapists and others, and developing and implementing strategies to address the limitations. 2. Maintaining continuing competence using a variety of lifelong learning strategies (eg, continuing education, reflective journals, journal clubs, working with a mentor). 3. Seeking further education in the use and delivery of interventions based on new evidence as it becomes available. 4. Developing and implementing a career advancement plan based on interests, opportunities, and career aspirations.

Duty Duty is the commitment to meeting one's obligations to provide effective physical therapy services to individual patients/clients, to serve the profession, and to positively influence the health of society.	1. Demonstrating behaviors, conduct, actions, attitudes, and values consistent with the roles, responsibilities, and tasks of the PTA. 2. Facilitating each patient/client's achievement of goals for function, health, and wellness, as directed in the plan of care. 3. Preserving the safety, security, and confidentiality of individuals in all patient/client contexts. 4. Participating in quality assurance/quality improvement activities in physical therapy care. 5. Promoting the profession of physical therapy. 6. Providing student instruction and mentoring other PTAs.
Integrity Integrity is the steadfast adherence to high ethical principles or standards; truthfulness, fairness, doing what you say you will do, and "speaking forth" about why you do what you do.	1. Adhering to applicable laws regarding scope of work, payment policies and guidelines, institutional policies and procedures, and APTA policies, positions, and guidelines to ensure optimal patient/client care and fiscal management. 2. Adhering to the highest standards of the profession for the PTA, including the Standards of Ethical Conduct for the Physical Therapist Assistant,³ Guide for Conduct of the Physical Therapist Assistant, state practice acts, and payment requirements. 3. Demonstrating the ideals of the values-based behaviors of the PTA. 4. Demonstrating honesty and trustworthiness in all interactions and relationships. 5. Choosing employment situations that are congruent with ethical principles and work standards. 6. Identifying ethical and legal concerns and initiating actions to address the concern, when appropriate.
PT/PTA Collaboration The PT/PTA team works together, within each partner's respective role, to achieve optimal patient/client care and to enhance the overall delivery of physical therapy services.	1. Educating the PT as needed about the roles, responsibilities, and appropriate utilization of the PTA in the PT/PTA team using available resources (eg, state licensure/practice rules and regulations, PTA clinical problem-solving algorithm,⁸ PTA direction and supervision algorithms,¹⁰ Minimum Required Skills of Physical Therapist Assistant Graduates at Entry-Level⁶). 2. Promoting a positive working relationship within the PT/PTA team. 3. Demonstrating respect for the roles and contributions of both the PT and PTA in achieving optimal patient/client care, including the PT's responsibility for the PTA's performance in patient/client interventions. 4. Seeking out opportunities to collaborate with the PT to improve outcomes in patient/client care. 5. Working with the PT in educating consumers and other health care providers about physical therapy.

Responsibility Responsibility is the active acceptance of the roles, obligations, and actions of the PTA, including behaviors that positively influence patient/client outcomes, the profession, and the health needs of society.	1. Identifying strengths and limitations in knowledge and skill, and working within limitations of personal ability. 2. Completing patient/client care and other tasks in a timely and efficient manner. 3. Identifying, acknowledging, and accepting responsibility for actions and, when errors occur, following error reporting processes. 4. Communicating in a timely manner with others (eg, PTs, patients/clients, and others).
Social Responsibility Social responsibility is the promotion of a mutual trust between the PTA, as a member of the profession, and the larger public that necessitates responding to societal needs for health and wellness.	1. Advocating for patient/client needs in the clinical setting. 2. Demonstrating behaviors that positively represent the profession to the public. 3. Promoting a healthy lifestyle, wellness, and injury prevention strategies in the community. 4. Serving the profession and the community, including activities occurring in conjunction with work or outside of work (eg, community health fairs, National Physical Therapy Month events, APTA service). 5. Advocating for changes in laws, regulations, standards, and guidelines that positively affect physical therapy and patient/client services.

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