LICENSED PHYSICAL THERAPY ASSISTANT

DEPARTMENT: Home Health **FLSA STATUS**: Non-exempt

SUPERVISOR: Physical Therapist/Director **DATE**: 01-01-2023

of Home Health

DUTIES AND RESPONSIBILITIES

A Licensed Physical Therapy Assistant (LPTA) administers physical therapy to patients on an intermittent basis in their place of residence. This is performed in accordance with physician orders and plan of care under the direction and supervision of the Registered Physical Therapist (PT).

The person holding this position is delegated the responsibility for carrying out the assigned duties and responsibilities in accordance with current existing federal and state regulations and established company policies and procedures.

FUNCTIONS

- 1. Understands and adheres to established Agency policies and procedures.
- 2. Provides physician prescribed physical therapy under a plan of care established by the PT.
- 3. Improves or minimizes residual physical disabilities of the patient.
- 4. Returns the individual to optimum and productive level within the patient's capabilities.
- 5. Participates with all other health care personnel in patient care planning.
- 6. Performs all skilled procedures as ordered by physician and according to the plan of care established by the PT.
- 7. Consults with PT regarding change in treatment.
- 8. Instructs patients and family members in home programs and activities of daily living.
- 9. Participates in in-service programs and presents in-service programs as assigned.
- 10. Participates in QAPI activities as assigned.
- 11. Attends all patient care conferences as scheduled.
- 12. Prepares medical records, progress notes and updates care plans for each patient visit in a timely manner as per Agency policy.
- 13. Performs services planned, delegated and supervised by the PT.
- 14. Assists in preparing clinical and progress notes.
- 15. Participates in educating the patient and family.
- 16. Performs maintenance therapy services under a maintenance program established by a qualified therapist, when acting within the therapy scope of practice defined by applicable state licensure laws.

Risk I	Exposure Categories:
\mathbf{X}	1=Tasks may involve exposure to blood/body fluids.
	2=Tasks do not involve contact with blood/body fluids but could result
	in performing a Category 1 task.
	3= Tasks do not involve any risk of exposure to blood/body fluids.

WORKING BEHAVIORS

Adhere to and carry out all policies and procedures, including but not limited to:

- Reporting on-the-job injuries to the supervisor immediately (within 10 minutes) of the accident occurring on the shift.
- Reporting instances of harassment following the procedures outlined in the associate handbook.
- Arriving for work dressed according to the dress code. Good personal hygiene is also expected.
- Arriving to work on time and as scheduled as set forth in the associate handbook.
- Report any patient abuse to the Supervisor in accordance with company policy.
- Establish and maintain constructive working relationships with coworkers, clients, families and visitors.
- Maintain confidentiality of verbal and written information pertaining to clients and agency operations.
- Maintain confidentiality of verbal and written information pertaining to personnel if it relates to medical information, harassment investigations, issues related to violence in the workplace or reference inquiries.
- Promote the workplace in a positive way.
- Promote teamwork in providing services to clients.

PHYSICAL REQUIREMENTS

These are physical and mental requirements of the position as it is typically performed. Inability to meet one or more of these physical or mental requirements will not automatically disqualify a candidate or employee from the position. Upon request for a reasonable accommodation, the Company may be able to adjust or excuse one or more of these requirements, depending on the requirement, the essential functions to which it relates, and the proposed accommodation.

	Rarely (0-12%)	Occasionally (12-33%)	Frequently (34-66%)	Regularly (67-100%)
Standing/Walking:				X
Sitting:			X	
Lifting/Carrying: 20-50 lbs.		X		
Pushing/Pulling 20-50 lbs.		X		
Climbing/Balancing:	X			
Stooping:			X	
Squatting:			X	
Kneeling:		X		
Reaching:			X	
Hearing/Listening: Must be able to hear well enough to communicate with coworkers and clients				X
Fingering/Grasping/Feeling: Dexterity necessary to handle and manipulate equipment and supplies.				X
Seeing: Must be able to read reports, instructions, and observe clients				X
Color Perception: (Red, Green, Amber)			X	
Animals/Plants		X		

X Slippery Floors __ Weather

MENTAL/REASONI	NG REQUIREME	NTS	
Reading Simple	X Writing – Com	plex <u>X</u> Analysis/Cor	nprehension
X Reading-Complex	X Clerical	\underline{X} Judgement/ Γ	Decision Making
Writing – Simple	X Basic Math Skil	ls	_
EXPOSURES			
X Airborne particles	Explosives	X Muscular Strain	X Temperature
X Caustics	X Fumes	X Noise	X Toxicants
X Chemicals	High places	X Odors	Vibration
X Electrical Current	X Moving Parts	X Physical abuse	X Vision strain

WORK AREA AND ENVIRONMENT

Works indoors in Agency office and patient homes and travels to/from patient homes.

QUALIFICATIONS

<u>License/Registration</u>: A valid, unrestricted license in his/her discipline in state working. Valid driver's license in the state of employment.

Continuing Education: As required to retain license/registration

Education: Meet educational requirements of his/her licensure, requirements.

Experience: Two (2) years' experience preferred...

<u>Job Knowledge</u>: Knowledgeable of home health regulation, procedures, laws, regulations and guidelines pertaining to home health care.

<u>Professional Memberships</u>: Recommended and encouraged.

Other: Caring attitude, observant, maintain good working relationship, judgment, and emotional stability.

STANDARDS

- 1. Clients always come first, and their needs will be met unless there is a conflict with the needs of others or the organization as a whole.
- 2. Clients, patient families, co-workers and visitors will be treated with respect, dignity and kindness.
- 3. Every employee is responsible for ensuring the complete satisfaction of each patient in terms of quality of care, courtesy and professionalism of service, and the accuracy and efficiency of the reporting systems.
- 4. Employee behavior will consistently be in a manner that demonstrates both employee's and the company's commitment to an ethical and honest approach in all dealings with employees, customers, suppliers and the community. How you conduct yourself at work influences the perception of the business and reputation as a health care provider.

ACCEPTANCE STATEMENT

I have carefully read, understand, and accept the job description, including the qualifications and requirements of the position of <u>LICENSED PHYSICAL THERAPY ASSISTANT</u>, and, if employed, I certify that I can and will perform the essential functions of the position.

I understand Universal Precautions Risk Classification Categories may apply to this position and I may be exposed to AIDS, HIV, and hepatitis B viruses.

This job description supersedes all prior written and unwritten policies, including any prior job descriptions. Nothing contained in this job description or in any other statement of Facility philosophy, including statements made in the course of performance evaluations and wage reviews, should be taken as constituting an expressed or implied promise of continuing employment.

This job description is not a contract, expressed or implied, guaranteeing employment for any specific duration. Although we hope that your employment relationship with us will be long term, either you or the Agency may terminate this relationship at any time, for any lawful reason, with or without cause or notice during the introductory period. Thereafter, employment may be terminated for good cause as defined by applicable Montana law. Please understand that no supervisor, Administrator or representative of the Agency may enter into an oral employment contract. The President of the Agency, or his representative designated in writing, are the only Agency officials who have the authority to enter into any agreement with you for employment for any specified period of time.

Further, any employment agreement entered into by the President or his designated representative will not be enforceable unless it is in writing.

Signature of Employee	Date	
Signature of Witness	Date	