



## A New View on Scope of Practice Debates

**T**he specific title may vary, but each of the 53 member jurisdictions of the Federation of State Boards of Physical Therapy has a physical therapy practice act which has been passed into law by the state legislature. The respective State Board then writes rules and regulations based on that statutory authority to give practical meaning to the law. The unique nature of each state's political landscape is demonstrated in the state-to-state variance of the practice acts for the same profession.

The practice act includes, but is not limited to, items such as: protection of the title of physical therapist, physical therapist assistant, and physical therapy; the power and duty of the Board of physical therapy, requirements for licensure, disciplinary actions and penalties, and perhaps the most controversial item; the definition of the scope of physical therapy. These laws are not static however; they are dynamic and evolving legislation. Sometimes the changes being debated are contentious, other times they are noncontroversial. Traditionally, battles over scope of practice have been hard fought endeavors.

From the outside, battles between professional groups for inclusions or exclusions to scope of practice legislation are perceived as turf wars. Obviously, professions want to see their scope of practice expanded to the maximum, while limiting the scope of practice of other potentially competing professionals, in order to strengthen a competitive advantage in the health care market. There have been many instances in the states where in one year a given profession is fighting to expand its practice act in the

name of the good of the public, improved access to health care providers, increased choice, decreased costs, improved public health; only to turn around the following year and fight against another profession trying to do the same thing.

What often gets lost however, is that the legislature should be acting based on what is in the best interest for public protection and safety. Unfortunately, many of the differences between state practice acts are not based on any specific public protection measures or research, but by who had the deepest pockets during the legislative session. In

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order for the debate on the scope of practice for a healthcare profession and resulting legislation to be meaningful, a major culture shift must take place. Legislators must take an objective view of proposed scope of practice changes with regard to public safety and minimize the influence of professional special interest group lobbyists.

FSBPT collaborated with five other healthcare regulatory organizations to publish *Changes in Healthcare Professions Scope of Practice: Legislative Considerations*. This document has been developed to assist legislators and regulatory bodies with making decisions about changes to healthcare professions' scopes of practice. These organizations present the argument that if a profession can provide support evidence in four foundational areas: 1) an

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established history of the practice scope within the profession, 2) education and training, 3) supporting evidence, and 4) appropriate regulatory environment; the proposed changes in scope of practice are likely to be in the public's best interest.<sup>1</sup>

The idea of a new way of looking at health profession scope of practice legislation is evolving. Increasingly, legislatures are recognizing that there needs to be an unbiased and impartial way to evaluate a request by a healthcare profession to expand the scope of practice.

FSBPT widely distributed the *Changes in Healthcare Professions Scope of Practice: Legislative Considerations* document at the National Conference of State Legislators with positive feedback. New

Mexico and Iowa have review commissions in place and Virginia utilizes the multi-disciplinary Board of Health Professions to directly or indirectly advise the legislature regarding scope of practice questions.<sup>2</sup> Texas is considering creating a similar review process.

The Federation supports efforts by the states to evaluate scope of practice changes primarily based on "criteria related to who is qualified to perform functions safely without risk of harm to the public" rather than just the passionate arguments of the supporters and challengers.<sup>3</sup> As the worth of these impartial reviews and commissions is made known, it is likely that more legislatures will support the creation of independent commissions in their own states.

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<sup>1</sup> "Changes in Healthcare Professions' Scopes of Practice: Legislative Considerations" (2006)  
[http://www.fsbpt.org/download/ScopeOfPractice\\_2006\\_12.pdf](http://www.fsbpt.org/download/ScopeOfPractice_2006_12.pdf)

<sup>2</sup> Catherine Dower, JD, Sharon Christian, JD, Edward O'Neil, PhD, MPA, FAAN, Promising Scope of Practice Models for the Health Professions (UCSF Center for the Health Professions, 2007)

<sup>3</sup> "Changes in Healthcare Professions' Scopes of Practice: Legislative Considerations" (2006)  
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