Physical Agent Modalities Proposal

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Introduction

Physical agent modalities (PAMs) are specific interventions designed to enhance and enable occupational participation and performance. Various forms of modalities are used to regulate pain, promote tissue healing, decrease inflammation, increase tissue flexibility, and modify scar tissue. Examples of physical agent modalities include electrical stimulation, ultrasound, hot and cold packs, and light therapy (AOTA, 2018). There is significant evidence to suggest that PAMs have a positive effect on functional client outcomes. For example, functional electrical stimulation (FES) has been demonstrated to help survivors of stroke to recover function of the upper extremity. FES stimulates muscle contractions of weakened or paralyzed muscles and electrical stimulation facilitates repetitive practice of various functional movements (Musselman et al., 2017). FES is used to delay the onset of spasticity, limit increased muscle tone, and improve balance and paretic lower limb motor function early after stroke (You et al., 2014).

An article written by Handy et al. (2003) demonstrated that electrical stimulation performed by occupational therapy practitioners (OTPs) on the upper extremities decreases shoulder subluxation and increases active range of motion. Evidence suggests that PAMs are a crucial component of the occupational therapy process when used as adjunctive and preparatory methods and have positive effects on client outcomes.

AOTA Guidelines and Recommendations

All educational OT and OTA programs accredited by the Accreditation Council for Occupational Therapy Education (ACOTE) are required to deliver instruction regarding the use and delivery of PAMs. All ACOTE-approved education programs must ensure “foundational knowledge of basic sciences (human anatomy, physiology, and biomechanics), understanding of

relevant theory and evidence, and clinical reasoning to recommend and safely apply PAMs to support achievement of client goals" (AOTA, 2018, p.1). In addition to this range of relevant knowledge gained throughout the student's education, it is also acknowledged that ACOTE requirements specifically include that "entry-level educational programs must prepare occupational therapists to *demonstrate* and occupational therapy assistants to *define* the "safe and effective application of [thermal, electrotherapeutic, and mechanical] modalities as a preparatory measure to improve occupational performance [and the] indications, contraindications, and precautions for use" (ACOTE, 2018, p. 2). ACOTE states

> "Skills, knowledge, and competencies for entry-level practice are derived from AOTA practice documents. For institutions in states where regulations restrict the use of physical agent modalities, it is recommended that students be exposed to the modalities offered in practice to allow students' knowledge and expertise with the modalities in preparation for the NBCOT examination and for practice outside of the state in which the educational institution resides" (ACOTE, 2018, p. 52).

In their most recent position paper on PAMs, the American Occupational Therapy Association (AOTA) explains the therapeutic benefit of PAMs in facilitating occupational participation. OTPs are able to safely and effectively utilize these modalities as a part of occupation-based interventions with the standard procedure that is followed through the occupational therapy process. Commitment to this structured process ensures that each client's individual needs and potential benefit or harm from the use of PAMs are thoughtfully and thoroughly considered (AOTA, 2018).

AOTA also recognizes that entry-level occupational therapists (OTs) are qualified through their education and fieldwork experience to utilize PAMs upon beginning practice and that an occupational therapy assistants (OTA) demonstration of service competency, as determined by their supervising OT, is sufficient to qualify an OTA to collaborate in the implementation of an intervention plan that utilizes PAMs (AOTA, 2018).

State's Precedence

United States

Within the United States, the rules and regulations for the use of physical agent modalities (PAMs) vary per state, most states outline their rules and definitions in great detail while others do not have specific rules regarding required hours of education and supervision. According to the State Occupational Therapy Statutes, Regulations, and Policy Statements with Specific Physical Agent Modalities Provisions (2021), 14 states do not have formal rules governing the delivery of PAMs. The remaining 37 states have guidelines for the delivery of PAMs, and require education and supervision in order to deliver PAMs in practice.

Neighboring States

Montana has a 16-hour education rule that the Montana Occupational Therapy Association (MOTA) is currently in the process of trying to remove (Thompson, 2021). Wyoming specifically mentions OTs and certified occupational therapy assistants (COTAs) in their rule and requires education training hours, as well as 5 supervised treatments (AOTA State Affairs Group, 2021). Neither Oregon or Washington have explicit rules or regulations regarding education or supervision requirements. Instead of explicit rule, these two neighboring states list definitions pertaining to PAMs (AOTA State Affairs Group, 2021). This is relevant to the state

of Idaho due to the number of practitioners that maintain dual licenses in both Oregon and Washington.

Both Nevada and Utah offer definitions for PAMs but neither maintain rules requiring education or training. Rather, both states delegate the responsibility to their state boards to determine whether individual practitioners have acquired the training and skills to administer PAMs treatments (AOTA State Affairs Group, 2021).

Historical Perspective of Current Rule

There is anecdotal evidence to suggest that reduced use of PAMs by OTPs in the state of Idaho is a direct result of the restrictive nature of the current rule. This conclusion is drawn from comments and surveys posted to various occupational therapy media platforms. If OT's use of PAMs is limited or restricted, this ultimately limits or restricts the OT scope of practice and has a direct effect on client outcomes. Since the inception of the rule, Idaho has made some necessary and meaningful changes but the rule as currently written continues to present significant barriers to OT practice and access to care.

A quick comparison of the restrictive rule governing the delivery of PAMs in California suggests that the current Idaho rule was possibly drafted from that state's statute. California currently requires 30 hours of education and 240 hours of supervision. In 2011, Idaho's original rule required that OTs receive 30 hours of continuing education and 120 hours of supervision. In 2016, the rule was amended decreasing supervision hours to 40. Although the change in requirements decreased, the rule continued to present the same challenges as the original (AOTA, 2021).

It is our position that the rule as currently constituted continues to be overly restrictive. When PAMs treatments range from 3 minutes up to 15 minutes, it is unrealistic to complete the

required supervision hours in a reasonable amount of time. As OTPs, we utilize PAMs as preparatory treatments to aid in functional activities (AOTA, 2021). While PAMs are not utilized in every practice setting, receiving the required training hours for PAMs in relevant settings is prohibitive under the current requirements (Meydam, 2021).

Proposal

Based on extensive evidence, PAMs have been proven to show increased occupational performance, engagement, and functional outcomes. As the authors of this paper, we propose significant revisions to rule 24.06.012, as it presents significant barriers and confusion to OTPs and limits services provided, hindering client's access to critical, evidence-based treatment modalities. We feel that limiting these necessary services places practitioners in direct conflict with AOTA's code of ethical principles, specifically equity and justice: "that all persons have fundamental human rights and right to the same opportunities" where "value on upholding moral and legal principles" are open to all (AOTA, 2020).

The students of the 2023 College of Western Idaho Occupational Therapy Assistant Program respectfully submit this proposal and request that the Idaho State Occupational Therapy Licensure Board review and revise rule 24.06.012 and consider the restrictive and prohibitive effects it has upon both the practice of occupational therapy as well as client access to quality evidence-based care.

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