Division of Occupational Therapy  
University of Washington  
OTA and OT Aide Supervision Overview

Items 27 and 28 on the FWPE require competency in supervising OTA or OT aides through demonstration in practice or through discussion. The following information may help guide a discussion about supervisory relationships between OTs, OT assistants and OT aides.

Sources for standards and guidelines:
- WA state licensure laws
- AOTA guidelines
- ACOTE standards

WASHINGTON STATE LICENSURE
RCW 18.59.020 – definitions

(4) "Occupational therapy assistant" means a person licensed to assist in the practice of occupational therapy under the supervision or with the regular consultation of an occupational therapist.

(5) "Occupational therapy aide" means a person who is trained to perform specific occupational therapy techniques under professional supervision as defined by the board but who does not perform activities that require advanced training in the sciences or practices involved in the profession of occupational therapy.

(6) "Occupational therapy practitioner" means a person who is credentialed as an occupational therapist or occupational therapy assistant.

WAC 246-847-010 Definitions

(5) "Consultation" means that practitioners are expected to function as consultants within the scope of practice appropriate to their level of competence

(7) "Direct supervision" as described in RCW 18.59.040(7) means daily, in-person contact at the site where services are provided by an occupational therapist licensed in the state of Washington.

10) "Occupational therapy aide" means a person who is trained by an occupational therapist or occupational therapy assistant to perform client and nonclient related tasks. Occupational therapy aides are not primary service providers of occupational therapy in any practice setting. Occupational therapy aides do not provide skilled occupational therapy services.

11) "Professional supervision" of an occupational therapy aide as described in RCW 18.59.020(5) means in-person contact at the treatment site by an occupational therapist or occupational therapy assistant licensed in the state of Washington. When client related tasks are provided by an occupational therapy aide more than once a week, professional supervision must occur at least weekly. When client related tasks are provided by an occupational therapy aide once a week or less, professional supervision must occur at least once every two weeks.
(12) "Regular consultation" as described in RCW 18.59.020(4) means in-person contact at least monthly by an occupational therapist licensed in the state of Washington with supervision available as needed by other methods which include but are not limited to phone and e-mail.

**WAC 246-847-135 Standards of Supervision (last update: 7/7/08)**

The following are the standards for supervision of occupational therapy assistants, limited permit holders, and occupational therapy aides:

1. Licensed occupational therapy assistants must be supervised through regular consultation by an occupational therapist licensed in the state of Washington. Regular consultation must be documented and the documentation must be kept in a location determined by the supervising occupational therapist or occupational therapy assistant.

2. (a) A limited permit holder must work in association with an occupational therapist licensed in the state of Washington with a minimum of one year of experience. "In association with" shall include consultation regarding evaluation, intervention, progress, reevaluation and discharge planning of each assigned patient at appropriate intervals and documented by cosignature of notes by the supervising occupational therapist.

   (b) Limited permit holders who have failed the examination must be directly supervised by an occupational therapist licensed in the state of Washington with a minimum of one year of experience. Direct supervision must include consultation regarding evaluation, intervention, progress, reevaluation and discharge planning of each assigned patient at appropriate intervals and documented by cosignature of notes by the supervising occupational therapist.

3. Occupational therapy aides must be professionally supervised and trained by an occupational therapist or an occupational therapy assistant licensed in the state of Washington. Professional supervision must include documented supervision and training.

   (a) The occupational therapist or occupational therapy assistant shall train the occupational therapy aide on client and nonclient related tasks at least once a month.

   (b) When performing client related tasks, the occupational therapist or occupational therapy assistant must ensure the occupational therapy aide is trained and competent in performing the task on the specific client.

   (c) The documentation must be maintained in a location determined by the supervising occupational therapist or occupational therapy assistant.

4. Definitions can be found in WAC 246-847-010.

**AOTA SUPERVISION GUIDELINES SUMMARY:**

"Guidelines for Supervision, Roles, and Responsibilities During the Delivery of Occupational Therapy Services" is excellent document revised in 2009. Must be AOTA member to access document at aota.org.

Occupational Therapists are:

- autonomous practitioners
• responsible for all aspects of occupational therapy service delivery
• accountable for the safety and effectiveness of the occupational therapy service delivery process.

Occupational Therapy Assistants must
• deliver occupational services under the supervision of and in partnership with an occupational therapist.

Level and type of supervision may vary depending on complexity of patient needs, proven competence of OTA, complexity of the interventions and regulatory guidelines.

Must follow state regulations.

Delivery of care—OT is responsible for evaluation and treatment process:
  Evaluation
• OTA contributes to the evaluation process by implementing delegated assessments and by providing verbal and written reports of observations.
• OT interprets the information provided by the OTA and integrates that information into the evaluation and decision-making process.

Intervention Planning
• OT and OTA collaborate

Implementation
• OT responsible for supervising aspects that are delegated.
• OTA responsible for being knowledgeable about client’s OT goals.
• OTA selects, implements, and makes modifications to therapeutic activities and interventions that are consistent with demonstrated competency levels, client goals, and the requirements of the practice setting.

Intervention Review
• OTA contributes

Outcome Evaluation
• OT responsible for selecting, measuring and interpreting outcomes
• OTA responsible for being knowledgeable about the client’s targeted OT outcomes and for providing information and documentation related to outcome achievement.
• OTA may implement outcome measurements and provide needed client discharge resources.

OT Aide Supervision
• Occupational therapist must oversee all aspects of plan to utilize OT Aide to carry out non-client-and client related tasks. OT Assistant may contribute
• Client-related tasks must be routine, with predictable outcomes. Aide must be trained and able to demonstrate competency. Aide must know precautions and when to seek assistance.
• Occupational therapy assistant can supervise the aide. Documentation of aide supervision must include credentials of supervisors.

OT/OTA Partnerships: Achieving High Ethical Standards in a Challenging Health Care Environment by Loretta Foster, MS, COTA/L and Rae Ann Smith, OTD, OTR/L, 2010 is a useful document to review. Do not have to be a member.
http://www.aota.org/Practitioners/Ethics/Advisory/OTOTA.aspx

Accreditation Standards from ACOTE may provide useful background information. Do not have to be member to access.