

LONG TERM CARE COMMUNITY COALITION

Advancing Quality, Dignity & Justice

PHYSICAL AND OCCUPATIONAL THERAPY IN NURSING HOMES FACT SHEET

Every resident, whether they are in a nursing home for long-term or short-term care, has the right to receive specialized rehabilitative services to assist them to attain, maintain, or restore their highest practicable level of physical, mental, functional, and psycho-social well-being.

Note: Information below is directly quoted or paraphrased from the Code of Federal Regulations (CFR), federal guidance, or other resources (see footnotes). Federal standards are applicable to all residents in licensed U.S. nursing homes, including short-term, long-term, private pay, Medicaid, Medicare, or privately insured.

Specialized Rehabilitative Services [42 C.F.R. § 483.65; F825]

If specialized rehabilitative services... are required in the resident's comprehensive plan of care, the facility must—

(1) Provide the required services; or (2) ...obtain the required services from an outside resource that is a provider of specialized rehabilitative services....

- The intent of this regulation is **to ensure that every resident receives specialized rehabilitative services** as determined by their comprehensive plan of care **to assist them to attain, maintain or restore their highest practicable level of physical, mental, functional, and psycho-social well-being.**
- “Specialized Rehabilitative Services” includes but is not limited to physical therapy, speech-language pathology, occupational therapy, or respiratory therapy and are provided or arranged for by the nursing home.

They are “specialized” in that they are provided based on each resident's individual assessed rehabilitative needs based on their comprehensive plan of care and can only be performed by or under the supervision of qualified personnel. **These services must be provided** by the facility or an outside resource and delivered by qualified personnel....

Qualifications [42 C.F.R. § 483.65(b); F826]

Specialized rehabilitative services must be provided under the written order of a physician by qualified personnel. Qualified personnel means a physical therapist or occupational therapist who is –

1. Licensed or certified by the state to furnish therapy services; or
2. A physical therapy assistant or occupational therapy assistant when providing services under the supervision of a qualified therapist.

In addition to meeting the specific competency requirements as part of their license and certification requirements, these personnel must have the training, competencies, and skill sets to care for residents as identified through resident assessments and described in their plans of care.

Resident-Centered Advocacy Tips to Improve Access to Therapy Services

If you need OT or PT services to attain or maintain your highest functioning (and who doesn't?), review the therapy staffing levels for facilities that you are considering or live in (along with [overall star rating](#) and nurse staffing levels). Higher levels of therapy staff per resident may indicate more opportunities for resident access to those services. Lower levels of therapy staff may indicate that there aren't enough therapy staff to provide needed services.

Here are some questions that you may find helpful:

- What types of physical and occupational therapy services do you offer?
- How do you assess and develop individualized therapy plans for residents?
- Does therapy planning and access differ for short-term and long-term residents?
- [NOTE: Discrimination in respect to access to therapy or other services based on a resident's status or payment source is prohibited under the federal nursing home rules. If you face discrimination, use the information on the front of this fact sheet to support your advocacy. If possible, work with your LTC Ombudsman and/or resident or family council to address violations of resident rights.]
- How do therapy services integrate with the overall care plan of the resident?
- How is progress monitored and communicated to the resident and family members?
- How are therapy goals aligned with the resident's personal goals and preferences?
- How often are therapy sessions conducted, and how long does each session last?
- What are the qualifications and experience levels of your therapists?
- Are the therapists certified in any special areas (e.g., geriatrics, neurological rehabilitation)?
- Can therapy be tailored to specific conditions (e.g., stroke recovery, arthritis management)?
- Do you provide any specialized equipment or technology to aid in therapy?
- If you are going in for short-term rehab, does the facility provide the specific services you will need for your recovery? How often can you expect to receive those services? Will they be provided individually or as part of a group?
- Is there coordination between therapists, doctors, and nursing staff?
- What outcomes can typically be expected from therapy here?
- How do you accommodate residents with varying levels of mobility and cognitive function?
- Can therapy sessions be adjusted based on the resident's changing needs and preferences?

Visit www.nursinghome411.org/data/staffing/ for the latest staffing information for facilities in your community (therapy staffing is available in the Non-Nurse Staff file).