

Statement on Chiropractic/Physical Therapy Inter-professional Conduct

Preamble

Pursuant to a meeting held in Saskatoon on April 16, 1996, the Chiropractor's Association of Saskatchewan and the College of Physical Therapists of Saskatchewan have arrived at an understanding with respect to the acceptable conduct of members of both professions when interacting during the provision of care to mutual clients.

The goals of this document is to help practitioners of both professions to properly conduct themselves so as to attain a better inter-professional atmosphere, and hence, build bridges between the two professions. Both professions see clients with neuro-musculoskeletal problems, but the approach to management of these client may often be different. However, we have the same overall goal, that being an improvement in the health status of our clients.

Both professions recognize that there may be some overlap in the application of techniques. Comments about the appropriateness, ability or sole practice privileges with respect to these techniques should be avoided unless based on fact.

Referrals

If a client is not progressing well, the approach of the other profession may be of help to the client, and should be considered as a possibility upon review of the client's progress. Physical Therapists and Chiropractors may initiate and receive referrals from each other where that referral is in the interest of the client.

When initiating a referral, it is appropriate to provide the practitioner who is about to see the client with a brief synopsis of the client's complaint, physical findings, special tests, and treatment to date; this information may be provided by written communication, or by telephone.

If you have received a referral, and after you have seen the client, it is appropriate to acknowledge the referral and provide the referring practitioners with a written summary of your findings and plan of management. This should be updated throughout treatment of the client at appropriate times, so that the referring practitioner may be kept apprised of the client's progress.

Concurrent Care

From time to time, a client may attend a chiropractor and a physical therapist concurrently. This need not be considered inappropriate, and indeed, in many cases, might be helpful to the client.

All practitioners are advised to ascertain what concurrent treatment(s) the client is receiving that may influence the efficacy for their treatment. In some circumstance, the concurrent treatments might counteract each other, or conflicting advice/information may be provided. As well, it might be difficult to determine which treatment is helping or hindering.

Practitioners should be wary of unnecessary duplication of the same therapy, and a clear understanding of both practitioners' roles should be evident to both practitioners as well as the client.

In order to ensure that both the chiropractor and physical therapist have the same goal for the client, there should be communication between the practitioners either by mail or telephone. If the practitioners decide that a hiatus from a form of treatment rendered by one of them is necessary, they should understand and convey to the client that the intervention should be stopped for a period of time, but might again be useful as a later point in care.

When a referral has been made by a third party, for example a physician or insurer, a copy of the treatment plan should go to the practitioners that has been treating the client up to that point in time. This may be followed by a phone discussion that should be considered the equal responsibility of both parties to initiate. The intent of the

insurer or the physician in some situations may be to avoid concurrent treatment for a time, to explore the benefits of solely one approach.

If there is a disagreement about the treatment program, this should be explained to the client and the client offered a choice to return to the previous care giver to begin treatment with the other practitioners.

It is inappropriate to recommend to a client that he/she discontinue care from another practitioner until consultation with that practitioner has taken place. It is inappropriate to rend any derogatory or otherwise defamatory remarks about the other practitioners mode of care.

SHARING INFORMATION WITH/WITHOUT CLIENT CONSENT

The obligation is on all health providers not to share information outside of the client's health care team without client consent. It is the viewpoint f the respective regulatory agencies that blockage of discussion for lack of consent would seriously impede interdisciplinary cooperation. The client that is undergoing interdisciplinary care should be informed that information shall be shared, and consent should be obtained.

TEAM PARTICIPATION AND SHARED OFFICE SPACE

It is appropriate for physical therapists and chiropractors to participate and interact on various interdisciplinary health care teams.

Should a physical therapist and chiropractor decide to share office or other health care facilities, this is appropriate, subject to such professional bylaws, regulations or guidelines that might govern each respective practitioner.

This statement is a reasoned expression of the views of the Chiropractors' Association of Saskatchewan and the Saskatchewan College of Physical Therapists on the issue of Inter-professional Cooperation, designed to provide guidance and direction to chiropractors and physical therapist regarding their professional obligations. It is not a substitute for any statute, bylaw, or the code of ethics governing either profession. Specific cases or specific complaints will be dealt with through the normal processes of each regulatory board.