

## **SCPT Practice Resource Planning**

### **Standards of Practice for Physical Therapists and Practice Resources**

Along with the implementation of the Standards of Practice document (as of September 1, 2022), Practice Guidelines are being transitioned to Practice Resources. Practice Resources are educational documents for physical therapists when considering broader topics that may involve multiple standards or regulations.

As part of the transition, Practice Guidelines will be renamed Practice Resources until they can be incorporated into new revamped Practice Resources.

*The Physical Therapists Act* and SCPT Bylaws, which includes the Ethical Code, and the Standards of Practice document are the approved documents for physical therapy practice in Saskatchewan providing the foundation for which practitioners are governed within the regulatory environment.

### **Background**

When an assessment, whether an initial assessment or a scheduled reassessment, indicates that physical therapy management is appropriate, planning is undertaken by the physical therapist to develop and reach agreement with the client on an individualized, outcome- oriented intervention strategy based on informed consent.

### **The SCPT Regulatory Bylaws provide:**

#### **Concurrent treatment**

21 No member shall provide physical therapy treatment to a client where:

- (a) the client is receiving treatment from another health care provider who has a dissimilar or conflicting treatment philosophy, approach or client care objectives;
- (b) the other health care provider treating the client has not been notified; or
- (c) the physical therapy services provided constitute duplication Multi-disciplinary practices

23 Where a member is providing physical therapy services in a multi-disciplinary setting, the member shall ensure that:

- (a) the client is informed of the differences in the roles of the physical therapist and that of other health care providers and of the client's right to refuse any or all parts of an assessment or treatment regardless of who is providing it; and
- (b) specific entries are kept of physical therapy services provided

## **The SCPT Code of Ethical Conduct provides:**

### **A. Responsibilities to the Client**

3. Work in partnership with clients to improve, support and/or sustain their health status and well-being.

6. Respect the principles of informed consent including by explaining service options, risks, benefits, potential outcomes, possible consequences of refusing treatment of services, and by avoiding coercion.

8. Respect and support the autonomy of the client to participate in the management and decision-making relating to their own health.

16. Practice collaboratively with colleagues, other health professionals and agencies for the benefit of clients.

### **B. Responsibilities to the Profession**

5. Act transparently and with integrity in all professional and business practices including fees and billing; advertising of professional services; and real and/of perceived conflicts of interest.

## **Practice Resource**

### **Clinical Requirements**

#### **1. The physical therapist:**

- (1) Promotes the active involvement of the client and/or family/caregivers in establishing goals with respect to client function and improvement in health-related quality of life;
- (2) Defines in the written plan, where appropriate, client-centered goals, the type and focus of intervention(s), relevant precautions and expected outcomes;
- (3) Uses, where available, evidence-based practice information to guide the development of the plan, taking into consideration client preferences, resource constraints, and individual client factors (e.g., age, previous health history) that may alter expected outcomes; and
- (4) Collaborates with other members of the client's health-care team to co-ordinate plans, support comprehensive service delivery, and avoid service duplication in accordance with the SCPT Regulatory Bylaws and practice guidelines relating to concurrent treatment practices and multidisciplinary practice.

## Interpersonal Requirements

2. Prior to implementing the treatment plan, the physical therapist:
  - (1) Promotes informed decision making by helping the client and/or family understand relevant information, including:
    - a) client and/or family responsibilities relative to the plan;
    - b) the purpose and effect of specific interventions;
    - c) potential risks associated with the proposed plan;
    - d) the anticipated frequency and duration of service;
    - e)
    - f) any personal financial costs associated with the plan; and
  - (2) Obtains consent for treatment.