

### 4.37 Assessment, Diagnosis, Treatment

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#### Standard

The physiotherapist demonstrates **proficiency** in **client** assessment, diagnosis, and treatments to deliver **quality, safe**, client-centered physiotherapy services.

#### Expected outcome

Clients can expect the physiotherapist to select appropriate assessment techniques, make an informed diagnosis and apply treatment procedures that are carried out proficiently for quality delivery of safe, effective physiotherapy services.

#### Performance expectations

The physiotherapist must:

- Obtain clients' ongoing **informed consent** to proposed physiotherapy services.
- Apply professional judgment to select and apply appropriate assessment procedures to evaluate clients' health status. Appropriate assessment includes taking a thorough history and completing a physical examination relevant to presenting symptoms.
- Use **standardized measures** as available to assess and reassess the client's condition and progress.
- Use critical thinking and professional judgment to interpret the assessment findings and determine a physiotherapy diagnosis and prognosis consistent with the physiotherapy profession and the physiotherapist's individual competence.
- Address client's physiotherapy needs and goals by employing professional judgment to develop sensible and practical treatment plans that are consistent with the assessment findings.
- Apply treatment procedures safely and effectively.
- Assign appropriate tasks to **supervisees** with clients' consent, and ensures that services which require the skill, knowledge and judgment of a physiotherapist are performed by a physiotherapist.

- Re-evaluate, monitor, and document clients' responses throughout the course of treatment.
  - Regular and consistent reassessment should be carried out to allow for review of effectiveness of interventions, monitor progress and ensure continuity of care.
  - The frequency of reassessment is relevant to the treatment provided and goals of therapy.
- Make adjustments and/or discontinue physiotherapy services that are no longer required or effective.
- Make appropriate referrals when clients' needs are best addressed in **collaboration** with or by another provider.
- Employ professional judgment and collaborate with clients and other providers, to plan and implement discharge plans appropriate for the client's need, goals and progress.
- Provide client education to enable and optimize clients' transition to self-management.
- Promote continuity in service by collaborating and facilitating clients' transition from one health sector or provider to another when appropriate.
- Deliver only those physiotherapy services that are clinically indicated for clients and that they are competently able to provide.

## Definitions

**Collaborate** means to work jointly with others or together, especially in an intellectual endeavour.

**Informed Consent** refers to "receiving client or their legally authorized representative's permission to proceed with an agreed course of physiotherapy service. Consent may be revoked at any time...Consent can be written or oral and may be expressed or implied. Having a written consent form does not mean there is informed consent. Informed consent involves ongoing communication between the parties involved."

**Proficiency** means performance consistent with the established standards in the profession.

**Quality** is the degree to which a product or service satisfies a specified set of attributes or requirements.

**Safe** means free from harm or risk; secure from threat or danger.

**Standardized Measures:** refers to measurement tools that are designed for a specific purpose in a given population. Information is provided regarding the administration, scoring, interpretation, and psychometric properties for each measure.

**Supervisee** means an individual who is working under supervision. In physiotherapy practice this may include physiotherapist support workers, physiotherapy students, or physiotherapy exam candidates.

**Clients** are recipients of physiotherapy services, and may be individuals, families, groups, organizations, communities, or populations. An individual client may also be referred to as a patient. In some circumstances, clients/patients may be represented by their substitute decision-makers.