

## **SCPT Practice Guideline #4 Evaluation**

### **Background**

When a client has been receiving physical therapy services either in an independent process or as part of a multidisciplinary evaluation, outcome information will lead to greater effectiveness, appropriate discharge planning, and service improvement for the public's benefit.

The SCPT Code of Ethics provides:

3. Physical therapists must respect the client's or surrogate's right to be informed about the effects of treatment and inherent risks.
4. Physical therapists must give clients or surrogates the opportunity to consent or decline treatment or alterations in the treatment regime.
5. Physical therapists shall confine themselves to clinical diagnosis and management in those aspects of physical therapy in which they have been educated and which the profession recognizes.
6. Physical therapists shall assume full responsibility for all care they provide.
7. Physical therapists shall not treat clients when the medical diagnosis or clinical condition indicates that the commencement or continuation of physical therapy is not warranted or is contraindicated.
8. Physical therapists shall request consultation with, or refer clients to, colleagues or members of other health professions when, in the opinion of the physical therapist, such action is in the best interest of the client.
9. Physical therapists shall document the client's history and relevant subjective information, the physical therapist's objective findings, clinical diagnosis, treatment plan and procedures, explanation to the client, progress notes and discharge summary.

### **Practice Guideline**

#### Clinical Requirements

1. The physical therapist:
  - (1) Evaluates and updates intervention plans in accordance with the client's clinical profile when there is:
    - a) no clinical improvement;
    - b) a deterioration in functional status; or
    - c) the onset of new symptoms;

- (2) Reviews and modifies intervention plans on an ongoing basis to maximize progress in accordance with the needs and expected outcomes of the client and/or family, the significance of the clinical benefit(s) achieved, and resource constraints;
- (3) Discusses with the client and/or family significant changes to the intervention and reaches agreement on a revised plan;
- (4) Communicates the results of ongoing evaluation with other members of the client's health-care team;
- (5) Discontinues interventions that are no longer necessary or effective;
- (6) Discontinues specific interventions when requested to do so by the client;
- (7) Plans discharge with the client by:
  - a) determining the client's and/or family's level of knowledge about future service requirements;
  - b) recommending options for ongoing service;
  - c) involving health professionals providing continuing care to the client; and
  - d) identifying resource constraints that may influence planning for discharge;
- (8) Discharges or recommends the discharge of the client when physical therapy services are no longer indicated;
- (9) Uses standardized measures, where available and appropriate, to compare discharge status with the baseline values recorded during the initial assessment; and
- (10) Participates in available program evaluation and clinical effectiveness studies to support the development of outcomes research.

#### Interpersonal Requirements

2. The physical therapist informs the client and/or family about:
  - a) the nature and purpose of ongoing and outcome evaluations;
  - b) results of ongoing assessments; and
  - c) reasons why service is being discontinued