HOSPITAL POLICY
ALLIED HEALTH PROFESSIONAL SERVICES
PHYSIOTHERAPY
HOSPITAL TENGKU AMPUAN AFZAN, KUANTAN



OPERATIONAL POLICY PHYSIOTHERAPY



UNIT OPERATIONAL POLICY PHYSIOTHERAPY

INTRODUCTION

Physiotherapist means an individual who is trained and registered as a physiotherapist to promote, prevent, analyse, make physiotherapy diagnosis, carry out physiotherapy treatment, intervene, habilitate and rehabilitate of any form of physical conditions and disabilities to restore optimum movement and functional abilities.

1. **OBJECTIVES**

- 1.1. To Promote, restore and maintain function abilities in an individual with physical and / or sensory impairment, disability or handicap through scientifically selected purposeful activities, which are graded and monitored continuously.
- 1.2. To provide accurate, efficient, effective and caring services to patients in the wards, out-patients and clients in the community.
- 1.3. To ensure that the equipment is safe and the environment clean and comfortable at all the times.
- 1.4. To encourage the staff to work for self- development through CME and CPD programs.

2. SCOPE OF THE SERVICE

- 2.1. The provision of the following types of Physiotherapy treatment to both inpatients and outpatientsd community as listed below a:
 - 2.1.1. Electrotherapy
 - 2. 1.2. Neurology Rehabilitation
 - 2.1.3. Cardio-Respiratory
 - 2.1.4. Stroke Rehabilitation
 - 2.1.5. Women/Men Health
 - 2.1.6. Phototherapy
 - 2.1.7. Musculoskeletal
 - 2.1.8. Critical Care
 - 2.1.9 Hydrotherapy
 - 2.1.10 Peadiatric Rehabilitation

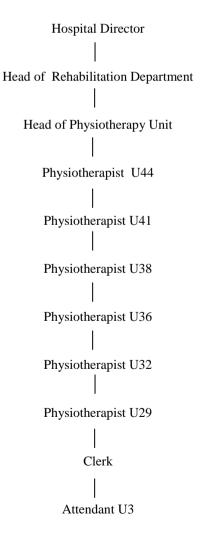
2.1.11 Patients Education



- 2.1.12 Community Based Rehabilitation (Special Child)
- 2.1.13 Hand & Micro Surgery Rehabilitation
- 2.1.14 Cardiac Rehabilitation Therapy
- 2.1.15 Chronic Pain Management
- 2.1.16 Clinical Tutors for Physiotherapy Student
- 2.1.17 Geriatric Rehabilitation
- 2.1.18 Sport Physiotherapy
- 2.1.19 Vestibular Rehabilitation
- 2.1.20 Lymphedema
- 2.1.21 Obesity Intervention

3. **ORGANIZATION**

- 3.1. The unit shall be headed by a senior Physiotherapist who is responsible for the overall management of the unit.
- 3.2. The organization chart is a follows:-





4. POLICY DISCRIPTION

4.1. Referrals

- 4.1.1. The Unit shall provide physiotherapy services for cases referred from the Unit or departments within the hospital, health clinics, private practitioners and hospitals.
- 4.1.2. The unit shall provide out-patient Physiotherapy services for patients referred by Specialists, Medical Officers, Physiotherapist, Occupational Therapist and Speech Therapist from hospitals all over Malaysia.
- 4.1.3. New referral shall provide for the patients transferred in from other ward.
- 4.1.4. All referral should be made using the Physiotherapy referral form or a written memo.

4.2. Operational Hours

- 4.2.1. The Physiotherapist shall render services daily during the offices hour Monday to Friday 8.00 am -5.00 pm
- 4.2.2. The patient shall render services on weekend / public holidays under on call basis from 8.00 am 1.00 pm.

4.3. Fees

- 4.3.1. Patients shall be charged according to the Treasury Fees Order 1952 reviewed 1982.
- 4.3.2. Out patient must deliver Guarantee Letter, Retired Card and 'exemption request' to allow rehabilitation without charge.



4.4. Registration

- 4.4.1. All new cases be registered.
- 4.4.2. A register shall be maintained for patient treated daily and the treatment unit given.
- 4.4.3. Statistics (number of attendance and treatment units) shall be compiled monthly.

4.5. Patient integrity

4.5.1. While examine body part which involve patient's modesty, presence of chaperone must be make available.

4.6. Documentation.

- 4.6.1. Treatment given shall be recorded daily in patient record using POMR format.
- 4.6.2. Initial assessment is carried out using Physiotherapy Assessment Form shall be done by the physiotherapist.
- 4.6.3. All patient should have their own / individual RPP (Rekod Perubatan Pesakit). All information regarding the patient shall be confidential and release only with patient consent or by laws. Patient shall be informed of their problem and treatment given.

4.7. Discharge Plan

- 4.7.1. Follow-up appointment shall be given before patient is discharge from the ward if necessary.
- 4.7.2. When it is deemed that the patient no longer needs Physiotherapy treatment, a report shall be made in writing to the referred doctor to inform that the patient is discharged from Physiotherapy.
- 4.7.3. The Physiotherapy shall determine when the treatment shall be continued or discontinued.



- 4.7.4. A discharged plan shall be made in writing before the patient leave e.g. whether he is referred to another hospital, health clinic or non-governmental agencies / homes.
- 4.7.5. A referral will be deemed expired after 2 months if patient defaults without any reason from the last appointment.

4.8. Patient Movement

4.8.1. The Physiotherapist Unit staff shall be responsible for moving patients within the Unit only.

4.9. Safety and Health Issues

- 4.9.1. All Physiotherapist and staff shall practice 'Universal Standard Precaution'. The working area shall be optimizing to ensure a safe and healthy working environment for all staff, patient and publics.
- 4.9.2. All safety measure / regulation as stated in existing guideline shall be adhered to.

4.10. Movement of Supplies

4.10.1.Medical supplies shall be indented from the medical store by the Unit.

The supplies shall be checked at the issuing areas in the medical store by designated officer before being delivered to the Unit by the medical store staff.

4.11. Maintenance

- 4.11.1. All department shall use the maintenance requisition form requesting for repairs.
- 4.11.2. The Physiotherapist shall maintain an updated inventory of all Unit equipment and assets. She shall ensure that all equipment are serviced regularly and maintained in good repair by the Engineering Department (privatized).



4.12. Quality

The Physiotherapy adheres to all quality programs and other practice settings. The program and services must be reviewed periodically to ensure that they reflect recent professional development.

4.13. Legal and Ethical Components

The Physiotherapist shall abide by ethical practices of Ministry of Health Malaysia or other related agencies. The public Office regulation (Conduct and discipline) 1993 shall be adhered to.

The Physiotherapist shall observe and adhere to the code of ethics of the Malaysia Physiotherapist Association (MPA).

CONCLUSION

The Unit policy shall be applicable to all hospitals and health clinic in the Ministry of Health, Malaysia .Monitoring and supervision shall be done periodically or when deemed necessary by the members of the working committee of the Physiotherapy services.