

CODE OF ETHICS OF THE PHILIPPINE PHYSICAL THERAPY ASSOCIATION

Ratified November 26, 2000

PREAMBLE

The physical therapist member of the Philippine Physical Therapy Association accepts this Code of Ethics as the basis for the practice of his/her profession. Individually and collectively, these members of the Association are responsible for promoting and maintaining the highest ethical standards.

ARTICLE I. DEFINITION OF TERMS

Section 1. Physical Therapy

Physical therapy is providing services to people to develop, maintain and restore maximum movement and functional ability throughout the lifespan. Physical therapy is concerned with identifying and maximizing movement potential within the spheres of promotion, prevention, treatment and rehabilitation.

Physical therapy is the service provided only by, or under the direction or supervision of a physical therapist. The clinical practice of physical therapy includes assessment, diagnosis, planning, intervention and re-evaluation.

Assessment includes both the *examination* of individuals or groups with actual or potential impairments, functional limitations, disabilities or other conditions of health by history taking, screening and the use of specific tests and measures and *evaluation* of the results of the examination through analysis and synthesis within a process of clinical reasoning.

Diagnosis arises from the examination and evaluation and represents the outcome of the process of clinical reasoning. This is expressed in terms of movement dysfunction and encompasses categories of impairments, functional limitations, abilities/disabilities or syndromes.

Planning begins with determination of the need for intervention and normally leads to the development of a plan of intervention, including measurable outcome goals negotiated in collaboration with the patient or caregiver.

Intervention is implemented and modified in order to reach agreed goals and may include manual handling, movement enhancement, physical, electrotherapeutic and mechanical agents, functional training, provision of aids and appliances, patient-related instruction and counseling, documentation and coordination, and communication. Intervention may also be aimed at prevention of impairments, functional limitations, disability and injury including the promotion and maintenance of health, quality of life, and fitness in all ages and populations.

Re-evaluation necessitates re-examination, including assessment, diagnosis and planning, for the purpose of evaluating outcomes.

Section 2. Physical Therapist (PT)

A person who is the holder of a registered and valid professional license legally qualified to practice physical therapy. A physical therapist holds a degree of Bachelor of Science in Physical Therapy from an accredited school.

ARTICLE II. GENERAL RESPONSIBILITIES

Section 1. The need for Physical Therapy is universal. The service of the PT is therefore unrestricted by considerations of nationality, creed, color, politics or social status.

Section 2. Each PT shall act as representative of the whole profession and as such, conduct himself/herself with honor and integrity.

Section 3. The PT must serve the patient's interest with the greatest solicitude, giving always his/her best knowledge and skills.

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Section 4. The PT must safeguard the legitimate interest, reputation and dignity of his/her colleagues.

ARTICLE III. RESPONSIBILITIES TOWARDS THE PROFESSION

Section 1. The PT does not base his/her practice on any exclusive dogma or sectarian system. He/She should strive to broaden his/her cultural outlook and deepen his/her professional interest. He/She shall pursue studies to improve his/her efficiency and enhance the prestige of the profession.

Section 2. The PT shall avoid any conduct which may cause discredit to the profession. Nobility of character should be the guiding principle.

Section 3. The PT shall provide consultation, evaluation, treatment and preventive care, in accordance with the laws and regulations of the jurisdictions which they practice.

Section 4. The PT shall report to the proper authorities any knowledge of unethical practices being carried on by any member of the profession and be willing to testify in any investigation of such charges if requested.

Section 5. Practice Arrangements

- 5.1 The practicing PT shall not directly involve himself in the promotion, or sale of any device, apparatus or drugs.
- 5.2 Participation in a business partnership, corporation or other entity doesn't exempt the PT, whether employer, partner, or stockholder, either individually or collectively, from the obligation of promoting and maintaining the ethical principles of the Association.
- 5.3 The PT shall advise their employer/s of any employment practice that causes a PT to be in conflict with the ethical principles.

Section 6. Continuing Education

- 6.1 The PT shall participate in educational activities that enhance his/her basic knowledge and provide new knowledge.
- 6.2 Whenever the PT provides continuing education, he/she shall ensure that course content, objectives and responsibilities of the instructional faculty are accurately reflected in the promotion of the course.

Section 7. Research

- 7.1 The PT shall support research activities that contribute knowledge for improved patient care.
- 7.2 The PT engaged in research shall ensure the:
 - 7.2.1 consent of subjects;
 - 7.2.2 confidentiality of the data on individual subjects and the personal identities of the subjects;
 - 7.2.3 well-being of all subjects in compliance with facility regulations and laws of the jurisdiction in which the research is conducted;
 - 7.2.4 the absence of fraud and plagiarism;
 - 7.2.5 full disclosure of support received;

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7.2.6 appropriate acknowledgement of individuals making a contribution to the research

7.3 The PT shall report to appropriate authorities any acts in the conduct or presentation of research that appear unethical or illegal.

Section 8. Education in the Academic and Clinical Settings

8.1 The PT shall support quality education in academic and clinical settings.

8.2 The PT functioning in the educational role is responsible to the students, the academic institutions and the clinical settings for promoting ethical conduct in educational activities.

Whenever possible the educator shall ensure:

8.2.1 The rights of students in the academic and clinical setting;

8.2.2 Appropriate confidentiality of personal information;

8.2.3 Professional conduct toward the student during the academic and clinical educational processes;

8.2.4 Assignment to clinical settings prepared to give the student a learning experience.

8.3 Clinical educators are responsible for reporting to the academic program student conduct that appears to be unethical or illegal.

Section 9. Review and Self-Evaluation

9.1 The PT shall provide for utilization review of his/her services.

9.2 The PT shall demonstrate his/her commitment to quality assurance by peer review and self- assessment.

ARTICLE IV. RESPONSIBILITIES TO CLIENTS

Section 1. The PT shall attend to his/her patients faithfully and conscientiously, securing for them all the benefits that may depend upon his/her professional skill and care.

Section 2. The PT shall regularly evaluate the patient's condition. Any unusual changes in the patient's condition should be reported to the physician-in-charge.

Section 3. The PT shall be guided by concern for the physical, psychological and socioeconomic welfare of individuals entrusted to his/her care.

Section 4. The PT shall recognize and respond to the differences of each individual.

Section 5. The PT shall adhere to the rule of confidentiality on all matters pertaining to the patient, except in the interest of justice, public health or public safety.

5.1 Information relating to the PT-patient relationship is confidential and may not be communicated to a third party not involved in the patient care, without prior consent from the patient.

5.2 Information derived from component sponsored peer review shall be held confidential by the reviewer unless written permission to release the information is obtained from the patient who was reviewed.

5.3 Information derived from the working relationships of the PT shall be held confidential by all parties.

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- 5.4 Information may be disclosed to appropriate authorities when it is necessary to protect the welfare of the individual or the community.

Section 6. The PT shall accept responsibility for the exercise of professional judgment.

- 6.1 Upon accepting an individual for physical therapy services, the PT shall assume the responsibility of evaluating the individual; planning, implementing, supervising the therapeutic programs; re-evaluating and changing the program; and maintaining adequate records of care, including progress reports.
- 6.2 If the individual's needs are beyond the scope of expertise of the PT, the individual shall be informed and assisted in finding a qualified person to provide necessary services.
- 6.3 When the PT judges that benefit can no longer be obtained from his/her services, the individual receiving these services shall be informed.
- 6.4 The PT shall maintain the ability to make independent judgments --- not initiated or compromised by professional affiliation, including employment relationships.

Section 7. The PT shall exercise responsible delegation of tasks relating to the practice of the profession.

- 7.1 The PT shall not delegate to a less-qualified person any activity that requires the unique skill, knowledge and judgment of a PT.
- 7.2 The primary responsibility for physical therapy care rendered by supportive personnel rests with the supervising PT. Adequate supervision requires, at a minimum, that a supervising PT perform the following activities:
- 7.3.1 Designate or establish channels of written and oral communication.
 - 7.3.2 Interpret available information concerning the individual under care
 - 7.3.3 Provide initial evaluation.
 - 7.3.4 Develop plan of care, including short and long term goals.
 - 7.3.5 Select and delegate appropriate tasks of plan of care.
 - 7.3.6 Assess competence of supportive personnel to perform assigned tasks.
 - 7.3.7 Direct and supervise supportive personnel in delegated tasks
 - 7.3.8 Identify and document precautions, special problems, contraindications, goals, anticipated progress and plans for re-evaluation.
 - 7.3.9 Re-evaluate, adjust plan of care when necessary, perform final evaluation, and establish follow-up plan.

Section 8. Consumer Protection

- 8.1 The PT shall report any conduct that appears to be unethical, incompetent or illegal
- 8.2 The PT may not participate in any arrangements in which patients are exploited due to the referring sources' enhancing their personal incomes as a result of referring for, prescribing, or recommending PT.

ARTICLE V. RESPONSIBILITIES TO THE PUBLIC

Section 1. The PT shall cooperate with the proper authorities in the promotion of health in the community. He/She should inform the public on the dangers of communicable diseases, injuries, deformities and their prevention.

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Section 2. The PT shall render his/her services unselfishly to the indigent in accordance with correct standards of practice.

Section 3. The PT shall endeavor to educate the public to an awareness of the PT profession through such means as publication of articles and participation in seminars, lectures and civic programs.

Section 4. Information given to the public shall emphasize that individual problems cannot be treated without individualized evaluation and plans/programs of care.

Section 5. The PT may provide information about themselves to the public to facilitate the public selection of a PT.

Section 6. The PT shall not use, or participate in the use of any form of communication containing a false, plagiarism, fraudulent, misleading, deceptive, unfair or sensational statement or claim.

Section 7. The PT shall not compensate or give anything of value to a representative of the press, radio, television, or other communication medium in anticipation of, or in return for, professional publicity in a news item.

Section 8. A paid advertisement shall be identified as such unless it is apparent from the content that it is an unpaid advertisement.

ARTICLE VI. RESPONSIBILITIES TO OTHER PHYSICAL THERAPISTS

Section 1. The PT shall work harmoniously with his/her colleagues and be willing to share his/her knowledge and experience.

Section 2. The PT shall observe utmost caution, tact and prudence regarding the professional conduct of other physical therapists. He/She should not say or do anything that may lessen the patient's confidence in his/her co-therapist.

Section 3. The PT shall not take charge of, nor advise a patient under the care of another therapist, unless in the case of emergency, or upon endorsement of the attending therapist.

Section 4. The PT before leaving his/her position shall organize and leave all the records and other data necessary to carry on the work for his/her successor.

Section 5. Irreconcilable difference of opinion or conflict among physical therapists shall be referred to competent bodies, selected by the PPTA Board of Directors, for arbitration.

ARTICLE VII. RESPONSIBILITIES TO OTHER HEALTH PROFESSIONALS

Section 1. The PT shall cooperate with and safeguard the interest, reputation and dignity of other health professionals.

Section 2. The PT shall make due acknowledgement of assistance received from other health professionals.

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Section 3. The PT shall be imbued with the spirit of loyalty, mutual confidence, respect and faith in other health professionals joining them in cheerful cooperation and self-sacrifices for the common good.

Section 4. Professional criticism of associates shall be made only for the welfare of the patient and the service, and only in formal accusation before the proper authority to try the case on its merits.

Section 5. The PT shall not criticize the qualifications of any competitor in order to gain preference in employment.

Section 6. The PT shall give treatment only upon referral of a duly licensed and registered health professional

Section 7. The PT shall give all the necessary information concerning the case to the referring health professional during the progress of the treatment.

Section 8. The PT may suggest to the referring source the possibility of referring the person under care to a qualified individual whose services may be beneficial.

ARTICLE VIII. REMUNERATION

Section 1. The PT shall never place their own financial interest above the welfare of the individuals under their care.

Section 2. Fees for PT services should be reasonable for the services performed, considering the setting in which it is provided, practice costs in a geographic area, judgment of other organizations and other relevant factors.

Section 3. The PT should attempt to ensure the providers, agencies, or other employers adopt PT fee schedules that are reasonable and that encourage access to necessary services.