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| The [Collaborative Care Standard](https://collegept.org/standard/collaborative-care-standard-2025/) outlines the expectations for physiotherapists when working collaboratively with other healthcare professionals. This table can be used to facilitate these considerations in your workplace. If you have any questions, please contact Practice Advice at 1-800-583-5885 ext. 241 or [advice@collegept.org](mailto:advice@collegept.org). | | |
| **Considerations** | **In-patient**  **Physiotherapist** | **External**  **Physiotherapist** |
| Consent | Responsible for obtaining patient (or secondary decision maker) consent to share personal health information with external PT. | Responsible for obtaining patient (or secondary decision maker) consent to share personal health information with in-patient PT. |
| Communication | Responsible for collaborating with patient and communicating with external PT. | Responsible for collaborating with patient and communicating with in-patient PT. |
| Use of hospital/facility equipment? | Yes | Unclear — must obtain clarity by communicating with facility. |
| Use of hospital auxiliary staff? Example: PTA | Yes | No |
| Permission to view patient’s in-patient chart? | Yes | No, unless have permission from organization’s Privacy Officer. |
| Goals of Treatment | Developed with patient following assessment; revisit to ensure goals are compatible with patient, family and external PT. | Developed with patient following assessment; ensure they are compatible with patient, family and in-patient PT. |
| Treatment Plan | Established with considerations of care provided by external PT. | Established with considerations of care provided by in-patient PT. |
| Questions each PT should ask themselves | * Is my care compatible with the other PT? * Is my care clinically indicated? * Is my care in the patient’s best interest? * Is my care an appropriate use of human/financial resources? * Have I identified risks? For example, unneeded duplication of services, excessive fatigue to patient, contradictory treatment approaches or communication challenges that may interfere with safe, quality care. * How will we manage these risks? For example, ensure discussions about conflicts and rationale for resolutions are documented. * If I am considering discharge, can I meet the [Duty of Care](https://collegept.org/standard/duty-of-care-standard/) Standard? | |
| *\*Refers to hospital, long-term care, rehab and other in-patient settings* | | |