

## Australian College of Physiotherapists (ACP) Milestone Three: Evidence Portfolio Pathway Gerontological Physiotherapist Scope of Practice

### Guidelines for submission of portfolio and clinical exam

This document provides an overview of the skills, competencies, and capabilities a gerontological physiotherapist should demonstrate to be credentialed as a Titled Gerontological Physiotherapist. This will be assessed via submission of a portfolio of evidence and a clinical examination. The submitted portfolio will need to demonstrate the full scope of practice of a physiotherapist operating at Milestone 3 of the APA career pathway, across the seven roles of the Physiotherapy Competence Framework (Physiotherapy Practitioner, Communicator, Collaborator, Leader, Health Advocate, Scholar, and Professional).

A gerontological physiotherapist operating at Milestone 3 will have achieved clinical competence in delivering safe and effective management of a broad range of complex conditions associated with ageing within a variety of clinical settings.

This document is to be read in conjunction with the Titling Evidence Portfolio Learning Outcomes document.

### Specific Scope of Practice for Titled Gerontological Physiotherapist – Evidence Portfolio

Physiotherapists providing care for older adults primarily focus on enabling older adults to live well and participate meaningfully. Physiotherapists work collaboratively with the older person and members of the therapeutic alliance (family members and care team) to manage impairments and activity limitations taking into consideration the psycho-social and environmental contexts. A client-centred, inter-disciplinary and integrated approach is required to manage the wide range of health condition affecting older adults while maintaining their dignity and respect. *\*Adapted from IPTOP standards of practice 2021*

Where we refer to client in this document, we are referring to adults aged 65 years and older (50 years and older for Aboriginal and Torres Strait Islander people).

A Titled Gerontological Physiotherapist will be able to:

1. Demonstrate client centred and evidence informed screening, assessment, and management (including exercise and physical activity prescription) of health conditions associated with older adults based on a highly developed understanding of the changes associated with ageing on various body systems and adapting the approach as needed.
  - a. Client centred and evidence informed assessment and management of common conditions including but not limited to
    - i. frailty including osteoporosis and sarcopenia
    - ii. falls
    - iii. cognitive impairment
    - iv. life limiting conditions by implementing principles of palliative care and end of-life care.
  - b. Appropriately select relevant measurement and assessment tools to quantify impairments, activity limitations, participation restrictions and impact of various health conditions on quality of life across the breadth of functional abilities to objectively measure changes over time.



2. Demonstrate effective written and verbal communication by adaptation of communication style in response to the impact of health literacy, health conditions and bio-psycho-social factors associated with ageing.
  - a. Determine the extent and facilitate the involvement of family members and caregivers in synthesising relevant information and delivering safe and culturally appropriate care
  - b. Recognise the impact of cognitive impairment and communication disorders in the therapeutic approach including but not limited to obtaining informed consent and shared decision making.
3. Collaborate with colleagues from other professions and caregivers recognising the unique implications of shared and overlapping responsibilities when providing services to clients.
  - a. Provide education and training to caregivers including advice on adequate manual handling and use of equipment.
  - b. Facilitate transition of the older person through the health and aged care system by completing procedural requirements, education to clients and their caregivers.
  - c. Safely and effectively delegate management to allied health assistants, exercise professionals and refer to other professionals as needed
4. Provide optimal and cost-appropriate physiotherapy services to clients by utilising and/or advocating for resources available within various settings underpinned by a working knowledge of the Australian health and aged care systems.
  - a. Support client and caregivers to access resources and make informed decisions about the most effective utilisation of resources underpinned by evidence informed practice
  - b. Support clients and caregivers to access relevant and necessary services and therapy by actively challenging ageist attitudes when making decisions, underpinned by evidence informed practice
5. Demonstrate the management of complexity by identifying and addressing factors impacting client's care needs, across multiple determinants of health.
6. Incorporate a culturally responsive and realistic view of the ageing trajectory by acknowledging the diverse impacts of ageing on each individual as well as the impact of personal, environmental and cultural factors on engagement with health and aged care services; within their therapeutic approach with the client.
7. Promote healthy ageing behaviours and physical activity by incorporating adequate and personalised behaviour change strategies with each client.
8. Recognise the importance of identifying elder abuse and offer support based on a working knowledge of support systems available within legislative obligations.

### **Gerontology Titling – Milestone 3 - Clinical Assessment – notes to guide candidate**

The clinical assessment will provide the candidate the opportunity to demonstrate competence in the practitioner role however the assessment will also incorporate the roles of communicator, professional and collaborator. The candidate selects one client who is able to provide consent or that consent can be obtained from a person who has a formal/legal decision-making role for the client. A video of an initial assessment and follow up is to be submitted. If the candidate works in a setting where the follow up is difficult to arrange e.g. acute care, the candidate may submit a written summary of the aspects that would form part of a follow up as well as the discharge planning information. A case study template is provided for candidates to submit a written summary of the case both for the initial and follow up information.

#### **Client selection**

Existing client base- the candidate may have an existing client whom they select to undergo another “initial assessment” taking on the assessment clients' needs at that point in time. Gaining consent from a client for the process of being filmed will be easier from a client already known to the candidate. In hospital settings the candidate may need to request time outside of usual hours or cooperation from their employer to arrange the additional time to set up for filming and assessment. The time between assessment and follow up may be shorter and there will be opportunity to discuss potential improvement/ progression that a client may gain through the written reflection. For candidates who find their employer unable to support the video assessment they may wish to assess a contact outside of their working role e.g. a family member. The assessor is looking at the overall candidate's interaction with the client, ability to collect information and perform assessment as well as the ability to generate a management plan and demonstrate their thought processes.

Cases should include clinical presentations of conditions commonly associated with ageing. Some examples include:

- Osteoarthritis
- Dementia/ Cognitive impairment
- Persistent pain
- Deconditioning
- Frailty
- Osteo-sarcopenia
- Osteoporosis
- Neurological conditions- Stroke, Parkinson's disease, Multiple Sclerosis, post-polio syndrome

Interventions and skills that may be demonstrated in the clinical exam include:

- Falls prevention and post fall assessment
- Rehabilitation post illness/ surgery/ accident
- Mobility assessment and care planning
- Manual handling recommendations
- Frailty identification and management
- Skin and pressure area care
- Health promotion
- Exercise or physical activity prescription
- Behaviour change strategies that support uptake and sustained participation in recommended interventions
- Equipment prescription
- Cardiorespiratory rehabilitation
- Continence management

As part of the clinical examination, the candidate demonstrates that they can identify other health determinants which may affect the client, their condition, and their clinical outcome, including:

- Co-morbidities
- Past medical and surgical history
- Cultural influences
- Health literacy and psycho-social influences, including environment, trauma and consideration of the client's socio-economic situation
- Family and caregiver supports

The candidate selects appropriate outcome measures from different domains to aid assessment and re-assessment of the client. In their client assessment, the candidate should also demonstrate their ability to:

- Plan the assessment in collaboration with the client (and appropriate caregiver/family supports), including obtaining informed consent for proposed assessment methods.
- Select appropriate physical assessment techniques for examining the client based on the subjective assessment and hypotheses created from the history.
- Appropriately interpret the results of any imaging or tests to inform differential diagnoses.
- Apply clinical reasoning and shared decision making in interpreting findings and formulating an accurate differential diagnosis and tailored holistic management plan. For aged care service recipients this may include care planning with case coordinators or residential aged care facility management
- Apply evidence-informed practice in clinical reasoning and treatment planning.

In their client intervention, the candidate should demonstrate:

- Execution of the selected intervention interventions in a skillful and safe manner and progression or modification of the intervention/s based on client/client's response.
- The ability to prescribe and educate clients and caregiver on the use of mobility aids, mechanical lifting devices and other equipment.