

PHYSIOTHERAPY WORKPLACE ASSESSMENT

1. WALK THROUGH

A WALK-THROUGH OF THE WORKPLACE SHALL FIND THE FOLLOWING:

	YES	NO	N/A
1. A policies and procedures manual (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Emergency exits unobstructed and clearly marked (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Sharp and hazardous waste containers present (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Fire extinguishers are present and functioning (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. First aid kit present (OH&S regulation) (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Charting done in non-public area (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Storage of charts –secure and able to lock (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Adequate space to meet the workload and allow for safe movement about the area (23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Clean and tidy workplace (23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Wheelchair accessible workplace (23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Call bells are present in each treatment area (5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Fee schedule visible at front desk or on intake form (13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. If this is a “Health” clinic, are the PT names posted with designation as per legislation (20)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Client scheduling system present showing # hrs. worked and # of pts. seen / week per physiotherapist (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THE WORKPLACE POLICIES AND PROCEDURES MANUAL SHALL BE AVAILABLE AND SHALL INCLUDE THE FOLLOWING:

	YES	NO	N/A
14. Scope and limitations of the physiotherapy service (e.g. mission statement or profile of service) (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Current organizational chart which delineates the relationships and formal lines of communication within the physiotherapy service (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Written job descriptions or duties for each position for delegation purposes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Billing policies re. Billing insurance companies and fee schedule (13)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Orientation program for all new staff (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Electrical equipment functioning properly with documented calibration and service done appropriately (5, 23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Grounded outlets with ground fault interrupters where necessary and documentation done once by electrician (23)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Infection control and WHIMIS procedures (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Fire and emergency plans (15)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Staff development plan; with allowance for continuing education. (14)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Confidentiality policies (use, storage and disclosure for personal information; back-up of electronic files, etc) (8)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Copy of malpractice insurance and physiotherapy license for each physiotherapist on staff (should be in clinic binder and/or in Member's Portfolio)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>