


**Institution Name:** Directorate General of Specialized Medical Care, MOH**Document Title:** Procedure of Physiotherapy On call**Approval Process**

	Name	Title	Institution	Date	Signature
Written by	Jokha Salim Al Abrawi	HOD Physiotherapy	Al Nahdha Hospital	Jan 2021	Jokha Salim Al Abrawi
	Nasser Al Sulaimi	Senior Physiotherapist	Royal Hospital	Jan 2021	Nasser Al Sulaimi
Reviewed by	Samiya Al Raisi	HOD, Rehabilitation Services	Ministry of Health	Jan 2021	Samiya Al Raisi
	Najeem Al Balushi	Nursing Practice for Primary Health Care	Ministry of Health	Jan 2021	Najeem Al Balushi
Validated by	Dr.Qamra Al- Sariri	DG of DGQAC	Ministry of Health	Jan 2021	<i>Qamra Al Sariri</i>
Approved by	Dr.Kadhim Jaffar Sulaiman	DG of DGSMC	Ministry of Health	Jan 2021	



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Idris Al Balushi	Directorate General of Specialized Medical Care
Jokha Al-Abrawi	Al Nahdha Hospital
Nasser Al Sulaimi	Royal Hospital
Asaad Al- Qasmi	Director General of Specialized Medical Care
Najeem Al Balushi	Directorate General of Nursing Affairs



Acronyms:

MOH	Ministry of Health
DG	Directorate General
DGSMC	Directorate General of Specialized Medical Care



Procedure of Physiotherapy on Call

1. Introduction

This procedure outlines the on call physiotherapy services which are available within all rehabilitation departments within the MOH. The physiotherapy departments provide a 24-hour acute care respiratory service 7 days per week. During these hours, there is a physiotherapist on call who may be asked to come in and provide physiotherapy services for acutely ill patients. The hours of on call service are show below;

Hours of Physiotherapy Service

7.30am – 2.30pm Regular working hours

2.30pm – 7.30am On call hours from Sunday to Thursdays

7.30am – 7.30am Friday/ Saturday and public holidays

* Hospitals where regular working hours from 7:00 am – 2:00 pm will apply the procedure according to their regular working hours.

2. Scope

This procedure applies to all physiotherapy staff members who are involved in providing on-call services.

3. Purpose

3.1 To ensure that the out of hours emergency on-call physiotherapy service is timely, based on multidisciplinary team assessment and that therapy is provided by appropriately trained and competent physiotherapists.

3.2 To inform all medical, nursing and physiotherapy staff members about the policy and procedures for calling in the on -call physiotherapist.

4. Definitions

On-call physiotherapy: is the service provided to patients with respiratory and mobilization problems, who require urgent attention or have ongoing physiotherapy needs and whose condition would deteriorate without physiotherapy intervention.



5. Procedure

- 5.1** One physiotherapist is on call after regular working hours (2.30pm- 7.30am); the on-call physiotherapist can be contacted through his/her mobile phone or duct phone.
- 5.2** On-call is available for emergency purposes only from 2.30pm to 7.30am daily.
- 5.3** Medical doctor must personally contact the on-call Physiotherapist through physiotherapy department/ physiotherapist's mobile phone after assessing the patient and determining the patient fits the physiotherapy on-call criteria.
- 5.4** Physiotherapist will be available at the hospital within 1 hour of being called.
- 5.5** The on-call physiotherapist will be phoned and notified of high risk patients after duty hours (2.30 pm) by the day staff. If called, the on-call physiotherapist should check that the patient criteria for on call have been met.
- 5.6** If there are discrepancies and the physician insists that physiotherapy is required for the patient, the physiotherapist should come in and treat the patient, then report the discrepancies to the Head of the rehabilitation department.
- 5.7** Based on assessment finding, the physiotherapist will determine the appropriate treatment.
- 5.8** Physiotherapists cannot accept specific treatment orders.

6. Responsibilities

6.1 Doctor

- 6.1.1** A referrer doctor, it is the responsibility of the referrer to ensure the patient meets the on call criteria and that adequate clinical information is given to the on-call physiotherapist on referral.

6.2 Staff Nurse

- 6.2.1** The staff nurse caring for the patient is responsible to notify the shift supervisor about patient's condition after conducting thorough assessment of the patient.
- 6.2.2** The shift supervisor notifies the physician on-call.
- 6.2.3** Follow up the physiotherapist on-call visit, and recommendations.

6.3 On-Call Physiotherapists

- 6.3.1** Carries the mobile phone or duct phone during on call period.



- 6.3.2 Ensures they are able to attend the hospital within 60 minutes of agreeing to come for on call period
 - 6.3.3 Ensures the call request is from a registrar or more senior medical officer
 - 6.3.4 Discusses patient's condition and request for on call service with the medical officer
 - 6.3.5 Documents in patient notes, assessment and treatment
 - 6.3.6 Liaises with the staff nurse and the referrer doctor about the result of the consultation and treatment.
 - 6.3.7 Deliver respiratory physiotherapy service according to the referral requirements and physiotherapy assessment.
 - 6.3.8 Carry out physical assessment and management for acute cases that requires mobilization therapy
 - 6.3.9 Review chronic/ prolonged admitted cases (respiratory and mobilization) during long public holidays that exceeds two days.
- 6.4 Rehabilitation HOD/ Inpatient In-charge / Appointed Supervisor**
- 6.4.1 Design a monthly Rota with the required details
 - 6.4.2 Assess the learning needs of all staff using the local competency assessment tool.
 - 6.4.3 Assist staff to identify learning opportunities.
 - 6.4.4 Use a reserve on-call list which will be used when staff are unable to do their on-call due to ill-health or exceptional circumstances.



7. Document History and Version Control

Document History and Version Control			
Version	Description of Amendment	Author	Review Date
01	Initial Release	Jokha Al-Abrawi	Januray 2024
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Written by		Reviewed by	Approved by
Jokha Al-Abrawi		Samiya Al Raisi	Dr.Kadhim Jaffar Sulaiman

8. Related Documents:

There is no related document for this procedure



9. References:

Title of book/ journal/ articles/ Website	Author	Year of publication	Page
Early Mobility and Walking Program for Patients in Intensive Care Units: Creating a Standard of Care. <i>Am. J Critical Care.</i>	Perme, C., Chandrashekar, R	February 2009	
Physiotherapy in Intensive Care	Stiller, K	September 2013	825-47