



Ordre professionnel
de la physiothérapie
du Québec

PREUVE DE COMPÉTENCE

REGULATION ON RECORD KEEPING, PLACES OF
PRACTICE, EQUIPMENT AND THE CESSATION OF
PRACTICE BY A MEMBER OF THE ORDRE
PROFESSIONNEL DE LA PHYSIOTHÉRAPIE
DU QUÉBEC

EXPLANATORY GUIDE

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INTRODUCTION

The Regulation on record keeping, places of practice, equipment and the cessation of practice by a member of the Ordre professionnel de la physiothérapie du Québec (hereinafter the “Regulation”) came into force on December 17, 2015.

This explanatory guide is designed to help you better understand the Regulation. It explains the scope of the Regulation’s provisions but must not be construed as providing a legal interpretation of the Regulation.

The OPPQ also provides a [Guide on drafting simpler records](#) that informs you of what the Order expects of you when it comes to drafting records.

 It may be consulted in the “Tenue des dossiers” section under the “Membre” heading at www.oppq.qc.ca.

SECTIONS I AND II : **DRAFTING RECORDS**

A record is a legal document that contains all of the information on a client who requests and receives professional services as well as all relevant information regarding those services.

The record belongs to the client. The professional, establishment and/or private clinic is its legal custodian, not its rightful owner.

Main objectives of keeping records:

- » Provide the client with access to the information contained in his record¹ and recognize the client’s right to have any inaccurate information corrected²
- » Ensure the continuity, quality and consistency of the services provided to the client
- » Facilitate communications between professionals
- » Account for the services provided by the professional and provide tangible proof of the acts performed

¹ Articles 56 to 60 of the Code of ethics of physical therapists and physical rehabilitation therapists

² Articles 61 to 64 of the Code of ethics of physical therapists and physical rehabilitation therapists

DRAWING UP **OF THE RECORD**

REGULATORY OBLIGATIONS (ARTICLES 1, 3, 4 AND 5)

This Regulation applies to all of the types of activities performed by physiotherapists and physical rehabilitation therapists (PRTs), regardless of place of practice. Regardless of where a physiotherapy professional practices, he is obliged to draw up and keep client records.

The obligation for members to keep a record for each client is the general rule. However, Article 5 of the Regulation provides members with the possibility, if permitted in their place of practice, of drawing up a single record for all clients in the case of group interventions.

In the case of a member who practices in a centre operated by an establishment in the meaning of the Act respecting health services and social services or the Act respecting health services and social services for Cree Native persons, the user's record drawn up and maintained by the establishment is considered as the member's record. The member is required to enter into it all information mentioned in the Regulation.

In the case of a member who practices on behalf of another person, for example as an employee of a private clinic, a sports centre or a private residence, it is permitted that he use his employer's records if it is possible for him to draw up and maintain all information mentioned in the Regulation. However, before entering information in a record, the member shall make sure that the confidentiality of the record and the client's right of access thereto are protected by his employer. Otherwise, the member is required to draw up a physiotherapy record for each of his clients, maintain the records thereby drawn up, and reply to his clients' requests for access to their records.

RECORD SUPPORT (ARTICLE 2)

Paper and/or electronic copies of records can be kept.

The Order authorizes its members to establish, maintain, keep and preserve electronic copies of their client records. However, the Regulation stipulates that the electronic support that is used must protect the confidentiality and integrity of the information as well as clients' rights to access their record and request corrections thereto. Here are a few examples of what the member shall implement to ensure compliance with these requirements:

- » use a personal digital signature;
- » use a distinct directory for client records;
- » protect access to the data, specifically by using a security key and user authentication;
- » use a document management software designed so that the data already entered cannot be modified (for example, using the standard Microsoft Word software does not meet this requirement);
- » use software allowing data to be printed;
- » store, in another location, a backup copy of data.

The personal digital signature can be used like a handwritten signature and saved once the data has been entered in the electronic record. It shall guarantee the integrity of the information and the authentication of its author.

IDENTIFICATION OF THE PROFESSIONAL (ARTICLE 8)

The member shall enter in the record his name and member number in legible characters. To facilitate communications, it is recommended to enter this information at the first client intervention.

Also, all of the member's entries in the record must be signed or initialed. The signature or initials shall be followed by the member's professional title or abbreviation and all entries must be dated.

In the case of an electronic record, a personal digital signature is permitted and considered as valid.

LEGIBILITY OF THE ENTRIES (ARTICLE 8)

It is very important that entries are legible, as stipulated in the Regulation. All physiotherapy professionals shall see to providing entries that are legible to other stakeholders or a client who requests a copy of his record.

CORRECTIONS AND ADDITIONS (ARTICLE 8)

All entries in a record are permanent. Therefore, an erasable ink pen or a pencil cannot be used to make entries. Corrections or additions to a record must be easily distinguishable from the initial entries. Nothing that has already been entered in the record may be deleted, modified or altered, for example by an erasure that completely hides what was previously entered. In such cases, the physiotherapy professional is required to make a complementary entry and dated with the day the correction is made.

Unless the information contains errors, it is illegal to delete, modify and/or correct information or items that are already in the record, even when requested by the client. The member who does so exposes himself to disciplinary sanctions if said information is relevant and important for the physiotherapy diagnosis or treatment.

These remarks also apply to electronic records. Consequently, an entry in a record cannot be corrected a posteriori without complying with the aforementioned guidelines.

PRODUCTION TIMELINE (ARTICLE 9)

The entry in the record must be made during the consultation or as soon as possible thereafter. The information must be drawn up when it is fresh to mind and the professional's memory serves him correctly.

If the physiotherapy professional is unable to make his entry the same day, he should indicate the date of drafting as well as the date of the consultation.

KEEPING OF THE RECORD AND THE STATEMENTS OF PROFESSIONAL FEES (ARTICLES 10, 11 AND 12)

The member shall ensure the confidentiality and integrity of his clients' records. Consequently, only authorized persons may have access to the records. For example, the records may be kept in a locked filing cabinet, enclosed furniture or room.

The member shall keep his clients' records for a minimum period of 5 years from the date on which the last professional service was provided.

Furthermore, the member shall keep all statements of professional fees for a minimum period of 5 years. For example, statements of fees include all statements issued to the CNESST and SAAQ as well as all statements issued directly to a client.

At the expiry of the 5-year period, the member shall ensure that all documents and records are destroyed such as to preserve the confidentiality of the information they contain.



CONTENT OF THE **PHYSIOTHERAPY RECORD** (ARTICLES 6 AND 7)

Remember that the content of the entries in a record must be:

- » relevant to the interventions made or services rendered;
- » necessary to meet the client's needs;
- » indispensable to the fulfillment of the work of other healthcare professionals.

WHAT THE RECORD MUST MINIMALLY CONTAIN (ARTICLE 6):

» IDENTIFICATION OF THE CLIENT (PARAGRAPHS 1 AND 2)

The client may be a natural person or a legal person to whom the physiotherapy professional offers his services or provides professional services.

In the case of a natural person, the identification of the client must include the following information: last and first names, gender, date of birth and contact information. The contact information may include, for example, the home address, telephone numbers where the client may be easily reached or the client's email address.

When the intervention involves a group, all of the items listed in the previous paragraph should be drawn up in the record for each person making up the group.

In the case of a legal person, for example a school or a business, you must keep on record the name and contact information of said legal person as well as the name and contact information of its representative, i.e., the person requiring your physiotherapy services.

» PURPOSE OF THE CONSULTATION (PARAGRAPH 3)

The purpose of the consultation is the nature of or reason for the professional service requested by the referent or the client. For example: knee pain, compromised function, incontinence, diagnosis of the referring physician, training on the proper use of a backpack in a school, etc.

The member shall also keep on record the name of the person who requested the service, if different from the client, for example by entering the name of the organization or person who recommended a physiotherapy treatment.

The date the service was requested also is a relevant information to keep on record.

» CONSENT (PARAGRAPH 4)

Consent refers to the authorization given by the client to:

- a. receive care or services³ ;
- b. provide access to his record or transfer information to a third party⁴.

a. Consent to care and services

Article 17 of the Code of ethics reads as follows:

“Members must, before providing professional services, obtain the free and enlightened consent of the client. Except for reasonable cause, members must provide their client, in a complete and objective manner, with the explanations necessary to understand and assess, in particular, the necessity, nature, conditions and risks of the professional services that will be provided.

When the physical therapist intends to proceed with cervical manipulations, the physical therapist must, in addition to meet the obligations referred to in the first paragraph, obtain the written consent of the client.”

The member is required to obtain the client’s consent before providing physiotherapy services. The client may give his consent verbally, except in the case of cervical manipulations where written consent is required. The member shall therefore indicate in his record that he obtained the client’s consent. For example, the following mention could be included in the record: “treatment plan explained, understood and accepted.” It must be kept in mind that the client may at any time, including during the course of the same treatment or during later treatments, withdraw his consent.

However, in the case of a cervical manipulation, the physiotherapist is required to obtain the client’s consent in writing before proceeding with the treatment. To this effect, we invite you to consult the cervical manipulation written consent form recommended by the OPPQ: <https://oppq.qc.ca/wp-content/uploads/Modele-formulaire-consentement-manipulations.pdf> (you must first login to your account to gain access to the document).

³ Article 17 of the Code of ethics of physical therapists and physical rehabilitation therapists

⁴ Article 59 of the Code of ethics of physical therapists and physical rehabilitation therapists

b. Consent to providing access to one's record or to the transmission of information to third parties

The member shall enter in the record that the client authorized him to transmit information contained in the client's physiotherapy record to another professional or to any other persons identified.

WHEN REQUIRED BY THE SITUATION, THE RECORD MUST CONTAIN (ARTICLE 7):**» THE PHYSIOTHERAPIST'S EVALUATION AND THE CONCLUSION OF HIS CLINICAL REASONING (PARAGRAPH 1)**

The physiotherapist's evaluation is the process by which he reaches a conclusion based on his clinical reasoning and his expertise on the nature and severity of the health problem and its repercussions on the person's ability to function while taking into consideration contextual factors (personal and environmental factors). The wording of the diagnosis shall specify the disabilities and impairments, provide an orientation as to the treatment, and guide the development of the treatment plan as well as the determination of the most appropriate interventions.

In certain cases, for example in a context of prevention, intensive care or any other particular situation where the evaluation is of limited scope or again where certain data are not available, the wording of the diagnosis made by the physiotherapist may take on a slightly different form. For information on the diagnostic concept, we invite you to consult the different tools available on the OPPQ's website (in French only): <https://oppq.qc.ca/membres/actualites-et-dossiers/concept-diagnostique-analyse-de-loppq/>

It must be specified that it is not mandatory for the physiotherapy professional to keep on record clients' raw data obtained during the performance of certain tests (e.g., measuring balance - Berg scale, SMAF). Once the client has ceased receiving physiotherapy treatments, only the results of the various tests must be kept in the client's record.

» INFORMATION RELATED TO REGULATION 94M) (PARAGRAPH 2)

The member who is a PRT shall ensure that his records contain information confirming that he meets the prerequisites and levels of responsibility provided in Regulation 94m).

For more information on this regulation, you are invited to consult the various tools available on the OPPQ's website (in French only): <https://oppq.qc.ca/membres/inspection-syndic-et-reglements/reglement-94m/>

» **COLLECTION OF EVALUATIVE DATA BY THE P.R.T. (PARAGRAPH 2)**

This concerns the collection of all relevant information that enables the P.R.T. to provide care to the client and ensure follow-up.

» **OBJECTIVES AND CORRESPONDING TREATMENT PLAN BASED ON THE DISABILITIES AND IMPAIRMENTS IDENTIFIED (PARAGRAPH 3)**

The objectives must be based on the list of problems detected during the initial evaluation or the collection of evaluative data. They must also be realistic, measurable and such as to meet the client's expectations. To the extent possible, the timeframe expected to achieve the objectives must be specified in the record.

The treatment plan contains a list of all of the interventions contemplated to reduce or correct the signs, symptoms, impairments and disabilities observed while taking into account the client's realistic objectives or the objectives of the healthcare team, as applicable.

» **FOR EACH CONSULTATION, THE DATE, THE DESCRIPTION OF THE PROFESSIONAL SERVICES PROVIDED, ENTRIES REGARDING THE EVOLUTION OF THE CLIENT'S CONDITION, REACTIONS TO THE TREATMENT AND RECOMMENDATIONS (PARAGRAPH 4)**

The description of the professional services provided consists of a listing of all interventions and services per individual consultation. This information may be entered on a modality or flow sheet or in the record in chronological order.

The member is also required to enter in his record all information on the evolution of his client's condition (collection or reevaluation of subjective and objective data).

Furthermore, following the treatment, the member must verify and enter in the record the client's subjective or objective reactions.

The member shall also provide a detailed description of the recommendations made to the client or his loved ones (advice regarding posture, lifting loads, exercise programs, etc.) as well as the recommendations made to other professionals. The member can append any relevant document to the record.

» **ANY RELEVANT DOCUMENT CONCERNING THE PROFESSIONAL SERVICES PROVIDED (PARAGRAPH 5)**

For example, the physiotherapy professional must make sure to keep on record copies of the notes issued to the treating physician, the SAAQ, the CNESST, the insurance company, etc. The same applies to interdisciplinary notes or notes issued by other professionals providing services to the client.

» **THE DATE AND SUMMARY OF ALL RELEVANT VERBAL COMMUNICATIONS WITH THE CLIENT OR A THIRD PARTY (PARAGRAPH 6)**

The member shall enter in his record a summary of his relevant communications with the client, loved ones or other stakeholders involved in the matter.

» **ENTRIES INDICATING THE PARTICIPATION OF A THIRD PARTY IN THE PHYSIOTHERAPY TREATMENT PLAN (PARAGRAPH 7)**

The member shall enter in the record all relevant information concerning an act performed by a third party as well any and all follow-up communications.

For more information, please consult online the OPPQ's document titled *Participation d'une tierce personne à la prestation d'activités dans le cadre d'un plan de traitement en physiothérapie* : <https://oppq.qc.ca/wp-content/uploads/Participation-tierce-personne-oppq.pdf>

» **ANY INFORMATION REGARDING THE TRANSMISSION OF INFORMATION TO THE CLIENT OR A THIRD PARTY (PARAGRAPH 8)**

Whenever relevant, the record should include copies of the emails sent and received. Furthermore, when documents are sent via fax, the member should keep the transmission report in the client's record.

» **ENTRIES REGARDING THE TEMPORARY INTERRUPTION OR TERMINATION OF PROFESSIONAL SERVICES (PARAGRAPH 10)**

A final entry shall be included to justify the termination of the services.

For example: treatment objectives have been achieved, the patient no longer shows up to his appointments, the insurer has ceased to reimburse treatments, the treatment has been ended by the physician.

» **ANY OTHER INFORMATION OR DOCUMENT THAT MUST BE INCLUDED IN THE RECORD IN KEEPING WITH THE PROFESSIONAL CODE OR ANY REGULATION MADE THEREUNDER (PARAGRAPH 12)**

Pursuant to the Code of ethics of physical therapists and physical rehabilitation therapists, when a member communicates information that is protected by professional secrecy to prevent an act of violence⁵, he shall provide⁶ :

- the reasons supporting the decision to communicate the information; and
- the subject of the communication, the mode of communication, and the name of the person to whom the information was given.

Furthermore, before communicating information that is protected by professional secrecy to prevent an act of violence, the member who consulted another member, a member of another professional order or any other competent person shall enter in the record the following information⁷ :

- the name of the person consulted;
- the date of the consultation;
- a summary of the consultation; and
- his decision.

⁵ Article 33 of the Code of ethics of physical therapists and physical rehabilitation therapists

⁶ Article 34 of the Code of ethics of physical therapists and physical rehabilitation therapists

⁷ Article 35 of the Code of ethics of physical therapists and physical rehabilitation therapists

SECTION III: KEEPING OF THE **PLACES OF PRACTICE**

This chapter presents the general regulatory requirements regarding clinical settings. These requirements are aimed at ensuring that the client who consults a physiotherapy professional receives services in a safe environment that is conducive to quality care.

PHYSICAL LAYOUT (ARTICLE 13)

The physiotherapy professional shall protect the confidentiality of his conversations with his clients. He shall thereby ensure that the place where conversations are held with a client does not enable any other person to hear what is being said, namely by persons in the waiting room or an adjacent room.

CLEANLINESS, HEALTH AND SAFETY (ARTICLES 14 AND 15)

In his practice, the member shall take reasonable means to ensure the application of cleanliness, health and safety measures in keeping with generally accepted practices.

He shall also take reasonable means to ensure the safe disposal of biomedical waste including dry needles used in puncture physiotherapy.

The same applies to the keeping and disposing of medication, products and substances used in physiotherapy.

POSTING OF THE ORDER'S REGULATIONS (ARTICLE 16)

When the member's place of practice allows it, the member shall post in public view, for example in the clinic's waiting room, a current copy of the Code of ethics of physical therapists and physical rehabilitation therapists as well as a current copy of the *Code de déontologie des physiothérapeutes et des thérapeutes en réadaptation physique de même qu'une copie à jour du Règlement sur la procédure de conciliation et d'arbitrage des comptes des membres de l'Ordre professionnel de la physiothérapie du Québec*. The Order's contact information shall also be provided on each of the regulations.

However, when the place of practice does not allow for the posting of the regulations in public view (for example, when services are provided in a homecare setting or in an intensive care unit), the member must, when so requested by the client, be able to provide copies thereof to the client.

DIPLOMAS, CERTIFICATIONS AND PROOFS OF TRAINING (ARTICLE 17)

With the goal of informing the public, the Order recommends that its members display, to the extent possible in their place of practice, their physiotherapy diploma, their permit to practice as well as any attestations that were delivered to them by the Order to use needles through the skin (dry needling physiotherapy) or to practice vertebral and joint manipulations. Members may also display in their place of practice any other proofs of training related to their physiotherapy practice.

SHORT-TERM ABSENCES (ARTICLE 18)

When a member must take a leave of absence from his place of practice, he shall take the necessary means to inform all persons who may try to reach him during his absence, including his clients and other healthcare professionals. The following information shall be provided:

- **the duration of his absence or the date of his return; and**
- **the applicable procedure in emergency situations.**

The physiotherapy professional can meet this obligation by:

- **informing the persons who try to reach him by phone (voicemail message) or by email;**
- **posting a notice on the door giving access to his place of practice.**

In the case of absences of a prolonged or indeterminate duration, refer to section V on page 18.

SECTION IV : MAINTENANCE OF THE EQUIPMENT

Members must ensure that the medical devices that they use in their practice have been approved by Health Canada. Prior to approving them, Health Canada examines the devices and assesses their safety, efficiency and quality. In Canada, the legislation⁸ provides that manufacturers must have their devices approved by Health Canada before marketing or publicizing them. Members must therefore be prudent when purchasing devices from abroad through the Internet.

The term “medical devices” is defined in the legislation⁹ such as to include a wide array of devices used in the treatment, reduction, diagnosis or prevention of an illness or a physical condition.

By virtue of the Medical Devices Regulations, only class II, III and IV devices need to be approved given they present a risk of harm. Class I medical devices do not need to be approved.

Here are some examples of devices that are used in physiotherapy that may or may not require an approval depending on the class to which they belong.

CLASS	LEVEL OF RISK	EXAMPLES
I	Lowest risk	Goniometer (non-computerized) Reflex hammer Measuring tape Electric treatment table Training equipment (bicycle, treadmill, etc.)
II	Low risk	Ultrasound TENS Microcurrent Interferential Compression unit Mechanical traction unit High voltage Diathermy Cryocuff Iontophoresis Shockwave Latex gloves Speculum Electronic stethoscope Electronic or manual dynamometer PEMF (pulsed electromagnetic field) Dry needles Testing pessary
III	Moderate risk	Laser
IV	High risk	No example found concerning devices used in physiotherapy

⁸ Medical Devices Regulations (SOR/98-282)

⁹ Food and Drugs Act, R.S.C. (1985), c. F-27

Members are also obliged to ensure that the medical devices and equipment that they use are maintained (inspected and adjusted) by competent persons with the necessary qualifications and skills. To this effect, members shall keep and update a register describing the medical device or equipment having been inspected, the date of inspection, the result of the inspection, the name of the person having conducted the inspection, and the date and type of corrective action taken. This register shall be kept for as long as the equipment or medical device is used.



SECTION V : CESSATION OR RESTRICTION OF PRACTICE

This section reviews the obligations of physiotherapy professionals when they cease to practice or when their right to practice is restricted.

Members who cease on a permanent or temporary basis to practice their professional activities are required to meet certain obligations toward their clients and take certain measures with the Order to ensure that their records are kept adequately and made available to clients.

It is important to point out that these obligations do not apply to physiotherapy professionals who are employed by a natural person, a legal person or a public body.

GENERAL PROVISIONS (ARTICLES 21 AND 22)

- » When a member transfers the custody of his records to another member (the transferee), he is required to provide the secretary of the Order with a copy of the transfer agreement within 30 days of the scheduled date of cessation of practice.
- » Only a member of the Order—physiotherapist or physical rehabilitation therapist—may be the transferee of another member’s records.
- » The transfer agreement must be in writing and specify the name, mailing address, email address and telephone number of the transferee, the reason for the cessation of practice, the date of coming into effect and the remuneration paid to the transferee, if applicable.

PERMANENT CESSATION OF PRACTICE (ARTICLES 23 TO 30)

When a member **permanently ceases to practice or accepts a function that prevents him from practicing his profession**, he is required to inform the secretary of the Order within 30 days prior to the cessation of practice. He may decide to transfer the custody of his records to another member of the OPPQ (the transferee) or to retain custody of his records.

When a member is the object of a **permit revocation**, is **permanently struck** off the roll of members, has his right to practice **permanently suspended** or that his **temporary permit to practice is not renewed**, he is required to propose the name of a transferee to the secretary of the Order within 30 days from the coming into effect of the decision. Otherwise, the Board of directors shall designate a transferee.

When the OPPQ is informed of the **death of a member** and the deceased member had not signed a transfer agreement, the secretary of the Order shall ask the successors to suggest a transferee for the deceased member's records. If the successors are not able to suggest a transferee, the Board of directors shall designate one.

TEMPORARY CESSATION OF PRACTICE (ARTICLES 31 TO 34)

When a member **temporarily ceases to practice or accepts a function that temporarily prevents him from practicing his profession for more than 90 consecutive days**, he is required to inform the secretary of the OPPQ of such within 30 days prior to the cessation of practice. He may decide to transfer the custody of his records to another member of the Order (the transferee) or to retain custody of his records.

When a member is the object of a **temporary or provisional striking** from the roll of members or his right to practice is **temporarily suspended for one year or more**, he is required to propose the name of a transferee to the secretary of the Order within 30 days of the coming into effect of the decision. Otherwise, the Board of directors shall designate a transferee.

When a member is the object of a **temporary or provisional striking** from the roll of members or his right to practice is **temporarily suspended for more than 30 days** but less than one year, he may decide to transfer the custody of his records to another member of the Order (transferee) or to retain custody of his records.

When a member is the object of a **temporary or provisional striking** from the roll of members or his right to practice is **temporarily suspended for less than 30 days**, he retains the custody of his records. However, if the Board of directors deems that the records must be transferred to protect the public, it shall designate a transferee.

RESTRICTED RIGHT OF PRACTICE (ARTICLE 35)

When a member's right to practice his professional activities is restricted, the said member may retain custody of his records and use them to the extent permitted pursuant to the restriction. He is not required to inform his clients of the restriction.

OBLIGATIONS OF THE MEMBER OR THE TRANSFEEE

The member or the transferee shall notify his clients within 30 days following the taking of possession of the records or prior to the cessation of practice.

The notice shall provide:

- » the date of the taking of possession of the records or of the cessation of practice;
- » the duration of the cessation of practice, if known and applicable;
- » the mailing address, email address and telephone number that clients may use to contact the transferee or the member to obtain a copy of their record;
- » the period within which the client may accept the transfer, regain possession of his record or ask that his record be transferred to another professional.

The member or the transferee shall send the notice to each client having an active record. For example, he may contact the clients by email or standard mail. With respect to clients whose records are no longer active, he can meet his obligation by having the notice published in a newspaper distributed in the region where the member practiced his profession.

The member or the transferee shall:

- » take the necessary measures to protect the client's interests;
- » see to complying with the rules on confidentiality;
- » guarantee access to the information contained in client records when clients request to obtain a copy of their record;
- » take the necessary measures to preserve or destroy records in keeping with the Regulation.

ADDITIONAL MEMBER OBLIGATIONS

The member shall prepare a list of the records that he is transferring to the transferee or of which he is retaining custody and provide a copy of said list to the secretary of the Order.

The member shall commit in writing to keeping the secretary of the Order informed of his contact information during a five-year period.

POWER OF THE ORDER (ARTICLES 36 TO 38)

At all times, the Board of directors has the authority to designate a transferee of the records when it deems that such a measure is required to protect the public.

In such cases, the member or his successors are required to reimburse the professional and other fees assumed by the Order or the transferee.



Ordre professionnel
de la physiothérapie
du Québec

PREUVE DE COMPÉTENCE

REGULATION

ON RECORD KEEPING, PLACES OF PRACTICE,
EQUIPMENT AND THE CESSATION OF PRACTICE
BY A MEMBER OF THE ORDRE PROFESSIONNEL
DE LA PHYSIOTHÉRAPIE DU QUÉBEC.

PLEASE BE ADVISED THAT ADMINISTRATIVE TRANSLATION HAS NO LEGAL VALUE
ONLY THE OFFICIAL TEXTS OF LAWS AND REGULATIONS DO SO

REGULATION ON RECORD KEEPING, PLACES OF PRACTICE, EQUIPMENT AND THE CESSATION OF PRACTICE BY A MEMBER OF THE ORDRE PROFESSIONNEL DE LA PHYSIOTHÉRAPIE DU QUÉBEC

Professional Code
(Chapter C-26, a. 91)

SECTION I

» GENERAL PROVISIONS

1. In this Regulation, client means any person to whom a member of the Ordre professionnel de la physiothérapie du Québec provides professional services.
2. This Regulation permits the use of computer technology or any other information technology that allows a member to draw up, keep, hold and preserve records, providing the confidentiality and the integrity of the information they contain are protected and that the exercise of access and correction rights is ensured.

SECTION II

» RECORD KEEPING

3. The member shall keep a record for each of his clients.
4. Notwithstanding Article 3, in the case of a member who practices on behalf of an establishment in the meaning of the Act respecting health services and social services (chapter S-4.2) or of an institution in the meaning of the Act respecting health services and social services for Cree Native persons (chapter S-5), the user's record drawn up and maintained by the establishment or institution is considered the member's record and the member is required to enter into it all information and documents mentioned in this Regulation. Said member is exempted from the obligations under Articles 11 and 12.

Likewise, notwithstanding Article 3, in the case of a member who practices on behalf of a natural or legal person or who is associated with or employed by a company, he may document in the records of said person or company the information mentioned in Articles 6 and 7 with respect to the client to whom he is providing professional services, providing the confidentiality of the records and clients' right of access thereto are protected.

5. When the member exercises his profession in a group intervention, he shall keep either an individual record for each client in the group or a single record for the entire group.
6. The record shall contain:
 - 1° when the client is a natural person, the client's name, sex, date of birth and contact information;
 - 2° when the client is a company or a legal person, the client's name and contact information as well as the name and contact information of the authorized representative;
 - 3° the purpose of the consultation for service as well as the identity of the person who requested the service, if the latter is not the client;
 - 4° the entries confirming that the client or his legal representative consented to the service.
7. If applicable, the record shall also contain:
 - 1° the evaluation of the physiotherapist and the conclusion of his findings on his clinical reasoning;
 - 2° in the case of a physical rehabilitation therapist, the information provided in Article 4 of the Regulation respecting the categories of permits issued by the Ordre professionnel de la physiothérapie du Québec (chapter C-26, r. 196.1) and the evaluative data collected;
 - 3° the objectives and the treatment plan based on the disabilities and impairments identified;
 - 4° for each visit, the date, the description of the professional services provided, the entries on the evolution of the client's conditions and the client's reactions to the treatment and the corresponding recommendations;
 - 5° any relevant document related to the professional services provided;
 - 6° the date and the summary of any relevant verbal communication with the client or a third party;
 - 7° the entries indicating the participation of a third party in the treatment plan and any document related to this participation;
 - 8° any information and authorization relating to the communication of information to the client or a third party;
 - 9° any information relating to an incident, an accident or a complication in connection with the professional services provided by the member;
 - 10° the entries related to the temporary interruption or the termination of the professional services;
 - 11° the statements of professional fees or of any other amounts charged, unless they are the subject of another form of administrative filing and are easy to retrace;
 - 12° any other information or document that must be kept in the record by virtue of the Professional Code (chapter C-26) or a regulation made thereunder.

- 8.** The record shall contain the name and number of the member who is making the entries. Said name and number shall be in legible characters.

Each entry must be permanent and followed by the date on which it was entered, the signature or initials of the member who entered it as well as the latter's full or abbreviated title.

- 9.** The member shall keep each of his records up to date.
- 10.** The member shall ensure the confidentiality and integrity of his records and restrict access thereto to authorized persons only.
- 11.** The member shall keep each record and each statement of professional services or of any other amount charged to each client for a minimum of 5 years from the date on which the last professional service was provided.
- 12.** The member shall ensure that any document or record is destroyed such as to preserve the confidentiality of the information it contains.

SECTION III

KEEPING OF PLACES OF PRACTICE

- 13.** The member shall ensure that the room, office or other location where he meets his client is organized in such a way as to protect the client's right to confidentiality.
- 14.** The member shall take reasonable means to ensure that cleanliness, health and safety measures are applied in keeping with generally accepted practices in the exercise of the profession.
- 15.** The member shall take reasonable means to ensure compliance with the accepted standards related to:
- 1° the safe disposal of biomedical waste;
 - 2° the preservation and disposal of medication, products and substances used in the practice of physiotherapy.
- 16.** The member shall, when the place where he practices his profession allows for it, namely in the case of a room or an office, display visible to the public a current copy of the Code of ethics of physical therapists and physical rehabilitation therapists (chapter C-26, r. 197) and, if applicable, a current copy of the Règlement sur la procédure de conciliation et d'arbitrage des comptes des membres de l'Ordre professionnel de la physiothérapie du Québec (chapter C-26, r. 204). He shall also provide the Order's contact information on each of these regulations.
- In all other cases, the member shall provide a current copy of these regulations to the client who so requests.

17. The member may display visible to his clients his diplomas, certifications delivered by the Order and other proofs of training, provided they are related to his physiotherapy practice.
18. The member who takes a leave of absence from his place of practice shall take, depending on the duration of his leave of absence, the necessary measures to inform the persons who try to reach him of the duration of his absence and of the procedure to be followed in an emergency.

SECTION IV

» MAINTENANCE OF THE EQUIPMENT

19. The member shall make sure that any medical device that he uses has been approved by the Minister of Health by virtue of the Medical Devices Regulations (SOR/98-282), including subsequent amendments made thereto.

Any medical device referred to in the above paragraph as well as any equipment that the member uses shall be maintained adequately by a qualified person such as to ensure it operates in an optimal and safe manner.

To this effect, the member shall namely ensure that the inspection and adjustment of any medical device or equipment are carried out in accordance with said device's or equipment's particular specifications and with the applicable standards.

20. The member shall make sure a register containing the following information is available and up to date:
 - 1° the identification of the medical device or equipment;
 - 2° the date the inspection was conducted and the result of the inspection;
 - 3° the name of the person who conducted the inspection;
 - 4° the date and the type of corrective action taken, if applicable.

This register shall be kept for as long as the medical device or equipment is used.

SECTION V

» CESSATION OF PRACTICE

§1. — *General Provisions*

- 21.** This Section applies to the records kept by a member who ceases to practice his profession or whose right to practice is restricted.

However, this section does not apply to a member who ceases to practice his profession when employed by a natural person, a legal person or a company.

- 22.** For the application of this Section:

1°- any agreement respecting a cessation must be made in writing; it shall indicate the name, mailing address, email address and telephone number of the transferee, the reason giving rise to the cessation and the date it takes effect. This agreement may be made on a gratuitous or onerous basis; in the latter case, it may provide remuneration for the transferee;

2°- only a member may act as the transferee of the records of another member.

§2. — *Permanent cessation of practice*

- 23.** The member who ceases to practice on a permanent basis or who accepts a function that prevents him from practicing his profession on a permanent basis shall, within 30 days of the scheduled date of cessation of practice, notify in writing the secretary of the Order of such and provide the latter with a copy of the transfer agreement.

If the member has not signed a transfer agreement, he retains custody of his records unless the Board of directors considers that a transfer is necessary to protect the public. In the latter case, the Board of directors shall designate a transferee.

- 24.** When informed of the death of a member who had not signed a transfer agreement, the secretary of the Order shall incite the successors of the deceased member to find, as soon as possible, a transferee for his records.

In case of failure to do so, the Board of directors shall designate a transferee.

- 25.** The member whose permit is revoked, who is permanently struck off of the roll of the Order, whose right to practice is permanently suspended or whose temporary permit is not renewed shall submit the name of a transferee to the secretary of the Order, within 30 days of the date on which the decision takes effect. In the case of failure to do so, the Board of directors shall designate a transferee.

- 26.** The transferee or the member shall, within 30 days after having taken possession of the records or prior to the cessation of practice, notify each client thereof.

The notice shall provide the following information:

- 1° the date of taking of possession of the records or of cessation of practice;
- 2° the mailing address, email address and telephone number enabling the client to contact the transferee or the member to obtain a copy of his record;
- 3° the period within which the client may accept the transfer, regain possession of his record or ask that his record be transferred to another professional.

This notice shall be sent to each client of the member whose record is active. The transferee or the member, as applicable, shall meet his obligation to clients whose records are inactive by having said notice published on the territory on which the member practiced.

A copy of said notice shall be sent to the secretary within 30 days of its issuance or publication.

- 27.** The transferee or the member who retains custody of his records, as appropriate, shall at all times take the necessary measures to protect the client's interests and ensure compliance with the rules regarding confidentiality and access to the information contained in the records, namely the client's right to obtain a copy of the documents.
- 28.** The transferee or the member who retains custody of his records, as appropriate, shall take the necessary measures to have the records kept or destroyed in accordance with the requirements stipulated in Articles 10, 11 and 12.
- 29.** The member shall prepare the list of records that he is transferring to the transferee or of which he is retaining custody thereof and shall submit a copy thereof to the secretary of the Order.
- 30.** The member who retains custody of his records shall commit in writing to the secretary of the Order to maintaining current the contact information making it possible to reach him during the 5-year period following his cessation of practice.

§3. — *Temporary cessation of practice*

- 31.** The member who ceases to practice on a temporary basis or who accepts a function that prevents him from practicing his profession on a temporary basis shall, within 30 days of the scheduled date of cessation of practice, notify in writing the secretary of the Order of such and provide the latter with a copy of the transfer agreement.

If the member has not signed a transfer agreement, he retains custody of his records unless the Board of directors considers that a transfer is necessary to protect the public. In the latter case, the Board of directors shall designate a transferee.

For the purpose of this article, the transferee or the member who retains custody of his records shall be required to meet the obligations under Articles 26 to 30.

- 32.** The member who is temporarily or provisionally struck off of the roll of the Order or whose right to practice is temporarily suspended for a period of one year or more shall submit the name of a transferee to the secretary of the Order, within 30 days of the date on which the decision takes effect.

In case of failure to do so, the Board of directors shall designate a transferee.

For the purpose of this article, the transferee shall be required to meet the obligations under Articles 26 to 30.

- 33.** The member who is temporarily or provisionally struck off of the roll of the Order or whose right to practice is temporarily suspended for a period of more than 30 days but less than one year shall submit the name of a transferee to the secretary of the Order, within 30 days of the date on which the decision takes effect.

If the member has not signed a transfer agreement, he retains custody of his records unless the Board of directors considers that a transfer is necessary to protect the public. In the latter case, the Board of directors shall designate a transferee.

For the purpose of this article, the transferee or the member who retains custody of his records shall be required to meet the obligations under Articles 26 to 30.

- 34.** The member who is temporarily or provisionally struck off of the roll or whose right to practice is temporarily suspended for a period of less than 30 days retains custody of his records unless the Board of directors considers that a transfer is necessary to protect the public. In the latter case, the Board of directors shall designate a transferee.

For the purpose of this article, Article 27 shall apply.

§ 4. — Restriction of the right to practice

- 35.** The member whose right to engage in professional activities is restricted retains custody of his records; he may use them to the extent that he is permitted by his restriction, as applicable.

The member who retains custody of his records by virtue of this article shall not be required to notify his clients thereof.

He shall, when the Board of directors considers that it is necessary to transfer the records to protect the public, entrust them to a transferee. The transferee shall be required to meet the obligations under Articles 26 to 30.

§5. — Powers of the Order

- 36.** In all cases in which the Board of directors cannot designate a transferee, the secretary of the Order automatically becomes the provisional custodian of the member's records. The secretary shall have custody thereof until the Board of directors designates a transferee.

In all such cases, the secretary shall be required to meet the obligations under Articles 26 to 30.

- 37.** When the Board of directors designates a transferee or the secretary acts in that capacity, the member or his successors shall reimburse the fees and expenses assumed by the Board of directors or the transferee.

These amounts are established by means of a resolution of the Board of directors, in application of the fourth subparagraph of Article 91 of the Professional Code. This resolution also establishes the remuneration and the terms of the mandate of the transferee as well as the methods of recovery of the fees and expenses assumed from the member or his successors.

- 38.** When a transfer was agreed to but cannot be carried out, the secretary or a transferee designated by the Board of directors shall take possession of the records.

SECTION VI

» FINAL PROVISIONS

- 39.** This Regulation shall replace the Règlement sur la tenue des dossiers, des cabinets de consultation, le maintien des équipements et la cessation d'exercice des membres de l'Ordre professionnel de la physiothérapie du Québec (chapter C-26, r. 207).
- 40.** This Regulation shall come into force on the fifteenth day following its publication in the Gazette officielle du Québec.