



College of Physiotherapists of Ontario
Ordre des physiothérapeutes de l'Ontario

Provisional Practice MONITORING TOOL

Name of Resident

Monitor's Business Information

NAME

TELEPHONE

MAILING ADDRESS

Provisional Practice Dates

FROM

TO

It is the responsibility of the Monitor to immediately (within one business day) report to the College if the Resident has performed any act of professional misconduct, or of incompetence, or if the Physiotherapy Resident appears incapacitated.

The following documents are available in the **Registrants Guide** on the College website www.collegept.org to assist you in completing the Provisional Practice Monitoring Tool.

- > Code of Ethics
- > Standards of Practice
- > College Policies
- > Position Statements
- > Practice Guidelines

Please return to this form to:
College of Physiotherapists of Ontario
375 University Avenue, Suite 901
Toronto Ontario
M5G 2J5

ATTENTION: Manager, Entry to Practice

4. Consent. The Resident is able to recognize and describe the responsibilities related to issues concerning consent. The Resident provides sufficient information to ensure that the client is aware of the nature of proposed interventions, options, risks and benefits. There is documented evidence that the Resident allows the patient to make free and independent decisions, obtains consent and understands the implications related to practice within the clinical environment. *This item may be assessed through chart audits and case reviews with the Resident.*

Strongly Disagree

Strongly Agree

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Describe or comment on any issues raised or concerns in this area:

5. Safety. The Resident demonstrates safe use of equipment and modalities. The Resident maintains a caseload that can be managed safely and effectively. There have been no incidents related to safety or complaints. *This item may be assessed through observation, chart audits, case reviews with the Resident, input from team members and review of QM reports.*

Strongly Disagree

Strongly Agree

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Describe or comment on any issues raised or concerns in this area:

6. Confidentiality/Privacy. The Resident understands and complies with the professional standards and statutes and regulations related to the retention, disclosure and release of information and records. The Resident demonstrates an understanding of matters concerning client confidentiality and privacy. *This item may be assessed through chart audits and discussion with the Resident.*

Strongly Disagree

Strongly Agree

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Describe or comment on any issues raised or concerns in this area:
