



Scope of Practice for Physiotherapists and Physiotherapy Technicians

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1. Definitions and Abbreviations

No.	Term / Abbreviation	Definition
1.1	Competence	The knowledge, skills, and capabilities required for an individual to successfully perform the duties of an assigned role.
1.2	Competency	The ability to perform a task with a specified level of proficiency.
1.3	Physiotherapy Interventions	Physiotherapy services that include, but are not limited to, education and consultation, therapeutic exercise, soft tissue and manual therapy techniques including manipulation, electro-physical agents and mechanical modalities, functional activity training, cardio-respiratory and neuromotor techniques, neuro-developmental techniques, and prescribing aids and devices.
1.4	Physiotherapist	Licensed healthcare professionals who help individuals develop, maintain, restore, and improve movement, activity, and functioning, thereby enabling optimal performance and enhancing health, well-being, and quality of life within the spheres of promotion, prevention, treatment/intervention, and rehabilitation.
1.5	Physiotherapy Services	Services provided by or under the direction of a licensed physiotherapist. This includes patient assessments and interventions, as well as related communication with and reporting to various parties for the purposes of delivering patient care.
1.6	People of Determination	Every person suffering from a temporary or permanent, full or partial deficiency or infirmity in his physical, sensory, mental, communicational, educational, or psychological abilities to an extent that limits his possibility of performing the ordinary requirements ¹
1.7	Rehabilitation	A set of measures that assist individuals who experience, or are likely to experience, disability in achieving and maintaining optimal functioning in interaction with their environments.
1.8	Physiotherapy Technician	Qualified individuals who work under the guidance and supervision of a licensed physiotherapist to assist in providing physiotherapy services that are safe, efficient, and successful.
1.9	GMFM	Gross Motor Function Classification System
1.10	AIMS	Alberta Infant Motor Scale
1.11	FES	Functional Electrical Stimulation
1.12	ACBT	Active Cycle of Breathing Technique
1.13	NDT	Neurodevelopmental Therapy

2. SOP Purpose

The purpose of this document is to:

- 2.1. Define the range of clinical services provided by physiotherapists and physiotherapy technicians, along with their associated competencies.
- 2.2. Describe the professional boundaries, accountabilities, and ethical and legal obligations that are applicable to physiotherapists and physiotherapy technicians.
- 2.3. Serve as a reference for the healthcare workforce, healthcare providers, health services payers, and governance bodies.

3. SOP Scope

3.1 This scope of practice applies to DoH-licensed physiotherapists and physiotherapy technicians who wish to practice in the Emirate of Abu Dhabi, as well as to all healthcare providers and healthcare payers who provide and operate Physiotherapy services.

4. Practice Settings

Physiotherapists and physiotherapy technicians may practice in a variety of healthcare settings that provide physiotherapy services, including but not limited to:

- 4.1. General Hospitals
- 4.2. Medical Centers
- 4.3. Primary Health Care Centers
- 4.4. Rehabilitation Hospitals and Centers
- 4.5. Home care services – Provision of health services
- 4.6. Mobile Clinics

5. Standard of Proficiency

- 5.1. Physiotherapists and physiotherapy technicians must practice in accordance with the provisions of physiotherapy scope of practice, UAE and Abu Dhabi laws, ethical values, professional code of conduct, and clinical practice protocols and guidelines published by national or international professional organizations.
- 5.2. Physiotherapy technicians should work under the supervision of a Physiotherapist.
- 5.3. The following section outlines the General Proficiency of Physiotherapists and physiotherapy technicians:
 - 5.3.1 Deliver quality care to patients based on evidence-based best practices.
 - 5.3.2 Collaborate effectively with the referring physician regarding the treatment plan and work with the multidisciplinary team as needed to achieve the treatment and rehabilitation goals.
 - 5.3.3 Demonstrate professional behavior that reflects honesty and integrity.
 - 5.3.4 Respect patients' rights and dignity, including their right to privacy, protection of confidential

information, patients' autonomy, and right to consent and refuse treatment, as well as the protection of their personal property.

- 5.3.5 Safeguard patients against misuse of power that leads to patient abuse, including physical, mental, sexual, or neglect.
- 5.3.6 Be sensitive to the individual and social needs of patients and strive to provide comfort and support.
- 5.3.7 Share information with patients, families, and caregivers that is clear and easy to understand.
- 5.3.8 Maintain adequate, confidential, and accurate medical records as per best practice guidelines.
- 5.3.9 Communicate clearly with the patient, family, and caregiver about the patient's condition or diagnosis, and provide realistic expected outcomes based on evidence-based practice.
- 5.3.10 Demonstrate excellent teamwork skills and effective communication with other healthcare professionals.
- 5.3.11 Promote health and prevent disease by designing, implementing, and modifying treatment interventions to prevent impairments, activity limitations, and disabilities in individuals due to health, environmental, and lifestyle factors.
- 5.3.12 Instruct patients, families, and caregivers by providing direction and guidance on a range of physiotherapeutic interventions and mobility activities.
- 5.3.13 Inform patients and their families about the nature and purpose of the assessment before performing it.
- 5.3.14 Explain the nature of the problem and functional prognosis to the patient in a clear and easy-to-understand way.
- 5.3.15 Provide a rationale for consultation with another health professional, where necessary.
- 5.3.16 Ensure continuity of care and accurate carry-over of the treatment program.
- 5.3.17 Recognize own learning needs and be responsible for individual professional development and competence through active professional development activities.
- 5.3.18 Contribute to the continuous professional development activities.
- 5.3.19 Recognize the value of research, comply with ethical principles, and participate in research.
- 5.3.20 Maintain infection control standards and procedures.
- 5.3.21 Physiotherapists should delegate tasks that are in accordance with the physiotherapy technician's competencies.
- 5.3.22 Physiotherapists should provide the physiotherapy technicians with clear instructions relevant to the severity and complexity of the patient's condition, treatment modality, and clinical setting.
- 5.3.23 Physiotherapists should provide the appropriate level of supervision and ensure direct access to support whenever necessary.

5.4 The clinical proficiencies of physiotherapists for in-patient and out-patient care are outlined in the following section:

5.4.1 Patient Assessment:

- 5.4.1.1 Conduct an initial assessment, examination, and evaluation to establish a diagnosis, prognosis, and a customized treatment plan of care.
- 5.4.1.2 Assess all patients for risk of falls and safety awareness and take necessary measures to prevent falls.
- 5.4.1.3 Perform gait analysis using evidence-based measurements to assist with gait training and improving mobility.
- 5.4.1.4 Conduct neuro-musculoskeletal assessments, including range of movement and flexibility testing, strength, power, selectivity, endurance, tone, spasticity assessment, neuro-dynamic testing, nerve conduction testing, sensation testing, proprioception testing, coordination, balance testing, and functional testing.
 - 5.4.1.5 Conduct cardio-respiratory assessment.
 - 5.4.1.6 Conduct cardio-vascular assessment.
- 5.4.1.7 Conduct developmental assessment for adults:

This approach emphasizes understanding the individual's typical movement patterns and how they can be improved upon to facilitate better functionality.
- 5.4.1.8 Conduct Developmental assessment for pediatric patients, which includes assessment by observation and analysis of the child's movement abilities and inabilities, posture, play activities, and interactions to assess their motor skills and functional abilities and plan treatment interventions according to the need and indications.
- 5.4.1.9 Conduct neurological assessment for adults and pediatrics, including:
 - 5.4.1.9.1 Level of consciousness and alertness.
 - 5.4.1.9.2 Balance, voluntary and involuntary movements.
 - 5.4.1.9.3 Muscle strength and selectivity, tone, reflex, and sensation.
 - 5.4.1.9.4 Movement analysis and functional assessment, as well as gait assessment and joint range of motion.
 - 5.4.1.9.5 Postural assessment.
- 5.4.1.10 Conduct skin integrity assessment.
- 5.4.1.11 Conduct pain assessment.
- 5.4.1.12 Utilize different testing and analysis to assess various physical and functional parameters such as fitness testing, anthropometric measurements, and the use of appropriate testing (examples: Gross Motor Function Classification System, Gross Motor Function Measure (GMFM), Pediatric Balance Scale, Peabody Developmental Motor Scale, and Alberta Infant Motor Scale (AIMS)).

5.4.1.13 Conduct gait analysis, which involves observation and functional assessments.

5.4.2 Treatment Plan:

5.4.2.1 Design and recommend a treatment plan considering the diagnosis and prognosis to alleviate impairments, functional limitations, and disabilities by:

5.4.2.1.1 Setting Specific, Measurable Achievable Realistic and Timely (SMART) goals in collaboration with the patient, the patient's guardians (if applicable), the patient's family, and the treating physician.

5.4.2.1.2 Selecting the most appropriate evidence-based intervention and education strategies.

5.4.2.1.3 Anticipating the outcomes of the planned treatment and interventions.

5.4.2.1.4 Prioritizing interventions based on the severity, acuity, and chronicity of the condition identified.

5.4.2.2 Conduct regular re-evaluations of the treatment plan and treatment outcomes and make modifications accordingly.

5.4.2.3 Be aware of the need to escalate treatment to the referring physician to monitor the progress of care or to address emergencies or deteriorations.

5.4.2.4 Participate in discharge planning, making and documenting recommendations regarding the functional and mobility components of the discharge plan.

5.4.2.5 Discharge the patient when the established objectives and goals have been accomplished to the satisfaction of the patient.

5.4.3 Therapeutic Intervention:

5.4.3.1 Apply neuro-musculoskeletal techniques. Examples include proprioceptive and exteroceptive facilitation, muscle re-education and training, joint mobilization, soft-tissue mobilization, and neural mobilization techniques.

5.4.3.2 Apply Neurological physiotherapy intervention to manage patients with neurological conditions such as stroke, traumatic brain injury, multiple sclerosis, Parkinson's Disease, and spinal cord injury. These interventions include:

5.4.3.2.1 Tailored exercises to improve the strength and function of affected areas.

5.4.3.2.2 Gait training to improve walking ability.

5.4.3.2.3 Neuromuscular re-education to regain control and coordination of muscle groups in functional activities.

Examples include static and dynamic balance training, Functional Electrical Stimulation (FES), and task-specific training.

5.4.3.3 Apply physiotherapy respiratory interventions to improve lung volume and function.

Examples include airway clearance techniques, mobilization, and physical activity, Active Cycle of Breathing Technique (ACBT), and postural drainage.

5.4.3.4 Apply physiotherapy cardio-vascular interventions. Examples include positioning for pressure care, exercises, and cardiopulmonary exercise testing

5.4.3.5 Apply skin care interventions such as scar and soft tissue mobilization, thermal therapy, and light therapy.

5.4.3.6 Apply therapeutic exercises such as:

5.4.3.6.1 Exercises for post-surgery and post-injury recovery.

5.4.3.6.2 Exercises for health promotion and prevention of injury and disease.

5.4.3.6.3 Exercises for rehabilitation, including functional training in self-care and home management to minimize incapacity and support the patient's independent living and quality of life.

5.4.3.7 Apply electro-physical modalities (e.g., hot packs, cryotherapy, ultrasound therapy, electrical stimulation such as interferential therapy, transcutaneous electrical stimulation, and electro-muscular stimulation).

5.4.4 Assistive and Supportive Devices

5.4.4.1 Utilize assistive devices to support the habilitation and rehabilitation of individuals with disabilities.

5.4.4.2 Assist patients with the appropriate use of braces, orthotics, and splinting, including educating them on the indications, uses, and care.

5.4.4.3 Transfer aids and mobility devices.

5.4.4.4 Apply bandaging, strapping, taping, and slings.

5.4.4.5 Apply pressure garments.

6. Specific Learning Requirement / Privileging Requirement

6.1 Physiotherapists and Physiotherapist Technicians must remain competent within their scope of practice. They must seek continuous education to enhance their knowledge and update their clinical skills to keep up with the newly introduced technologies and evidence-based clinical practice.

Certain clinical skills and techniques in physiotherapy require additional specific training and competency assessment.

6.2 A Physiotherapist who wishes to perform specific treatment interventions listed below must successfully complete an accredited competency-based clinical training program and competency assessment of but not limited to- the following:

- 6.2.1 Dry needling
- 6.2.2 Acupuncture
- 6.2.3 Taping
- 6.2.4 Casting
- 6.2.5 Specific aquatic therapy/hydrotherapy
- 6.2.6 High-velocity thrusts and spinal manipulation
- 6.2.7 Other electrotherapy modalities (e.g., LASER, shockwave therapy, light/phototherapy, ultraviolet radiation, shortwave diathermy, super inductive therapy, spinal decompression therapy)
- 6.2.8 Other modalities (e.g., vibration therapy, ultrasound imaging for musculoskeletal Diagnostics and rehabilitation, virtual reality, mirror imaging, nanotechnology, genomics, and robotics)
- 6.2.9 Advanced respiratory therapy techniques
- 6.2.10 Vestibular rehabilitation
- 6.2.11 Pelvic floor rehabilitation/ Women's and Men's Health Rehabilitation
- 6.2.12 Oncology rehabilitation
- 6.2.13 Neurodevelopmental Therapy (NDT)/Bobath
- 6.2.14 Lymphedema techniques and management
- 6.2.15 Amputee rehabilitation
- 6.2.16 Manual therapies and spinal manipulations
- 6.2.17 Temporomandibular joint dysfunction assessment and management

Note: The above list is not exhaustive, as technologies, treatment modalities, and techniques continue to evolve in the field of physiotherapy.

7. Relevant Reference Documents

No.	Reference Date	Reference Name	Relation Explanation / Coding / Publication Links
1	2024	Protection, support and assistance of people of determination	https://u.ae/en/information-and-services/social-affairs/people-of-determination
2	2024	Unified Healthcare Professional Qualifications Requirements.	https://www.doh.gov.ae/en/pqr
3	2024	Standard for Clinical Privileging of Healthcare Workforce and Clinical Services	https://www.doh.gov.ae/-/media/87DBE2A3226940E8A5712D3577064672.ashx
4	2024	HAAD Standard for First Aid Training	https://www.doh.gov.ae/-/media/767954B8B6AC4A2CA31ACD629B2D7A05.ashx
5	2024	Policy on Patient Rights and Responsibilities	https://www.doh.gov.ae/-/media/E04904122AA0437AB409CBB1469C56B8.ashx
6	2024	Standard on collaborative practice agreement between physician and advanced healthcare professionals	https://www.doh.gov.ae/-/media/C2E2915D687344ED891947036DC8E9DB.ashx
7	2024	Ministerial Resolution No. (1448) of 2017 on Adoption of Code of Ethics and Professional Conduct for Health Professionals	https://mohap.gov.ae/app_content/legislations/php-law-en64/mobile/index.htm
8	2024	Article 24 of Federal Law No. (5) of 2019 on Regulating the Practice of Human Medicine and its Executive Regulations	https://mohap.gov.ae/en/aboutus/legal-references
9	2024	Ministerial Resolution No. 14 of 2021 on the Patient Rights and Duties Charter	https://uaehpl.demo.fi.ae/en/health-policies-and-legislations-advocacy/health-legislations?itemId=57c4ff8d-648c-4811-8830-5c3724b7fdd6
10	2024	Federal Law No. 29 of 2006 In Respect of the Rights of People with Special Needs	https://www.un.org/development/desa/disabilities/wp-content/uploads/sites/15/2019/11/United-Arab-Emirates-The-Rights-of-People-with-Special-Needs.pdf
11	2024	Federal Decree Law No. (4) of 2016 Concerning Medical Liability and its Executive Regulations	https://mohap.gov.ae/en/aboutus/legal-references

12	2024	Federal Law No. (3) of 2016 Concerning Child Rights Law "Wadeema"	https://www.mocd.gov.ae/en/about-mocd/laws-and-legislations.aspx
13	2024	Unified Healthcare Professional Qualification Requirements (PQR)	https://www.doh.gov.ae/en/pqr
14	2024	DOH Standard for Clinical Privileging Framework	https://www.doh.gov.ae/-/media/87DBE2A3226940E8A5712D3577064672.ashx
15	2024	World Physiotherapy	https://world.physio/
16	2024	Physiotherapist education framework	https://world.physio/news/world-physiotherapy-publishes-framework-physiotherapist-education
17	2024	Scope of Practice for Physiotherapist	dha.gov.ae/uploads/062023/Standards
18	2024	The standards of proficiency for physiotherapists	https://www.hcpc-uk.org/standards/standards-of-
19	2024	Standards for Physiotherapy Practices	https://australian.physio/sites/default/files/tools/Resources/Private/PracticeStandardsforphysiotherapypractices2011.pdf
20	2024	Standards of Practice for Physical Therapists in British Columbia	https://cptbc.org/wp-content/uploads/2024/03/CPTBCStandards2024IndigenousCSHAR.pdf
21	2024	Professional Board for Physiotherapy, Podiatry and Biokinetics	https://www.hpcs.co.za/Content/uploads/professional_boards/ppb/accreditations/MSTPhysiotherapyfinalNov%202023.pdf
22	2024	Advanced practice in physiotherapy	https://www.csp.org.uk/system/files/alpin_physiotherapy_final.pdf
23	2024	Standards of Practice College of Physiotherapy Alberta	https://physiotherapy.ca/app/uploads/2023/01/competency_profile_final_en_0.pdf
24	2024	Rehabilitation Key Facts	https://www.who.int/news-room/fact-sheets/detail/rehabilitation
25	2024	Physiotherapy Scopes Ministry of Qatar	https://dhp.moph.gov.qa/
26	2024	The Federation of State Boards of Physical Therapy	https://www.fsbpt.org/
27	2024	American Physical Therapy Association	https://www.apta.org/

28	2024	Essential Competency Profile for Physiotherapist Assistants in Canada	PTA profile 2012 English.pdf (npag.ca)
29	2024	Direction and supervision of the Physiotherapy Technician	https://www.apta.org/apta-and-you/leadership-and-
30	2024	PHYSIOTHERAPY NZ GUIDELINES: For the use of physiotherapy assistants/support workers	https://pnz.org.nz/Attachment?Action=Download&Attachment_id=112
31	2024	Vestibular Rehabilitation for Peripheral Vestibular Hypofunction: An Updated Clinical Practice Guideline from the Academy of Neurologic Physical Therapy of the American Physical Therapy Association	https://pubmed.ncbi.nlm.nih.gov/34864777/
32	2024	Clinical practice guidelines: rehabilitation interventions for urgency urinary incontinence, urinary urgency, and/or urinary frequency in adult women	https://www.ics.org/2023/abstract/367
33	2024	A systematic review of rehabilitation and exercise recommendations in oncology guidelines	https://pubmed.ncbi.nlm.nih.gov/33107982/
34	2024	Physiotherapy and physical activity as factors improving the psychological state of patients with cancer	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8645643/
35	2024	The Bobath concept – a model to illustrate clinical practice Marc Michielsen, Julie Vaughan-Graham, Ann Holland, Alba Magri & Mitsuo Suzuki - 17 Dec 2017	https://pubmed.ncbi.nlm.nih.gov/29250987/
36	2024	The Bobath Concept (NDT) as rehabilitation in stroke patients: A systematic review Abhishek Pathak, Vyom Gyanpuri, Priya Dev, and Neetu Rani Dhiman – Nov 2021	https://pubmed.ncbi.nlm.nih.gov/35136756/
37	2024	Neurodevelopmental Treatment in Children With Cerebral Palsy: A Review of the Literature - Sandeep Khanna, Ranganathan Arunmozhi, and Chanan Goyal – Dec 2023	20240111-18432-1yhuaqm.pdf (cureus.com)
38	2024	Present and future of gait assessment in clinical practice: Towards the application of novel trends and technologies – Dec 2022	https://pubmed.ncbi.nlm.nih.gov/36590154/
39	2024	Booklet for the assessment of competence for Band 4 Physiotherapy Assistant Practitioners	https://www.csp.org.uk/system/files/documents/2020-01/b4_physiotherapy_assistant_practitioner_competency_workbook.pdf