
THE ROLE OF THE PAEDIATRIC PHYSIOTHERAPIST

WHAT ARE PHYSIOTHERAPISTS?

The role of the Physiotherapist is to assess and manage children and young people with movement disorders, disability or illness. The aim of the physiotherapist is to help the child/young person reach their full potential through providing physical intervention, advice and support.

Physiotherapy services across Scotland are delivered in line with national and local priorities. The service delivered may change to reflect current staffing levels and resource demands.

WHY DO WE SEE CHILDREN?

Physiotherapists aim to improve the quality of life of children and young people by promoting independence and encouraging physical fitness and well being.

WHO DO PHYSIOTHERAPISTS WORK WITH?

Physiotherapists work in close partnership with the child and their family, education, social work, other healthcare professionals and the voluntary sector. Together they have a shared responsibility for meeting children's needs.

WHERE DO PHYSIOTHERAPISTS WORK?

Physiotherapists work in hospitals, clinics, nursery, schools, at home and any other locations depending on the needs of the child or young person.

WHAT DO PHYSIOTHERAPISTS DO?

A) REFERRAL

When a referral is received additional information may be gathered and a decision will be made as to the appropriateness and urgency of the referral.

The parent and the referrer will be informed of the decision and given further advice as appropriate.

B) ASSESSMENT

Assessment may include information gathering from parents, families and others involved in the child's life and building on what is already known about the child from other agencies such as education and social work.

Assessment will include:

- Strength and co-ordination
- Motor development
- Posture and balance
- Quality of movement
- Function

This may include formal and informal assessment such as observation.

The decision whether to offer further support from Physiotherapy is based on the outcome of assessment, the impact of the difficulty on the child's life and the likelihood of effecting change at this time.

C) REPORTING

Following assessment the outcome will be discussed with the parent and a written report sent to the parent and the referrer. The therapist may need to share this information with other people for the child's benefit. This will be discussed with the parents and referrer.

D) INTERVENTIONS

There is a range of possible ways of supporting a child. These will always involve working with and through parents and others such as classroom assistants, physiotherapy support workers, class teachers, learning support teachers, nursery workers.

Possible ways of supporting the child may include one or more of the following:

- Training and advice for parents/carers and other service providers (health, social work, education)
- Provision of programmes of work and ways of supporting the child in different environments and by different people
- Specialist equipment and appliances advice
- Special swimming
- Involvement with educational and transition planning
- Direct therapy with child individually or in a group

Following the agreed period of support the child's progress will be reviewed in partnership with parents/carers and others and further recommendations and actions will be adopted according to the child's changing needs.

E) DISCHARGE

The child will be discharged from therapy for one or more of the following reasons:

- Physical potential achieved
- Child not benefiting from therapy at this time
- Child/young person or family do not want to continue with therapy

FINDING OUT MORE ABOUT PHYSIOTHERAPY

The Chartered Society of Physiotherapy sets a Code of Practice and professional standards that all practitioners must adhere to:

www.csp.org.uk

Physiotherapists are graduate health professionals who must be registered with the Health Professions Council (HPC) which is the regulatory body for all Allied Health Professions (AHPs).

You can check registration of any Physiotherapist via:

www.hpc-uk.org

