



CLASSIFICATION STANDARD

**OCCUPATIONAL AND PHYSICAL THERAPY**

**SCIENTIFIC AND PROFESSIONAL CATEGORY**

# **CLASSIFICATION STANDARD**

## **OCCUPATIONAL AND PHYSICAL THERAPY**

### **SCIENTIFIC AND PROFESSIONAL CATEGORY**

Issued by:

Classification, Human Resources  
Information Systems and Pay Division  
Personnel Policy Branch 1986



## CONTENTS

|   | PAGE |
|---|------|
| INTRODUCTION                                    | 1    |
| CATEGORY DEFINITION                             | 2    |
| GROUP DEFINITION                                | 3    |
| LEVEL DESCRIPTIONS                              | 4    |
| BENCH-MARK INDEX:                               |      |
| Physiotherapist (OP-1)                          | 1.1  |
| Occupational Therapist (OP-1)                   | 2.1  |
| Inpatient Section Senior Physiotherapist (OP-2) | 3.1  |
| Sole Charge Physiotherapist (OP-2)              | 4.1  |
| Chief of Physiotherapy (OP-3)                   | 5.1  |
| Chief of Occupational Therapy (OP-3)            | 6.1  |

## INTRODUCTION

This standard describes the classification plan which utilizes the level description method of job evaluation to classify jobs allocated to the Occupational and Physical Therapy Group. It consists of an introduction, definitions of the Scientific and Professional Category and the occupational group, level and bench-mark descriptions .

Each of the three (3) levels in the classification plan is described in terms of distinguishing characteristics used to assign jobs to the level. Jobs are regarded as being of equal value when they best correspond, on the whole, with the description of a level and the bench-marks that illustrate that level.

### Bench-marks

The bench-marks consist of a list of the major duties with the percentage of time devoted to each and descriptions of the three distinguishing characteristics: Complexity of Work, Scope for Decision Making and Charge Duties. The bench-marks are an integral part of the plan and must be used to ensure consistency in applying the level descriptions.

### Use of the Standard

There are five steps in the application of this classification standard.

1. The position description is studied to ensure an understanding of the job content and its relationship to positions above and below it in the organization.
2. Allocation of the position to the category and the group is confirmed by reference to the definitions and the descriptions of inclusions and exclusions.
3. The position is tentatively assigned to a level by comparing the duties to the level descriptions. The position is tentatively assigned to the level that best corresponds on the whole with the duties of the position.
4. The position description is compared to the bench-marks that illustrate the level tentatively selected. Comparisons are also made to the bench-marks that illustrate the levels above and below the level tentatively selected.
5. The position is compared with other positions in the occupational group that have been assigned to the same level, as a check on the validity of the level selected.

CATEGORY DEFINITION

Occupational categories were repealed by the Public Service Reform Act (PSRA), effective April 1, 1993. Therefore, the occupational category definitions have been deleted from the classification standards.

#### GROUP DEFINITION

For occupational group allocation, it is recommended that you use [the Occupational Group Definition Maps](#), which provide the 1999 group definition and their corresponding inclusion and exclusion statements. The maps explicitly link the relevant parts of the overall 1999 occupational group definition to each classification standard.

LEVEL DESCRIPTIONSLevel 1

This level has responsibility for giving occupational or physical therapy treatments to patients or groups of patients in assigned wards or in an assigned section of the therapy department. Work is performed under the supervision of a more senior therapist. Charge duties are limited to explaining therapy techniques and methods to therapy technicians and assistants, students, interns and other members of the treatment team.

Level 2

This level has responsibility for the supervision of a part of the professional staff of an occupational or physical therapy department in a large treatment institution, or for the management of a small occupational or physical therapy department, or for the operation of a sole charge therapy department.

Level 3

This level has responsibility for the management of a medium or large occupational or physical therapy department in one of the two large treatment institutions; i.e., Ste-Anne-de-Bellevue's Hospital or the National Defence Medical Centre.

Note to Raters

A small department would comprise up to four therapists with or without responsibility for non-professional staff.



## BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 1

Level: 1

Descriptive Title: Physiotherapist

Reports to: Chief of Physiotherapy

## Duties

6 of Time

Tests and evaluates patients' physical and mental condition; plans integrated physiotherapy treatment programs upon referrals; applies specific treatment techniques such as exercise and manual therapy, electrotherapy, hydrotherapy, cryotherapy and massage; conducts group therapy; adapts prosthetic and orthotic devices and instructs patients in their use and care; provides counselling to the family and others within the context of a multi-disciplinary approach to treatment; discusses and reports patients' progress.

75

Supervises treatments and instructs the rehabilitation technician and the assistant technicians in the appropriate techniques and/or treatments; trains interns studying in physiotherapy and conducts orientation tours to the hospital staff.

25

Factor Rationale:Complexity of Work

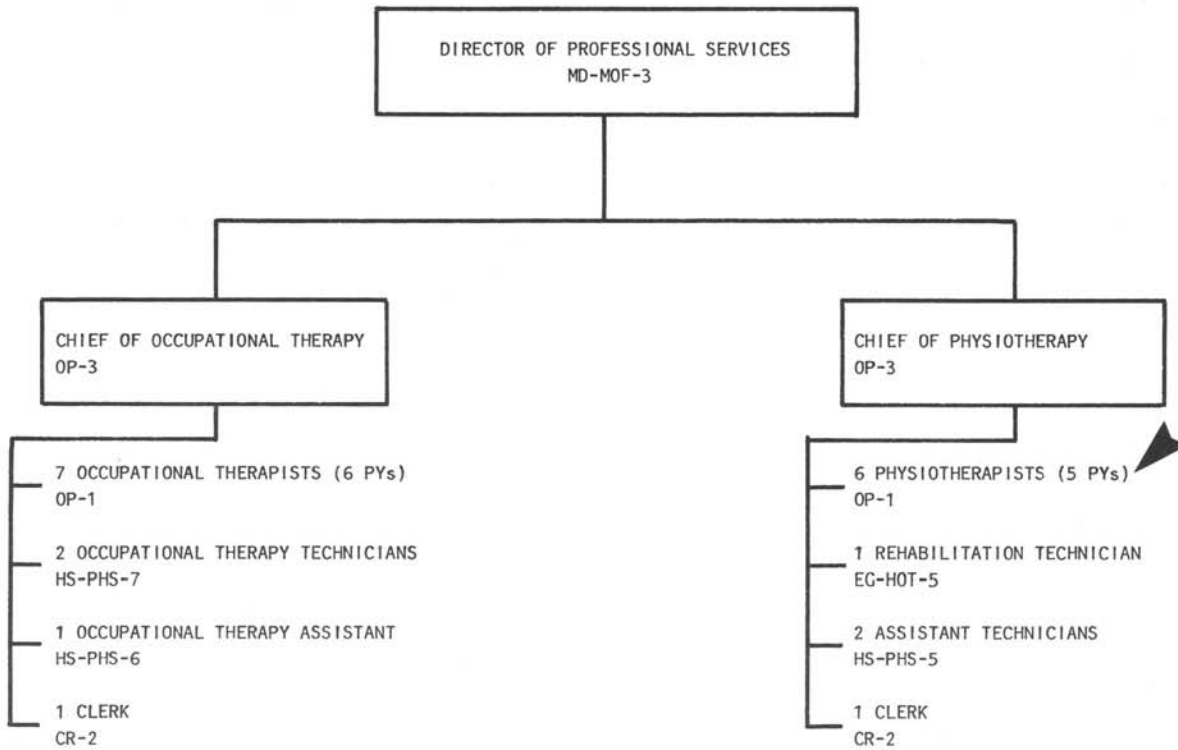
The work requires assessing, planning and implementing physiotherapy treatment that is appropriate to the patient's needs and condition and the treatment received in other hospital departments and wards. It requires observing and reporting on the condition, conduct and progress of patients.

Scope for Decision Making

The work requires that decisions or recommendations be made for the selection and application of therapeutic treatment, the cessation or alteration of treatment, structural change, the installation of mechanical aids, equipment and the modification of physical barriers in the patients' environment.

Charge Duties

The supervision is limited to the provision of training and to the conduct of orientation tours.



BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 2

Level: 1

Descriptive Title: Occupational Therapist

Reports to: Chief of Occupational Therapy

Duties

% of Time

Assesses patients' physical and mental condition; co-ordinates appropriate therapeutic programmes upon referral; selects, adapts and organizes specific activities to obtain functional independence in the physical, psychological and social spheres; plans and organizes individual and/or group therapy treatments; devises, constructs and adapts splints, mechanical aids and clothing modifications; trains patients in the use and care of such devices; creates and installs aids for the proper positioning of patients; develops appropriate home or community programmes to maintain and enhance the performance of patients; co-ordinates the treatment plan with the patients, their family, and the healthcare team and provides them with counselling; discusses and reports patients' progress.

85

Supervises treatment and gives advice and guidance to technicians; demonstrates to the nursing staff the use of mechanical aids; conducts orientation tours to the hospital staff; trains and instructs occupational therapy students and interns.

15

Factor Rationale:

Complexity of Work

The work requires planning and implementing occupational therapy treatment that is appropriate to the patient's needs and compatible with other treatment accorded by employees of other hospital disciplines and wards, observing and reporting on the progress of the patient, organizing activities, and developing self-help devices.

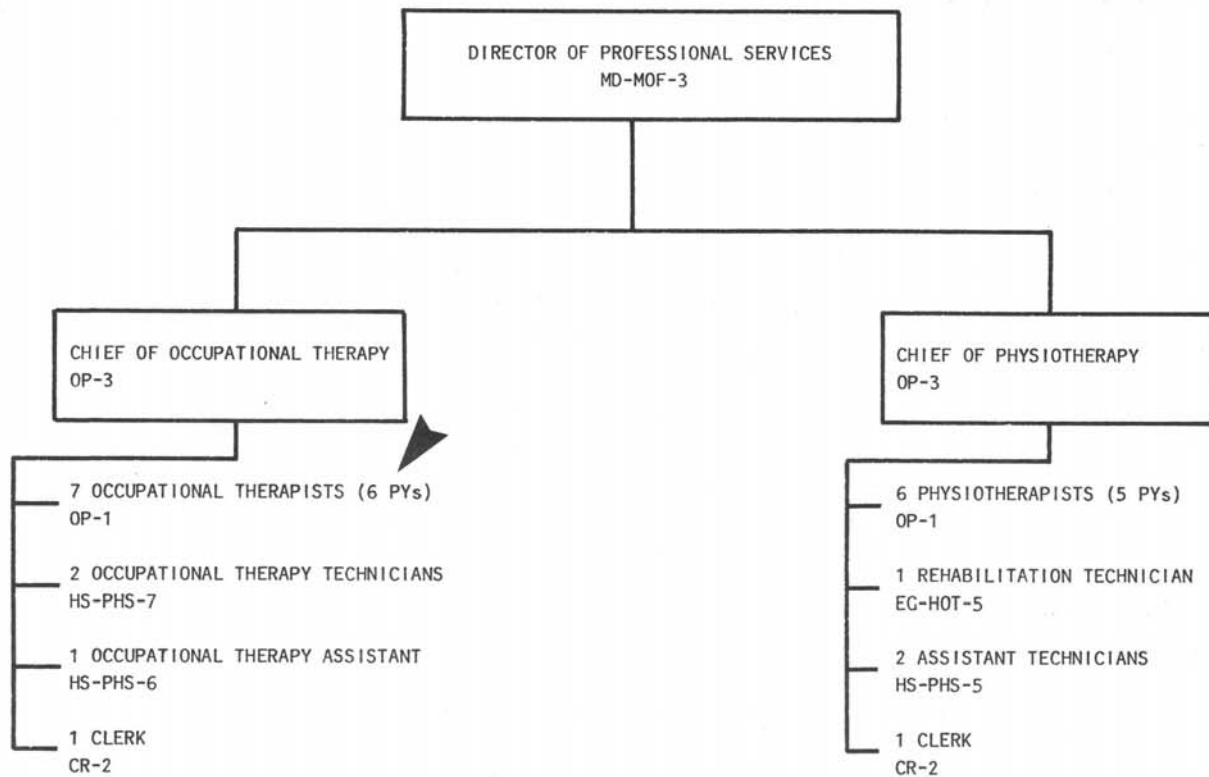
Scope for Decision Making

The work requires that decisions and recommendations be made in the selection, modification and adaptation of therapy treatment and as to structural changes, installing of mechanical aids and removal of hazards from home environment. Recommendations are also made to terminate, extend or change treatment.

Charge Duties

The supervision is limited to giving advice, guidance and training.





BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 3

Level: 2

Descriptive Title: Inpatient Section Senior Physiotherapist

Reports to: Head of Physical Therapy Division

| Duties   | % of Time |
|--|-----------|
| Manages, delivers and evaluates physical Therapy Treatment Services provided to a wide range of surgical, medical, neurological, orthopedic, geriatric or psychiatric inpatients; plans and establishes new patient care programmes; supervises, trains and evaluates the performance of four physiotherapists.  | 45        |
| As a member of the patient-care team, develops and conducts individual treatment programs based on the physician's diagnosis and referral; selects the appropriate individual or group treatment technique; coordinates the treatment programme with those of other treatment personnel; provides an on-going evaluation of the patients functional progress and reports progress with appropriate recommendations to the physician. | 45        |
| Provides clinical advice and guidance based on experience in physiotherapy techniques to students, interns, and hospital staff.  | 10        |

Factor Rationale

Complexity of Work

The work requires managing physical therapy treatment services and providing individual and group therapy treatment to patients.

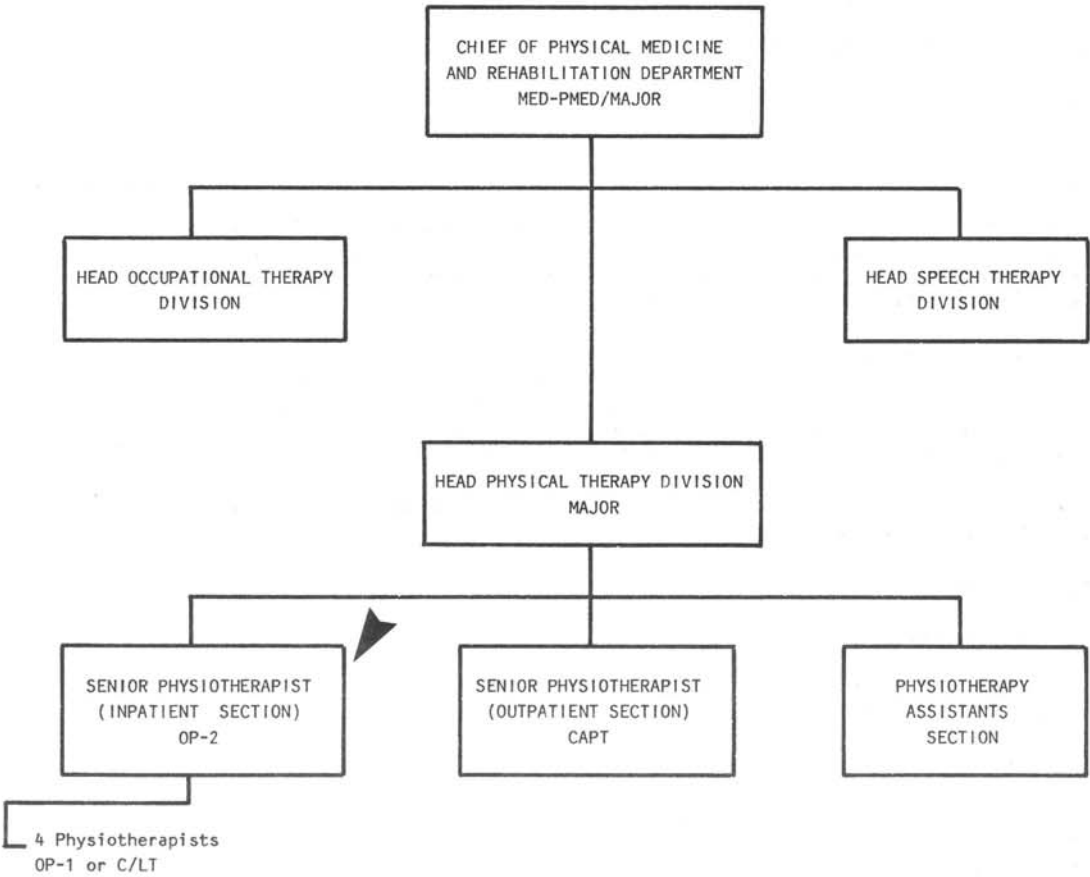
Scope for Decision Making

The work requires selecting treatment that meets the needs of the inpatient that is compatible with treatment given by the staff of other disciplines and services. Decisions are made to terminate, extend or change the treatment, or to transfer the patient to a different milieu. Recommendations are made to the Head of Physical Therapy concerning treatment and clinical training programmes, staff management and acquisition of equipment and supplies.

Charge Duties

The work requires supervision of employees that utilizes four person-years; it requires assessing their performance and providing them with advices, guidance and training. It also requires planning the activities of a section located within a large treatment institution.

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION



# BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 4

Level : 2

Descriptive Title: Sole Charge Physiotherapist

Reports to: Medical Officer

| Duties  | % of Time |
|---|-----------|
| Assesses outpatients and inpatients physical and mental condition; develops treatment plans; provides individual and group physiotherapy treatment; organizes and supervises activities and special rehabilitation classes; instructs patients; assesses results and modifies treatment as necessary; advises medical officer in the progress of patients; maintains patient treatment records.   | 70        |
| Plans, organizes and directs the operation of the physiotherapy department and program; develops, reviews and modifies goals, objectives, policies, methods, procedures, systems, activities and services; prepares operating and capital budgets; maintains and controls supplies and inventory of equipment; arranges for adequate maintenance and repairs of equipment and facilities; coordinates activities with other treatment and non-treatment services. | 20        |
| Performs other duties such as: representing the physiotherapy department at meetings both inside the hospital, and with outside organizations; acting as a resource person within the community.  | 10        |

## Factor Rationale

### Complexity of Work

The work requires managing the physiotherapy department to ensure optimum utilization of resources, planning treatment programs that are compatible with the patient's condition and complement the treatment given to patients by the staff of other disciplines and services and providing individual and group treatment to patients.

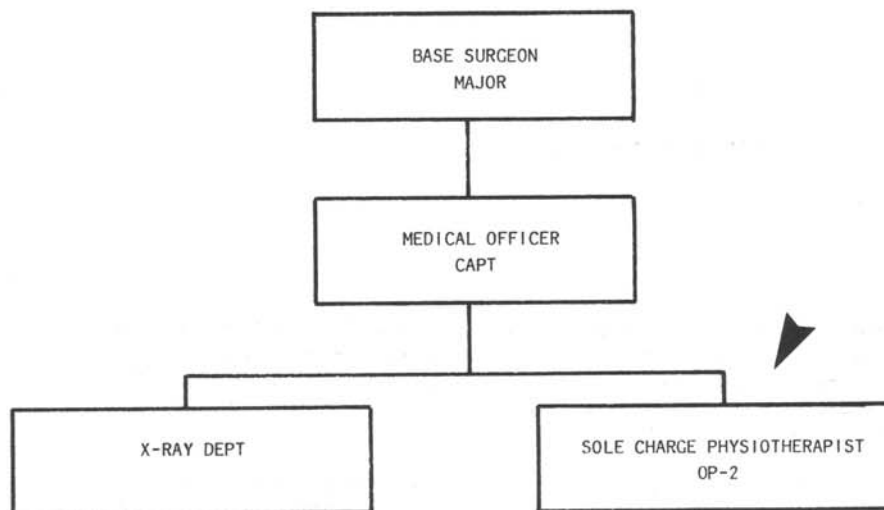
### Scope for Decision Making

The work is carried out under indirect supervision. The responsibility for selection and application of treatment therapy is the physiotherapist. Decisions are made to terminate, extend or change treatment, and to modify methods, systems and services.

### Charge Duties

The work requires planning the programs and services of the physiotherapy department.





## BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 5

Level : 3

Descriptive Title: Chief of Physiotherapy

Reports to: Director of Professional Services:

| Duties  | % of Time |
|---|-----------|
| Assesses the need for physiotherapy services; plans, establishes, evaluates and controls policies and procedures for the physiotherapy department; forecasts, directs, administers and controls the department's human, physical, material and financial resources; plans, organizes, directs, evaluates, controls and coordinates varied treatment programs with other disciplines involved in the care of patients; identifies and evaluates solutions to treatment problems; selects, approves and corrects treatments for difficult cases.  | 55        |
| Supervises the work of six physiotherapists, one rehabilitation technician, two assistant technicians and one clerk; writes job descriptions, statements of qualifications and rating profiles for selection boards; develops and implements staff orientation sessions and training and development programmes on best methods of work and on methods of accident prevention for subordinate employees and interns studying physiotherapy; motivates personnel to improve treatment standards; evaluates staff performance, takes disciplinary actions and acts as first level of the grievance procedure. | 45        |

Factor Rationale:Complexity of Work

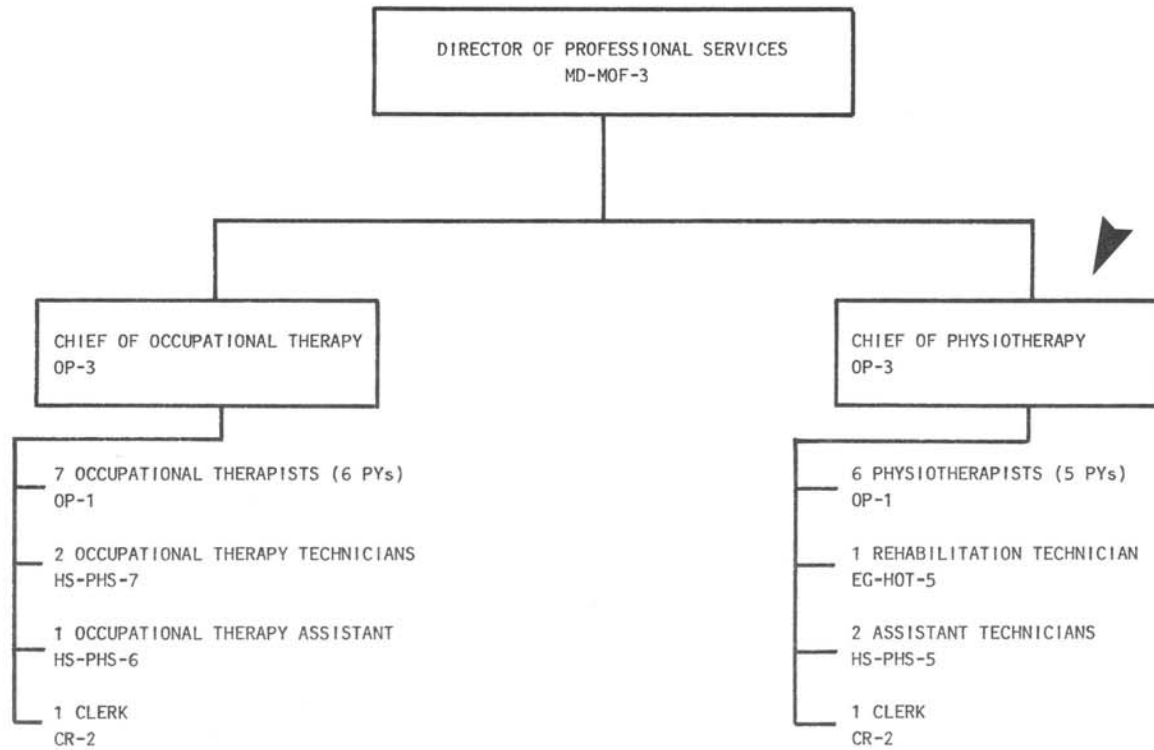
The work requires managing the physiotherapy department and planning treatment programs that are compatible with the patient's condition and complement the treatment accorded patients by the staff of other disciplines and services. The work also requires attending meetings and conferences, and assisting subordinates with difficult cases.

Scope for Decision Making

The work requires that decisions be made with regard to the adoption and implementation of new techniques, the acquisition of new equipment and the selection of treatment for patients. Decisions are also made in the termination, extension or change of patient treatment and in the development of recommendations to improve and adjust the over-all physiotherapy program.

Charge Duties

The work requires supervision of employees that utilizes 9.5 person-years; it requires scheduling and allocating work, providing a training service, giving advice and guidance on difficult cases, participating in the selection of employees, appraising their performance, developing and implementing quality assurance and program evaluation systems within the physiotherapy department and solving staff relation problems. The physiotherapy department is located within a large treatment institution.



## BENCH-MARK POSITION DESCRIPTION

Bench-mark Position Number: 6

Level: 3

Descriptive Title: Chief of Occupational Therapy

Reports to: Director of Professional Services

## Duties

% of Time

Analyses patients' needs from referrals; plans, organizes, directs, coordinates, evaluates and controls policies, programmes, operations and procedures of the Occupational Therapy department for patients of the medical, psychiatric and day care sections of the hospital and the domiciliary care unit of a neighboring lodge; forecasts, directs and controls the department's human, physical, material and financial resources; suggests treatment for difficult cases and explains the rationale of treatment; reviews reports and approves recommendations for termination or change of treatment.

45

Supervises the work of seven therapists, two occupational therapy technicians, one occupational therapy assistant and one clerk; assigns work; writes job descriptions, statements of qualifications, and rating profiles for selection boards; develops and implements staff orientation sessions and training and development programmes for subordinate employees, occupational therapy interns and for hospital staff; demonstrates new or alternative treatments; appraises staff performance and acts as first level of the grievance procedure; supervises a speech therapy contract performed by a part-time employee.

45

Performs other duties such as: treating patients, designing and making orthotic devices and aids for positioning patients, planning and initiating special treatment projects.

10

Factor Rationale:Complexity of Work

The work requires managing the occupational therapy department with two areas of treatment (psychiatry and physical medicine) and planning of appropriate treatment programs that are integrated with the treatment accorded patients by the staff of other disciplines and services. It also requires developing, implementing and monitoring new and/or modified techniques and procedures. The work requires participation in clinics and conferences, planning and implementing training programs.

Scope for Decision Making

The work requires that decisions be made for the adaptation and implementation of new techniques, the acquisition of new equipment, the extension and change of patient treatment, and the improvement and adjustment of the over-all treatment program.

Charge Duties

The work requires supervision of employees that utilizes ten person-years. It requires allocating work, providing a training service, giving subordinates assistance with difficult cases, selecting, evaluating and maintaining competent staff, developing and implementing quality assurance and program evaluation systems within the Occupational Therapy department and solving staff relation problems. The therapy department is located within a large treatment institution.

