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Physical therapy scope of practice in primary health care: Perception of physical therapy leaders in Saudi Arabia

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Background: Integration of physical therapy services in primary care settings has become a topic of considerable international interest. Current trends in health care show an increasing move of physical therapy services from tertiary care towards primary care settings. However, this trend has not yet extended to primary care centers in Saudi Arabia. A Recent Ministry of Health report in 2011 showed that movement related impairments were the second most common reason for patients visiting primary care centers accounting for 2.3 million visits.

Objective: To explore the views of the physical therapy service leaders in Saudi Arabia regarding the integration of physical therapy service in primary care settings.

Methods: A self-administered questionnaire consisting of both open and closed ended questions was distributed via email to physical therapy leaders representing different regions and health care providers of Saudi Arabia.

Results: 26 participants answered the questionnaire. Eighty five percent of the sample had ≥ 10 years of experience with 57.6% of them holding a Post-Graduate degree. Participants were from different health care providers and represented all five geographical regions of Saudi Arabia. Eighty one percent of the sample reported that the adoption of physical therapy service in primary health care would be advantageous, as it offers earlier access to health care and is more cost-effective. The respondents also stated such a service would contribute towards the prevention of common non-communicable health diseases.

Conclusion: This survey generally provides positive recommendations for the adoption of physical therapy service in Saudi Arabia primary care. However, issues raised by this study require consideration during the development of such service.

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The consultation - taught by five cards

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This workshop applies for all clinical working doctors because it presents a simple and effective tool for the consultation. The workshop gives you an easy way to find, train and learn the underlying dimensions of patient-centered care. The consultation can be divided into 3 parts: The Patients', the Doctors' and the Common part. I want to share my experience using 5 cards to make the Patients' part into a patient-centered consultation and work less. The 5 cards in the Patients' part I will present and role-play. Then participants in groups of 3 will role-play. While letting the patient tell his narrative, you will have to imagine you have got 2 cards: 1) the receipt card: This card is the most important. It makes the patient to feel listened to and stimulated to go on. It relieves tension in the consultation. To be used before you give the other cards; 2) Summary card: Every time you summarize what the patient has told you, he will listen to you. That gives you the opportunity to control the conversation and make the patient to play one of her 3 cards like, the idea card: This card you must ask for at least one time, the concern card: Also this card you must ask for at least one time and the expectation card: Ask for it at least one time. It will clarify what you have to do in the consultation. To be considered in advance I will give a short presentation, role-play and then ask participants to role-play in pairs of 3. Some of the plays will be video-recorded and revised. Finally we will have a plenary discussion.

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