

Priority Intervention Criteria– Physiotherapy

Priority Intervention Criteria (PIC) are used to prioritize daily caseloads:

- In times of high patient volume
- For relief coverage
- For weekend coverage
- During staff shortages.

EVERYONE is expected to take responsibility. If your caseload of priority “A” patients is more than you can handle in the allotted time, use the white board (SPH) or email/pager (MSJ) to indicate how much help you need. Other physiotherapy staff members are then expected to prioritize their own patient lists and offer help when they have covered their own priority “A” patients. Any time left can be used to cover priority “B” and “C” patients.

If there is a possibility that priority “A” patients may not all be seen, the site lead, specialist in the area, or weekend lead, as appropriate, will coordinate the coverage equally between therapists.

Type “A” priority patients are defined as:

1. Patients who are at high risk for developing postoperative respiratory complications e.g. following major thoracic, upper abdominal, and/or open heart surgery, or patients with previous history of respiratory disease undergoing surgery
2. Patients who could deteriorate significantly and/or are at risk of retaining chest secretions
3. Patients whose imminent discharge from hospital is dependent on physiotherapy intervention e.g. orthopaedic patients requiring walking aids and gait training/stairs, Patients on Surgical pathways
4. Patients who need physiotherapy-specific intervention to mobilize and would deteriorate without treatment
5. Patients with new CVAs to be assessed once cleared to mobilise.
6. Post-operative breast surgery patients.(Primarily MSJ)
7. New referrals to be screened for appropriateness of treatment.

Type “A” priority generally does not include:

1. Patients with respiratory complications who can adequately clear their own secretions
2. Patients with mobility problems who are not anticipated to deteriorate or should mobilize with the nursing staff
3. Any preoperative assessments.

Type “B” priority patients are defined as patients who are stable and require ongoing monitoring/treatment

Type “C” priority patients are defined as patients not on regular treatment, who require monitoring by the physiotherapist

Supporting Document:

Evidence-Based Practice in Respiratory Care

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