

Original Research Article

Medicolegal knowledge and its practice among physiotherapists in Maharashtra

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ABSTRACT

Background: Physiotherapy is a modern science and an independent profession. Physiotherapists are expected to conduct professional practice according to the existing laws and follow the guidelines of the respective state councils. Awareness about patients' rights is increasing, as are malpractice cases and as professionals who are in constant contact with their clients, physiotherapists need to safeguard themselves from a medicolegal perspective. Having appropriate knowledge of medicolegal aspects and practicing accordingly will protect them against legal damages while maintaining professional integrity. This study aimed to find the level of medicolegal knowledge and its practice among physiotherapists in Maharashtra.

Methods: An observational, cross-sectional study was conducted in Maharashtra, India. A self-made, validated questionnaire was distributed online and 100 physiotherapists across Maharashtra, accessed via the convenience sampling method, were surveyed. The collected data was analysed using descriptive statistics.

Results: The average knowledge was 50.38%, but the average correct practice was 71.86%. These findings showed that the physiotherapists were practicing according to basic knowledge and they needed to improve their knowledge of aspects such as the Maharashtra Act II of 2004, documentation, applicable laws and professional indemnity to practice with unquestionable protection against legal proceedings.

Conclusions: Physiotherapists in Maharashtra have basic knowledge of the governing body and of the legal aspects of their profession. With medical negligence cases on the rise, they need to update themselves about the details to conduct a safe and efficient practice. This will enhance their professional competence and provide legal and financial security.

Keywords: Documentation, Indemnity, Maharashtra, Medicolegal, Physiotherapy

INTRODUCTION

The World Confederation for Physical Therapy defines physical therapy as 'services for individuals and populations to develop, maintain and restore maximum movement and functional ability throughout the lifespan'.¹

Physiotherapy is a modern science and a growing profession in India. Despite the obvious need, there is no

national government organization regulating the physiotherapy profession in India, owing to which state councils have been established in various states for the same.²

The status of physiotherapy as a profession changes between certain states resulting in varying rules and regulations pertaining to physiotherapy. This makes it necessary for all the physiotherapists to be aware of the existing laws and standards of practice to be followed within their respective states at the very least.

In Maharashtra, the physiotherapy profession is governed under the Maharashtra Act II of 2004.³ The Maharashtra State Council For Occupational Therapy And Physiotherapy (Council) has been established for the purpose of co-ordination and determination of standards of education in the field of occupational therapy and physiotherapy and for the maintenance of a register of occupational therapists and physiotherapists for the state of Maharashtra.³

As is the case with all healthcare professions, professional physiotherapy practice requires knowledge of medicolegal aspects. The healthcare sector has been labelled as an 'industry'. The once noble medical profession has been tainted by disgraceful acts towards patients by professionals themselves or by those impersonating them.⁴ There is also the matter of false claims by patients, which needs to be considered.⁵ Since 1995, all healthcare services, have been brought under the purview of the Consumer Protection Act, 1986 (amended in 2019) (CPA) as a result of the case of Indian Medical Association versus V. P. Shantha and others.^{6,7} In a medicolegal case, apart from CPA various other civil laws along with criminal laws may be applicable.⁸

As medical malpractice cases are increasing, it is essential for health professionals to safeguard themselves against such claims and prevent them by conducting an ethical practice. Appropriate documentation and proper consent taking will help in dealing with a malpractice claim.⁹ Professional Indemnity Insurance policies can give protection to healthcare professionals if any medicolegal issues arise.¹⁰ The Insurance Regulatory and Development Authority of India has recommended Professional Indemnity Insurance for medical malpractice claims.¹¹ It is advisable for all healthcare professionals including physiotherapists to have their own professional indemnity insurance.¹²

Accurate knowledge of the regulations set forth by the council and of different medicolegal aspects will establish a strong foundation for a legitimate and ethical practice. Against a background of rising cases of medical negligence, various studies pertaining to medicolegal knowledge have been conducted among healthcare professionals. The studies show that there is an urgent need to improve upon the knowledge of this subject and apply it in practice.¹³⁻¹⁶ Presently, there is a dearth of literature focusing on medicolegal and ethical aspects of physiotherapy.¹⁷

Aim

This study aimed to assess the level of medicolegal knowledge and its practice amongst physiotherapists in Maharashtra with the objective of creating awareness amongst the surveyed physiotherapists and guiding future norms and policies, generating literature on the subject and encouraging further research.

METHODS

The study was an observational, cross-sectional study conducted from October 2022 to March 2023 to survey physiotherapists in the geographical region of Maharashtra, India. Sample size was 100. Sampling technique used was convenience sampling.

Inclusion criteria

Physiotherapists in Maharashtra with a completed B. P.Th degree were included.

Exclusion criteria

Academicians and M.P.Th students who did not practice outside college hours were excluded.

Procedure

A questionnaire containing 15 questions, aimed to assess the medicolegal knowledge and practice was designed after referring to similar studies and was face validated. Institutional ethical committee clearance was obtained and the questionnaire was circulated online. Consent was taken, after which demographic data was collected and the questionnaire was presented. 107 physiotherapists responded out of which 100, who met the inclusion and exclusion criteria, were included in the study.

Questions were asked pertaining to the Maharashtra Act II of 2004, use of the "Dr." prefix, informed consent, documentation, medical negligence, laws and professional indemnity. The questions aimed to assess the knowledge and practice of these aspects. In the Google form, correct answers were scored one and incorrect answers were scored zero, with the maximum total score being fifteen.

Data analysis

The collected data was compiled in Microsoft Excel 2021 and analysed using descriptive statistics.

RESULTS

The study was conducted amongst a population of 100 physiotherapists in Maharashtra. The mean age of the population was 29.29 ± 5.77 years.

Table 1 shows the demographic characteristics of the population. Majority of the participants had completed their M.P.Th (68%) and those having a diploma (D.P.T in sports science) post their B.P.Th were the least (1%). It was also seen that majority of respondents were females (73%). A large percentage (73%) of the population had an experience of 1-10 years and only 1% had experience of 31-40 years with the mean years of experience since completing B.P.Th being 7.96 ± 5.96 years.

Table 1: Demographic data of the population.

Category	Number	Percentage
Qualification		
M.P.Th	68	68
B.P.Th	29	29
B.P.Th and fellowship	2	2
B.P.Th and diploma	1	1
Gender		
Female	73	73
Male	27	27
Years since completing B.P.Th		
1-10	73	73
11-20	23	23
21-30	3	3
31-40	1	1

Maharashtra Act II of 2004

Table 2 shows the knowledge and practice related to Maharashtra Act II of 2004. The average correct practice was 74.33%, but the average knowledge was 38%.

Table 2: Knowledge and practice according to Maharashtra Act II of 2004.

Questions	Correct answers (%)	Incorrect answers (%)
Which of the following is applicable to physiotherapists in the State of Maharashtra?	27 (27)	73 (72)
In Maharashtra physiotherapists are categorized as _____	17 (17)	83 (83)
Are you registered with the Maharashtra OT and PT council?	80 (80)	20 (20)
Do you need to register with the Maharashtra OT and PT council after completing M.P.Th even if you have a valid B.P.Th registration?	78 (78)	22 (22)
How often do you renew your registration with the Maharashtra OT and PT council?	69 (69)	31 (31)
Do you prescribe electrodiagnostic tests (e.g., x-ray) to your clients if required?	74 (74)	26 (26)

Use of “Dr.” prefix and knowledge and practice of informed consent

Table 3 depicts the use of the “Dr.” prefix and the knowledge and practice of informed consent taking. It

was found that 8% used the “Dr.” prefix without a (PT) suffix and 4% of them did not use the prefix at all. Nearly all participants knew of the term ‘informed consent’.

Table 3: Use of “Dr.” prefix and knowledge and practice of informed consent.

Questions	Correct answers (%)	Incorrect answers (%)
Do you as a physiotherapist use “Dr.” prefix before your name?	88 (88)	12 (12)
Do you know about the term “Informed Consent”?	98 (98)	2 (2)
Do you take consent from the parent or legal guardian of a minor before starting with their treatment?	88 (88)	12 (12)

Knowledge and practice of documentation

Table 4 represents the knowledge and practice of documentation. It was seen that 89 out of 100 respondents said that they maintain documentation, but only 13 (14.61%) of them had the correct knowledge regarding its various possible uses.

Table 4: Knowledge and practice of documentation.

Questions	Correct answers (%)	Incorrect answers (%)
Correct documentation can - (can select multiple options)		
a) Help the client in availing insurance for payment		
b) Protect the physiotherapist against false malpractice claims	15 (15)	85 (85)
c) Enable evaluation of clients' status pre- and post-treatment		
d) Implicate the physiotherapist in a malpractice claim		
e) Prevent the client from availing insurance		
Do you maintain documentation regarding your clients' treatment?	89 (89)	11 (11)

Knowledge of medical negligence and laws

Table 5 represents the knowledge of medical negligence and laws. Out of the 86 physiotherapists who knew that physiotherapists can be sued for medical negligence, only 17 (19.77%) had knowledge about the laws that might be applicable.

Table 5: Knowledge of medical negligence and laws.

Questions	Correct answers (%)	Incorrect answers (%)
Can a physiotherapist be sued for “medical negligence”?	86 (86)	14 (14)
Which of the following may be applicable in a medicolegal case? (Can select multiple options)		
a) Law of Torts	18 (18)	82 (82)
b) Criminal Procedure Code		
c) Consumer Protection Act		
d) Indian Penal Code		

Knowledge and practice of professional indemnity insurance

Table 6 shows the knowledge and practice of professional indemnity insurance. 64 physiotherapists knew about professional indemnity insurance out of which only 13 (20.31%) actually possessed the insurance policy.

Table 6: Knowledge and practice of professional indemnity insurance.

Questions	Correct answers (%)	Incorrect answers (%)
Can professional indemnity insurance safeguard you against malpractice claims?	64 (64%)	36 (36%)
Do you currently have professional indemnity insurance?	15 (15%)	85 (85%)

Overall, only 20% of participants had scores below 50%. 80 out of the 100 participants scored above 50% with 11 of them having scored greater than 75%.

DISCUSSION

Physiotherapy is a young profession and there has only recently been a rise in awareness of physiotherapy among the general public as well among various healthcare professionals. Even though the scope of physiotherapy is increasing, there is a lack of adequate legislation and precise guidelines to be followed from a legal perspective

in our country. The Maharashtra State Council For Occupational Therapy And Physiotherapy (Council) was established to address these issues in the state of Maharashtra. The two professions being governed under the Maharashtra Act II of 2004 indicates that physiotherapy has yet to achieve true independence as a profession and presently, efforts are being made for the same.

There is a scarcity of literature focusing on the medicolegal aspects of physiotherapy in Maharashtra as well as in India as a whole. This study is the first of its kind conducted amongst physiotherapists in Maharashtra that illustrates the knowledge and practice in accordance with the Council and with that of other medicolegal aspects.

Majority of the participating physiotherapists were registered with the Council, and they were correctly renewing their registration with the council after every 5 years. They also knew of the registration procedure to be followed after they complete their additional qualifications, such as M.P.Th, even if they have a valid B.P.Th registration at the time. A majority of them were prescribing electrodiagnostic tests (E.g., X-ray) to their clients when they deemed it necessary. Despite the fact that these findings indicated that physiotherapists were complying with the Council’s guidelines, it was found that most of them (73%) did not know about the Maharashtra Act II of 2004, which dictates the proceedings of the Council.

This indicates that there is a need to highlight the importance of the Council and increase awareness about its proceedings to ensure that physiotherapists in Maharashtra are practicing in accordance with the rules and regulations of the Council based on directives from the Council itself and not from information obtained from other sources. Since this is the first study that evaluates knowledge and practice based on the Maharashtra Act II of 2004, no comparisons can be made with other studies.

The number of participants who knew that physiotherapists are considered independent practitioners was very low (17%), with the majority considering themselves as allied healthcare professionals followed by paramedical professionals. This shows a lack of knowledge regarding legislation affecting their own and other related professions. In Maharashtra, the allied and paramedical professionals are governed under the National Commission for Allied and Healthcare Professions Act and the Maharashtra Paramedical Council Act respectively, while the Maharashtra OT and PT Council Act applies to physiotherapists, which indicates that they are considered independent of the other two professions.^{3,18,19}

When asked about their usage of the “Dr.” prefix, 88 out of 100 participants stated that they use the “Dr.” prefix with a (PT) suffix after their name. This illustrates the

appropriate use of the prefix while avoiding confusion and conflict with other professions. In 2016, the then president of the Indian Association of Physiotherapists, professor (Dr.) Umasankar Mohanty (PT), explicitly stated that physiotherapists can use the “Dr.” prefix with a (PT) suffix in his defamation letter to Dr. S. S. Agarwal and Dr. K. K. Aggarwal.²⁰

In terms of knowledge regarding informed consent, nearly all the physiotherapists (98%) knew about the term. This is similar to the findings of the study conducted by Rai et al among interns and residents of a medical college in Vadodara, where nearly 90% of the respondents were aware of informed consent.²¹ There are other studies that also indicate that healthcare professionals have good knowledge of informed consent.^{13,14}

Majority of the respondents (88%) also take the consent from parents or legal guardians of minors before starting their treatment, which is a higher percentage than that found in the study conducted by Baheti et al wherein 76.31 % of participants believed that minors should not be treated without their parents’ consent.¹³

It was observed that 89% of the participating physiotherapists-maintained documentation regarding their clients’ treatment, which is in concordance with the results of the study carried out by Radhika et al published in 2017.²² The study aimed to assess awareness about medicolegal aspects and Consumer Protection Act amongst dentists where it was found that 91.1% of the senior practitioners knew about medical record maintenance.

In the present study, 89 out of 100 participants-maintained documentation, out of which only 14.61% knew of the possible uses of the records maintained. Such practice without knowing its purpose may lead to improper documentation or underutilisation of the records maintained. Thomas, in his 2009 study on medical records and issues in medical negligence, has stated the diverse aspects of medical record keeping, including various guidelines regarding the time period for preserving the records in India.⁹ The study also mentions judicial decisions on medical records in India. Currently, no rules and regulations exist on the subject of record keeping and documentation specific to physiotherapy professionals in India.

The knowledge about medical negligence was high among the respondents, with most of them (86%) knowing that a physiotherapist can be sued for medical negligence. The process for clients’ grievance redressal has been made easier and faster with the advent of the CPA. Physiotherapy services can be considered as ‘service’ as defined under CPA, making the consumer courts the quickest way for clients to seek compensation.

In spite of the large number of physiotherapists who knew about medical negligence, less than a quarter of the participants (18%) knew about the applicable laws. This is in contrast to the findings of the study conducted by Hisham et al in South India (3.2% of the total participants were physiotherapists), where 53% of the respondents correctly answered when asked about the laws applicable in a medical negligence case.⁸

Professional indemnity is an insurance policy that protects medical practitioners against financial losses due to legal damages in case of a legal proceeding resulting from clients’ complaints.¹⁰

The results of an online survey study conducted amongst resident doctors and consultants in Navi Mumbai, India, by Gadhe et al, published in 2023, showed that approximately 90%, 64%, and 22% of consultants with 10 years, 5-10 years, and 5 years of experience had acquired Professional Indemnity respectively.²³

Since physiotherapists may also be subject to legal proceedings, professional indemnity is an essential tool in physiotherapy practice as well.

In the present study, more than half (64%) of the participants knew that professional indemnity insurance can safeguard the physiotherapist against malpractice claims, but only a meagre 15% had an indemnity policy to their name at the time of answering.

The findings show that a higher percentage of physiotherapists know of and possess professional indemnity insurance as compared to the health professionals participating in the study conducted by Shivani et al (3.3% of the total respondents were physiotherapists), where only 15% of participants were aware of professional indemnity insurance and barely 6.7% had indemnity insurance to protect themselves.¹⁴

The results of this study pointed towards a pressing need to upgrade knowledge about the existing legislation and the various applicable laws. Also, there was inadequate knowledge on various aspects of documentation, which needs to be improved. Physiotherapists’ knowledge on professional indemnity insurance was not up to the mark and it is poorly utilised by them. These findings suggest a need to address these deficits to improve the quality of practice and raise the standards of professional physiotherapy practice.

This study has some limitations. Majority of the samples were collected from urban cities of Maharashtra with fewer samples from other regions. The convenience sampling technique was used for practical purposes. Using the stratified sampling technique would give appropriate representation to physiotherapists across all regions of Maharashtra.

Since the questionnaire was circulated online, some of the responses received may be deceptive.

CONCLUSION

Physiotherapists in Maharashtra have basic knowledge of the governing body and of the legal dimensions of their profession, but were found lacking when asked about the same in greater detail. With medical negligence cases on the rise, there is a strong need for them to update their knowledge and bring it up to the mark to conduct an ethical practice within the boundaries of the law. This will enable them to practice proficiently while preventing legal damages and ensuring financial security.

Recommendations

The benefits of knowing about medicolegal issues and practices to protect themselves against any malpractice cases should be broadcasted with a heavy emphasis on the possible downfalls of not doing so.

Subject matters like record keeping, professional indemnity, medical negligence and laws should be taught in greater depth than what is the present practice in undergraduate courses. Electronic record keeping should be encouraged for easy storage and retrieval.

The concerned authorities should propagate their agenda on a larger scale to impart correct knowledge and ensure legally correct practices based on legitimate sources of information. Conducting webinars, podcasts and conferences on such less-attended to, but undeniably important subjects can help in reducing the incidence of malpractice and negligence.

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