

Practice Guideline- Patient-/Client-Centred Care

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Scope of this Guideline

The purpose of this Practice Guideline is to help kinesiologists understand the College's expectations regarding patient/client-centred care. This Practice Guideline is intended to expand on and clarify the College's *Code of Ethics*, the *Essential Competencies of Practice of Kinesiologists in Ontario* and the College's Practice Standards.

Introduction

Kinesiologists provide clinical and non-clinical treatment, care and services for patients/clients of all ages and abilities. Kinesiologists have a duty to put the interests of their patients/clients ahead of their own interests. This is known as a fiduciary duty.

Kinesiologists are also expected to follow the principles of ethical conduct as set out in the College's *Code of Ethics*:

- Respect
- Excellence
- Autonomy and Well-being
- Communication, Collaboration and Advocacy
- Honesty and Integrity

These principles are aligned with the principles of patient/client-centred care. The patient-/client-centered approach can be summarized by the phrase “nothing about me without me”. The ability to apply the principles of patient-/client-centred care is among the *Essential Competencies of Practice for Kinesiologists in Ontario*. This approach helps patients/clients participate and make decisions based on their own goals, needs and values. Patient-/client-centred care involves open and transparent communication between the professional and the patient/client (and, in appropriate cases, their advocates, allies and substitute decision makers). Patient/client-centred care improves patient/client experiences and promotes access to treatment, care and services.

Kinesiologists demonstrate patient-/client-centred care through:

- Respect for patients/clients
- Patient/client involvement and direction in decision-making

- Advocacy with and for patient/client needs
- Recognition of patient's/client's experience and knowledge

To be more specific, a patient-/client-centred kinesiology practice includes:

- Building rapport and trust within professional relationships, while respecting boundaries
- Respecting the individuality of patients/clients and applying strategies that engage the patient/client in a collaborative approach
- Taking into consideration patient/client diversity, including:
 - Developing and implementing culturally sensitive approaches
 - Recognizing the limits of their own knowledge, skills, and abilities related to managing diversity and equity issues, and consulting when necessary
- Assessing the need for, developing and implementing accessible service and delivery strategies, and adhering to relevant legislation and regulations

Patient-/Client-Centred Care and Legislation/Regulations

Legislative requirements protect patients/clients by ensuring that kinesiologists fulfil their legal responsibilities. Some examples of laws in Ontario that may govern or require the application of patient/client-centred principles by kinesiologists are provided in Appendix A: “Legislation and Regulations” at the end of this Practice Guideline. Some additional information about legislation and regulations can also be found in Appendix B: “Glossary and Additional Resources”.

It is important for kinesiologists to understand how legislation may apply in their practice. Kinesiologists are advised to seek their own legal advice regarding which laws may apply and how such laws may be correctly interpreted. The College's Practice Standards and Guidelines are intended to assist kinesiologists to some extent. In cases of any discrepancy between legislation and the College's relevant Practice Standard(s) and/or Practice Guideline(s), the legislation governs.

Kinesiologists should be aware that non-compliance with legislation may result in prosecution and penalties set out in the legislation. Non-compliance with legislation may also involve conduct or behaviour that the College could investigate, which may result in a finding or findings of Professional Misconduct and associated penalties (up to and including suspension or revocation of the kinesiologist's certificate of registration).

Patient-/Client-Centred Care: Standards, Guidelines and Competencies

Kinesiologists are expected to demonstrate their commitment to patient-/client-centred care by practising in a manner consistent with the *Essential Competencies of Practice for Kinesiologists in Ontario* and following the College's Practice Standards and Guidelines. Kinesiologists are required to:

- Follow the College's Practice Standard – Consent.
- Follow the College's Practice Standards and Guidelines regarding Professional Boundaries.
- Only provide treatment, care and services if the kinesiologist has appropriate knowledge, skill and judgement to do so, and make referrals to other professionals where required (see: Practice Guideline – Scope of Practice, Controlled Acts and Delegation for more information).
- Follow the College's Practice Standard and Practice Guideline for Record Keeping.
- Protect patient/client personal information and personal health information from unauthorized or inappropriate collection, use, storage and disclosure.

- Provide treatment, care and services in a manner that is respectful of health system and patient/client resources as described in the College's Practice Standard – Fees and Billing and Practice Standard – Professional Collaboration
- Ensure patient-/client-facing and public-facing materials, policies and practices are appropriate and aligned with the *Code of Ethics* and the College's Practice Standards and Practice Guidelines (for example: Practice Standards and Guidelines regarding Advertising and Fees and Billing)
- Review test, evaluation and assessment results with the patient/client or their substitute decision-makers (SDMs) if necessary.
- Explain any proposed treatment plans, care or services, or changes to an existing treatment plan, care or service in a way that is understood by the patient/client or their SDMs.
- Provide opportunities for patients/clients and/or their SDMs to ask questions and participate in decision-making regarding treatment, care and services.
- Collaborate with patients/clients and, where appropriate, their families and/or SDMs to regularly evaluate treatment and/or program effectiveness and identify and work towards overcoming barriers to participation. This includes being responsive to patient/client feedback and progress.

Patient-/Client-Centred Care: Additional Considerations

Dimensions of Wellness

Dimensions of wellness include physical, intellectual, emotional, social, spiritual, environmental, occupational and lifestyle factors. These dimensions of wellness affect patient/client ability and motivation to seek out and participate in treatment, care and services. Patient-/client-centred care includes understanding how the dimensions of wellness affect health and well-being. A patient-/client-centred approach requires awareness of the dimensions of wellness. For example:

- Working with patients/clients and, where appropriate, their families, SDMs and allies to understand a patient's/client's individual preferences, values and needs based on their individual circumstances and history.
- Making evidence-informed recommendations that are aligned with assessment results and the patient's/client's needs, goals, preferences and abilities.
- Being able to recommend options to accomplish patient/client goals, with the patient/client able to select the approach that best meets their needs, goals, abilities and circumstances.
- Offering flexible options to address and remove barriers. For example, being aware of and suggesting alternatives where cost or access to a gym or facility may be a barrier.
- Providing treatment, care and services in a way that is culturally sensitive and mindful of diversity. This could include, for example, accommodating cultural or religious observances and requirements.

Equity, Diversity and Inclusion (EDI)

Kinesiologists are expected to provide treatment, care and services without discrimination based on the protected grounds in the Ontario Human Rights Code. Understanding EDI, including cultural sensitivity, helps build a safe and patient-/client-centred practice. Kinesiologists should therefore reflect on their knowledge, skill and judgement regarding these important issues. Learning about EDI can involve formal or informal research, study, mentorship or conversations with patients/clients who are members of equity-seeking groups. For convenience, some definitions have been included in Appendix B: "Glossary and Additional Resources" at the end of this Practice Guideline.

Effective communication helps build a good professional rapport based on respect, understanding and trust. Assumptions, misunderstandings or unconscious biases can result in miscommunication. This can lead patients/clients to feel uncomfortable or unsafe with the power imbalance between them and the kinesiologist. Lack of safety can make it difficult for the patient/client to be or feel involved in the treatment, care or service they are receiving. Some examples of patient-/client-centred approaches to communication are:

- Building rapport and showing respect by identifying and addressing patients/clients in a professional manner and according to their preferences. For example: addressing a patient/client using a more formal title or honorific (such as “Ms.” or “Mr.” or other) and/or asking the patient/client how they would like to be addressed.
- Applying a culturally sensitive approach, including building awareness by asking, with respect, empathy and courtesy, patients/clients about their preferences or needs. Informal learning or formal communication training (for example, learning about and practicing cross-cultural communication) can be of significant value.
- Respecting and attempting to accommodate cultural and individual preferences. For example, being mindful of individual or cultural preferences regarding touch or attire.
- Considering the importance of non-verbal patient/client cues and how to respond appropriately.
- Consulting with individuals with relevant cultural experience or expertise to help understand, address or remove barriers to effective participation and collaboration.

Understanding diversity helps raise awareness of and remove barriers to participation. Accessibility can be challenging for some patients/clients. Kinesiologists should advocate for their patients/clients to help remove barriers and achieve desired goals and outcomes in an equitable and just manner. This could include providing or advocating for accessibility for patients/clients with disabilities. Accessibility reviews of the practice are one way to do this. Kinesiologists can also consider other approaches to promote access to care. Some examples are fee reductions based on need, or offering alternative treatment, care and service options such as small-group programs or virtual treatment, care or services.

Virtual Treatment, Care and Services

Kinesiologists may provide treatment, care and services virtually. For some patients/clients, this can help remove barriers to participation. Telephone, email and/or videoconferencing applications are some common examples of virtual treatment, care and services. In all circumstances, kinesiologists should:

- Ensure that virtual treatment, care or services (including assessment) are appropriate, safe and effective based on the needs and preferences of the patient(s)/client(s)
- Have plans in place to manage potential adverse events, including failure of the technology used for virtual treatment, care and services
- Ensure positive identification of the patient/client and/or their substitute decision-maker
- Take steps to protect any personal information or personal health information that may be collected, used, stored and/or disclosed using virtual means
- Seek, receive and document patient/client informed consent to virtual treatment, care and services
- Maintain patient/client records to the same standard as in-person services

- Ensure that invoices and patient records accurately represent the nature of virtual treatment, care and services provided
- Ensure that the kinesiologists' Professional Liability Insurance (PLI) covers virtual treatment, care and services.

Kinesiologists can offer virtual treatment, care and services for patients/clients outside Ontario. When doing so, kinesiologists need to comply with regulations and rules (for example, privacy and confidentiality laws) that apply where the patient/client is located. Kinesiologists should seek specific legal advice or other expertise to ensure compliance. It is also important, and in patient's/client's interests, to find out if PLI coverage applies to virtual treatment, care or services outside of Ontario.

Conclusion

The goal of this Practice Guideline is to help kinesiologists understand patient-/client-centred care. The Practice Guideline includes examples of how kinesiologists can provide patient-/client-centre care. A patient-/client-centred approach builds trust and rapport between the patient/client and the kinesiologist. Patient-/client-centred care also supports patient/client safety, well-being, access to care and engagement. The scope of practice of kinesiology is broad, and there are many ways kinesiologists can build a patient-/client-centred practice. Kinesiologists should therefore pursue continuing professional development to help them use a patient-/centred approach that best fits their practice.

Appendix A: Legislation and Regulations

- *Regulated Health Professions Act, 1991 (RHPA, 1991)*: includes the requirement that regulatory Colleges have a Patient Relations program, which includes measures to prevent and address sexual abuse of patients.
- *Health Care Consent Act, 1996*: includes the requirement that no treatment shall be provided without the informed consent of a patient or their substitute decision-maker (SDM). More information can be found in the College's Practice Standard – Consent and Practice Guideline – Consent.
- *Personal Health Information Protection Act, 2004*: sets out the requirements for collection, use, storage and disclosure of personal health information.
- *Personal Information Protection and Electronic Documents Act ("PIPEDA")*: sets out the requirements for collection, use, storage and disclosure of personal information. May apply to situations where personal information that is not health information may be collected, used, stored or disclosed.
- *Access for Ontarians with Disabilities Act, 2002 (AODA, 2002)*: requires that workplaces in Ontario meet accessibility, customer service and staff training standards regarding accessibility.
- *Human Rights Code, R.S.O. 1990*: forbids discrimination based on specified "protected grounds"
- *Occupational Health and Safety Act, R.S.O. 1990*: sets out the legal framework to protect workers from health and safety hazards on the job.
- *Consumer Protection Act, 2002*: Applies to kinesiologists who may be providing "personal development services". Sets requirements regarding agreements for these services.
- *Excellent Care for All Act, 2010*: requires patient/client engagement and quality assurance processes in certain prescribed health care settings, such as hospitals.
- *Insurance Act, R.S.O. 1990*: establishes the regulatory framework for the insurance industry in Ontario. Includes regulations such as the Statutory Accident Benefits Schedule (SABS) (O.Reg. 34/10) and O.Reg. 90/14 regarding Service Providers – Standards for Business Systems and Practices and Other Prescribed Conditions.
- *Workplace Safety and Insurance Act, 1997*: establishes a legislative framework for the policies for entitlements to benefits and services for injured workers in Ontario.

Appendix B: Glossary and Additional Resources

“Diversity” - The psychological, physical, and social differences that occur among any and all individuals. Source: *HPRO EDI Organizational Self-Assessment and Action Guide (2023)*

“Equity” - The principle of equity is intended to honour and accommodate the specific needs of individuals and groups by acknowledging that economic, social and political fairness cannot be achieved by treating individuals in exactly the same way. Source: *HPRO EDI Organizational Self-Assessment and Action Guide (2023)*

“Equity-seeking” - Actively working, directly or indirectly, consciously or unconsciously, on attaining economic, political, and social fairness. Source: *HPRO EDI Organizational Self-Assessment and Action Guide (2023)*

“Inclusion” An environment in which all people are respected and have access to the same opportunities. Inclusion requires the identification and removal of barriers that inhibit participation and contribution. Source: *HPRO EDI Organizational Self-Assessment and Action Guide (2023)*

“Intersectionality” - Having multiple and diverse identity factors (beyond gender) that intersect, work together, or feed off of each other to shape perspectives, ideologies and experiences. Source: *HPRO EDI Organizational Self-Assessment and Action Guide (2023)*

“Personal development services” - Defined in s. 20(1) of the *Consumer Protection Act, 2002* as:

“(a) services provided for,

- (i) health, fitness, diet or matters of a similar nature,
- (ii) modelling and talent, including photo shoots relating to modelling and talent, or matters of a similar nature,
- (iii) martial arts, sports, dance or similar activities, and
- (iv) other matters as may be prescribed”, and

(b) facilities provided for or instruction on the services referred to in clause (a) and any goods that are incidentally provided in addition to the provision of the services”

“Protected Grounds” - Described in the *Human Rights Code, R.S.O 1990* and, as of 2025, include:

- Age
- Ancestry, colour, race
- Citizenship
- Ethnic origin
- Place of origin
- Creed
- Disability
- Family status
- Marital status (including single status)
- Gender identity, gender expression
- Receipt of public assistance (in housing only)
- Record of offences (in employment only)
- Sex (including pregnancy and breastfeeding)
- Sexual orientation