

# COMPARISON OF COMPETENCY LEVELS AMONG PHYSICAL THERAPISTS PRACTICING IN PUBLIC AND PRIVATE HEALTH CARE CENTERS OF FAISALABAD, PAKISTAN

*Original Research*

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## ABSTRACT

**Background:** Competency among physical therapists is critical to delivering high-quality, patient-centered care. Public and private healthcare centers offer differing environments and resources that may influence therapists' skill development and experience levels. Public centers often provide broader patient exposure, while private centers may emphasize specialized skills. This study aimed to evaluate and compare the competency levels of physical therapists practicing in public and private healthcare settings in Faisalabad, Pakistan, to provide insights that could enhance training and professional development in these environments.

**Objective:** To assess and compare the competency levels of physical therapists working in public versus private healthcare centers in Faisalabad, Pakistan, using the Physical Therapy Profile Questionnaire (PTPQ).

**Methods:** A cross-sectional study was conducted across various healthcare facilities in Faisalabad. After initial screening, 108 physical therapists were selected through purposive sampling. Inclusion criteria focused on active clinical practice with at least one year of experience. The PTPQ was employed to evaluate competencies, examining areas such as clinical experience, education level, and treatment preferences. Data analysis included frequency distribution and associations between affiliation, education level, and experience.

**Results:** Among 108 participants, private healthcare centers accounted for 85 therapists, with 36 holding a Master's degree, compared to 8 in public centers. In terms of experience, 2 public healthcare therapists had over 10 years of experience, while only 1 private healthcare therapist had similar experience. Public centers also had 11 therapists with under 2 years of experience, compared to 47 in private centers. Additionally, 5 public and 21 private therapists had 5–10 years of experience. Public sector therapists demonstrated significantly higher levels of patient exposure.

**Conclusion:** While physical therapists in private healthcare centers demonstrated higher competency in specific skills, those in public centers gained broader clinical experience through diverse patient interactions. This comparison highlights the complementary strengths of each setting, suggesting that combining elements of both could enhance training programs for physical therapists.

**Keywords:** Competency, Cross-sectional studies, Experience, Faisalabad, Health facilities, Physical therapists, Questionnaires.

## INTRODUCTION

Competency in physical therapy integrates multiple facets, including knowledge, skills, values, and attitudes, as well as ethical commitment, professional growth, and collaboration across the healthcare system. The American Physical Therapy Association (APTA) emphasizes that true professional competence is reflected through knowledge generation, application, justification, and outcome anticipation, highlighting the importance of an evolving skill set responsive to the complexities of clinical practice. The World Confederation for Physical Therapy further underscores that physiotherapy demands informed, evidence-based decision-making that combines professional judgment with systematically gathered research, thus reinforcing the notion that physiotherapy is both a science and an art in patient management. Similarly, the Australian Physiotherapy Association (APA) defines a practitioner as one dedicated to delivering safe, high-quality, and patient-centered care, all while promoting health and adapting to evolving clinical scenarios. Such a commitment requires practitioners to maintain up-to-date knowledge and demonstrate resource efficiency, ethical standards, and collaborative competencies involving clients, community, and other healthcare professionals(1, 2).

The importance of maintaining competency throughout a professional's career has gained attention due to evolving practices in healthcare. Historically, competency was evaluated primarily at the point of licensure, but this has proven insufficient in light of continuous advancements and complexities in the field. Consequently, bodies such as APTA and the Federation of State Boards of Physical Therapy (FSBT) in the U.S. are working to establish methods for the ongoing assessment of physical therapists. APTA has included continuous competency maintenance as one of its guiding principles, while FSBT has developed the Continuing Competence Assessment of Physical Therapy Professional Standards (CAPPS) to enhance public safety through regular evaluation. The assessment process often includes continuing education (CE) courses, license renewal exams, and consistent clinical practice, all aimed at upholding high standards of competency and safeguarding patient care(3, 4). In terms of healthcare infrastructure, public health centers often face significant challenges. As organized systems of medical professionals providing inpatient services, these facilities cater to a range of acute and chronic conditions. However, issues such as frequent industrial strikes, strained relationships between healthcare workers, and low staff motivation undermine the effectiveness and patient satisfaction in these centers. Additionally, long wait times and inconvenient hours deter many patients from seeking care at public centers, often leading them to private facilities. In contrast, private health centers typically offer higher quality and more consistent care, supported by a business-oriented approach to management and patient service. Although this approach has clear advantages, it has been criticized for prioritizing profit over pure service provision, raising concerns about the motivations driving private healthcare practices(5, 6).

To assess the competency of physical therapists in both public and private sectors, this study utilizes the Physical Therapy Profile Questionnaire (PTPQ), an instrument initially developed in the Philippines to evaluate practice profiles in the absence of an established standard. The PTPQ was designed through focus group interviews and refined using the Delphi technique and pilot studies to ensure its validity in capturing critical practice components. This questionnaire, which includes sections on clinical practice profiles, treatment preferences, decision-making criteria, and research involvement, offers a robust assessment tool relevant for use in developing nations facing challenges in direct access to physical therapy services(7, 8). A significant gap exists in the literature concerning the systematic comparison of competency levels among physical therapists in public and private healthcare settings, particularly in Pakistan, where healthcare systems face unique operational challenges. Thus, the objective of this study is to fill this gap by evaluating and contrasting the competencies of physical therapists in public and private health care centers in Faisalabad, Pakistan, providing insights that may inform policy development, resource allocation, and educational strategies to enhance physical therapy standards across healthcare settings(9, 10).

## METHODS

A cross-sectional study was conducted on 108 physical therapists recruited from both public and private healthcare facilities, including basic health units (BHUs), district headquarters hospitals (DHQs), teaching hospitals, private hospitals, and polyclinics. Participants were selected based on specific inclusion criteria to ensure an appropriate representation of practicing clinicians with a minimum of one year of clinical experience in a healthcare setting. Eligible participants included male and female physical therapists actively practicing

in either public or private healthcare centers, while individuals engaged exclusively in academic roles or supervised clinical practice without direct patient care were excluded(11, 12). To ensure methodological rigor and appropriate participant selection, a structured screening process was implemented. Each potential participant completed a preliminary eligibility form capturing demographic information, basic clinical experience, and setting. This included questions designed to verify active clinical roles and patient care experience, specifically assessing whether participants were currently responsible for direct patient interventions and the duration of their clinical work. This process was intended solely to confirm that participants met the study's criteria of active practice in clinical settings, thus ensuring a consistent sample reflective of real-world physical therapy practice(13, 14).

The primary assessment tool for competency was the Physical Therapy Profile Questionnaire (PTPQ), a validated tool designed to measure various dimensions of physical therapy competency. Following informed consent, participants were given the PTPQ, comprising five sections: general information, clinical practice profile, treatment preferences, clinical decision-making basis, and educational practice foundations. While the first four sections were completed by all participants, the fifth section (pertaining to educational practice) was completed only by participants who were engaged in both clinical and academic roles, resulting in a response from 60 out of the 108 participants(15, 16). Ethical protocols were rigorously followed to maintain participant privacy and uphold ethical standards. The study received approval from the affiliated university, and a formal data collection approval letter was obtained. Additionally, participants signed an informed consent form, acknowledging that their data would be used solely for research purposes and that all personal information would remain confidential and anonymized. Researchers transparently communicated the study's purpose and procedures, giving participants the opportunity to ask questions and clarify any concerns prior to their participation(17, 18).

## RESULTS

The study's results revealed key demographic and professional characteristics among 108 physical therapists sampled from both public and private healthcare settings. The participants' ages ranged from 23 to 55 years, with a mean age of 27.33 years. Gender distribution showed 35 male and 73 female therapists. Affiliation data indicated that 23 participants were from public healthcare centers, while the majority, 85, were from private healthcare centers. Education levels varied, with 61 participants holding bachelor's degrees, 44 with master's degrees, and only 3 possessing additional diplomas or certifications. None of the participants held a PhD.

**Table 1 Descriptive Statistics of Age, Gender, Affiliation and Education**

Variable	Category	F
Gender	Male	35
	Female	73
Affiliation	Public Health Care Center	23
	Private Health Care Center	85
Education	Bachelors	61
	Masters	44
	PhD	0
	Diploma	3
Age	Mean	27.33
	Minimum	23
	Maximum	55

Regarding the relationship between affiliation and educational background, 12 public healthcare physical therapists had bachelor's degrees, 8 held master's degrees, and 3 had additional diplomas or certifications. In private healthcare settings, 49 physical therapists had bachelor's degrees, 36 had master's degrees, and none had diplomas or additional certifications.

**Table 2 Descriptive Statistics of Association between Affiliation And Education**

		Education			Total
		Bachelors	Masters	Diploma	
Affiliation	Public Health Care Center	12	8	3	23
	Private Health Care Center	49	36	0	85
Total		61	44	3	108

An analysis of experience levels across affiliations revealed that, within public healthcare centers, 11 physical therapists had less than two years of experience, 5 had 2-5 years of experience, another 5 had 5-10 years, and only 2 had more than 10 years of experience. In private healthcare centers, 47 physical therapists had less than two years of experience, 16 had 2-5 years, 21 had 5-10 years, and only 1 had over 10 years of experience.

**Table 3 Descriptive Statistics of Association between Affiliation and Experience**

		Affiliation			Total
		Public Health Care Center	Private Health Care Center	Health Care Center	
How many years have you been in practice?	less than 2 years	11	47		58
	2-5 years	5	16		21
	5-10 years	5	21		26
	greater than 10 years	2	1		3
Total		23	85		108

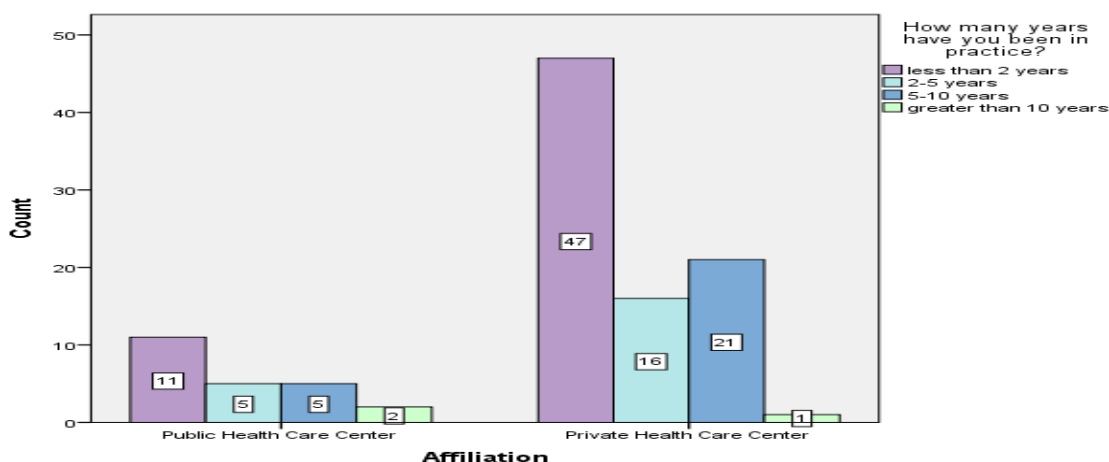
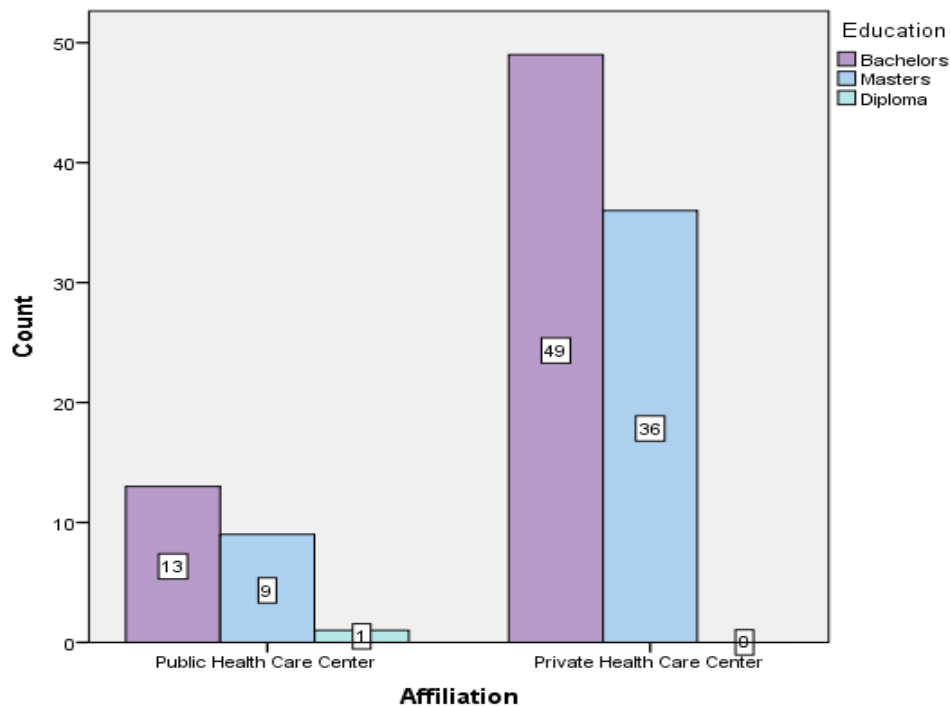


Figure 1 Graphical presentation of association between affiliation and education



These findings were visually represented in charts that depicted the association between affiliation and educational background, as well as affiliation and years of experience, illustrating the concentration of less experienced therapists in private healthcare centers and a higher frequency of bachelor's degree holders across both sectors.

Figure 2 Graphical presentation of association between affiliation and experience

## DISCUSSION

The study's findings contribute valuable insights into the competency levels among physical therapists in public and private healthcare centers. Consistent with the findings of Yakubu (2019), certain competencies appeared higher in private sector practitioners in this study, which aligns with the notion that private-sector healthcare professionals may possess specific advantages in areas requiring strategic skills and efficient management approaches. However, as Yakubu observed, the need for structured guidelines and training in healthcare management and policy remains significant across both sectors(3). Kalhor (2016) also identified that private-sector healthcare managers often display superior competencies due to enhanced strategic planning and self-management, a trend that was similarly reflected in the private-sector therapists of this study, who exhibited more varied and targeted expertise(11).

This study, however, does not support the notion that one sector overwhelmingly outperforms the other in all competencies. Zahid's (2019) work demonstrated minimal differences in leadership competencies across sectors, finding both public and private practitioners to be proficient in foundational competencies like communication and adaptability, which are essential for effective healthcare delivery. This was similarly observed here, as both sectors demonstrated a baseline of core competencies crucial for patient care. However, private-sector therapists may benefit from slightly enhanced skills in strategic leadership, as per Zahid's findings, indicating a nuanced advantage in specific areas rather than a broad competency disparity(7). In contrast, research by Gulati (2019) suggested that self-assessments among private-sector doctors often reveal higher perceived competencies than observed, pointing to potential biases. This discrepancy highlights a potential area for further inquiry within physical therapy, where self-perception of competency may not always align with objective assessment outcomes(5). In addition to competency distinctions, Javed (2019) found that private healthcare facilities could benefit from improvements in management practices to enhance patient satisfaction, despite typically superior strategic resources. Contrarily, public healthcare centers demonstrated a higher competency in delivering patient-centered care, a finding partially corroborated by the observed strengths in public-sector therapists' responsiveness, empathy, and tangibility with patients in this study(4). Pillay (2013) argued that competency disparities between public and private healthcare sectors may be less pronounced than commonly perceived. This study echoes Pillay's assertion, finding no significant differences across core competencies, suggesting that while structural and resource-based differences exist, they may not heavily impact the competencies required for effective patient care(18).

The study faced several limitations that should be considered when interpreting the results. A notable constraint was the limited participation and cooperation due to therapists' busy schedules, which likely impacted the sample size and the representativeness of responses. Additionally, a tertiary care hospital in Faisalabad's public sector declined to permit data collection, resulting in an underrepresentation of public healthcare perspectives. This uneven distribution may have influenced the observed competency patterns, as responses from private centers were disproportionately higher. Despite these limitations, the study's use of the Physical Therapy Profile Questionnaire (PTPQ) provided a structured framework for assessing and comparing competency across settings, lending credibility to the findings despite participant variability(19, 20). Future studies would benefit from a more balanced sample distribution between public and private healthcare settings to ensure robust comparability. Additionally, the PTPQ could be applied across other regions to validate and expand upon these findings, offering a broader understanding of competency dynamics in diverse healthcare environments. Through such methodological enhancements, future research may offer deeper insights into the subtle competency variations among physical therapists in different healthcare sectors, ultimately guiding policies that support competency-based professional development(21).

## CONCLUSION

In conclusion, this study suggests that physical therapists in private healthcare centers demonstrate relatively higher levels of competency in certain specialized skills compared to those in public healthcare settings. However, public healthcare centers offer therapists greater exposure to a diverse range of patient cases, which can enhance practical experience. These findings underscore the distinct advantages of each setting, highlighting the specialized competencies often developed in private centers alongside the broader clinical experience gained in public facilities. This comparison provides valuable insights into competency development across healthcare sectors, which may inform future policies and training approaches in physical therapy.

Author	Contribution
Anbreena Rasool	Conceptualization, Methodology, Formal Analysis, Writing - Original Draft, Validation, Supervision
Zainab Tahir	Methodology, Investigation, Data Curation, Writing - Review & Editing
Inza Mukhtar	Investigation, Data Curation, Formal Analysis, Software
Munazza Fatima	Software, Validation, Writing - Original Draft
Zunaira Riaz	Formal Analysis, Writing - Review & Editing
Fatima Hussain	Writing - Review & Editing, Assistance with Data Curation

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