



Objectives: Disability

1. Explain and contrast the concepts of impairment and disability.
2. Determine whether a specific decline in functioning (e.g. social, physical, emotional) is a disability for that specific patient.
3. Screen elderly patients for disability risks (e.g. falls, cognitive impairment, immobilization, decreased vision) on an ongoing basis.
4. In patients with chronic physical problems (e.g. arthritis, multiple sclerosis) or mental problems (e.g. depression), assess for and diagnose disability when it is present.
5. In a disabled patient, assess all spheres of function (emotional, physical and social).
6. For disabled patients, offer a multi-faceted approach (e.g. orthotics, lifestyle modifications, time off work, community supports) to minimize the impact of the disability and prevent further functional deterioration.
7. In patients at risk for disability (e.g. those who do manual labour, the elderly, those with mental illness), recommend primary prevention strategies (e.g. exercises, braces, counselling, work modification).
8. Do not limit treatment of disabling conditions to a short-term disability leave (e.g. time off work is only a part of the overall plan).

** Mapped to the CFPC's 105 priority topics: #29-Disability