



A Study on Physiotherapists' Perceptions Towards Staff Training and Development and Its Impact on Patient Care Quality in Healthcare Settings

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Received: 11 Aug 2026; Received in revised form: 14 Sep 2026; Accepted: 20 Sep 2026; Available online: 03 Oct 2026

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Abstract— Staff training and development play a vital role in strengthening clinical competency, professional confidence, and the overall quality of healthcare delivery. This study examines physiotherapists' perceptions of staff training and development in healthcare settings, evaluates its perceived impact on patient care quality, and identifies the barriers physiotherapists face in accessing professional development opportunities. A descriptive research design was adopted, and data were collected from 80 practicing physiotherapists working in hospitals, private clinics, rehabilitation centres, and tele-rehabilitation setups through a structured, Google Forms-based questionnaire circulated via WhatsApp, LinkedIn, and physiotherapy professional networks during May 2026. Descriptive statistical methods, including frequencies, percentages, tables, and charts, were used for analysis. The findings reveal an overwhelmingly positive perception of staff training among physiotherapists, with the vast majority agreeing that training enhances clinical knowledge, communication, patient handling, and confidence in clinical decision-making, and that it directly improves patient care quality. Workshops, certification courses, online programmes, and CME sessions emerged as the most common modes of training. However, participation is frequently constrained by lack of time, heavy workload, financial limitations, and limited institutional support. The study concludes that while physiotherapists strongly value continuous professional development, healthcare organisations need to institutionalise regular, practical, and accessible training structures to translate this positive perception into sustained participation and improved patient outcomes.



Keywords— Staff Training, Professional Development, Physiotherapists, Healthcare Quality, Patient Care, Continuing Medical Education

I. INTRODUCTION

The quality of healthcare services is closely tied to the knowledge, clinical competency, and professional efficiency of healthcare workers. As medical science, rehabilitation techniques, and healthcare technologies continue to advance, healthcare professionals are required to regularly update their skills to deliver safe, effective, and evidence-based care. Staff training and development — encompassing workshops, seminars, continuing medical education (CME), certifications, and hands-on

clinical sessions — have therefore become a core organisational function in modern healthcare systems.

Physiotherapists occupy a critical position within this system, contributing to rehabilitation, disability prevention, pain management, and restoration of functional independence across hospitals, private clinics, rehabilitation centres, and increasingly, tele-rehabilitation platforms. The rapid evolution of rehabilitation science, digital health tools, and evidence-based practice standards means physiotherapists must continuously upgrade their

clinical reasoning, patient-handling techniques, and communication skills through structured professional development.

Despite this recognised need, healthcare professionals — physiotherapists included — often encounter practical barriers such as heavy workloads, time constraints, financial limitations, and inconsistent institutional support that restrict their participation in training activities. Understanding how physiotherapists themselves perceive the value of training, and what specifically prevents them from accessing it, is essential for designing development programmes that are both effective and realistic within clinical work environments. This study addresses that gap by directly surveying practising physiotherapists.

1.1 Objectives of the Study :

1. To assess physiotherapists' perceptions on the importance of staff training and development in healthcare settings.
2. To evaluate the perceived impact of staff training on patient care quality delivered by physiotherapists.
3. To identify the challenges faced by physiotherapists in accessing training and development programmes.

1.2 Scope and Purpose of the Study :

The study is confined to practising physiotherapists working across hospital, private clinic, rehabilitation centre, and tele-rehabilitation settings, and examines their perceptions and self-

Reported experiences rather than objective clinical outcome data. Its purpose is to generate evidence-based insight that healthcare organisations can use to design more effective, accessible, and sustained staff development initiatives for physiotherapy professionals.

II. LITERATURE REVIEW

A substantial body of literature supports the link between employee training and both individual and organisational performance.

Aguinis and Kraiger (2009) established that training positively influences work efficiency, professional confidence, and productivity, effects that extend to teams and organisations as a whole. In healthcare specifically, the **World Health Organization (2013)** has argued that strengthening health systems requires continuous competency development so that healthcare workers can meet growing and increasingly complex patient-care demands.

Salas et al. (2012) found that structured training programmes strengthen teamwork, communication, and clinical decision-making — capabilities that are directly relevant to patient safety and care quality.

The **Institute of Medicine (2001)** similarly identified continuous professional learning and improved communication as prerequisites for closing healthcare quality gaps and reducing clinical error.

Within physiotherapy specifically, the **World Confederation for Physical Therapy (2019)** has emphasised lifelong learning as central to maintaining clinical competency and supporting evidence-based rehabilitation practice.

Filipe et al. (2014) noted that ongoing professional development improves not only technical competency but also motivation and adaptability to new healthcare technologies. These effects are particularly relevant given the rapid rise of tele-rehabilitation, digital consultation platforms, and remote patient monitoring — trends that accelerated sharply following the COVID-19 pandemic (**WHO, 2020**) and required physiotherapists to acquire new digital-care competencies quickly.

At the same time, existing research consistently identifies structural barriers to training participation: heavy workload, insufficient staffing, financial constraints, and limited institutional support (**Filipe et al., 2014**).

These barriers appear across healthcare professions generally, but few studies have examined them specifically from the perspective of practising physiotherapists. This gap — physiotherapists' own perceptions of training value, its impact on their patient care, and the obstacles they personally face — forms the basis for the present study.

III. RESEARCH METHODOLOGY

3.1 Research Design

A descriptive research design was adopted, using a questionnaire-based survey method to capture physiotherapists' perceptions in a structured, quantifiable format.

3.2 Population and Sampling

The target population comprised practising physiotherapists working in hospitals, private clinics, rehabilitation centres, and tele-rehabilitation settings. A convenience sampling technique was used. Approximately 400 physiotherapists were approached, of whom 80 responded, forming the final sample for analysis.

3.3 Data Collection Instrument

Data were collected through a structured questionnaire built on Google Forms, comprising two sections. Section A captured demographic details (age, gender, qualification, years of clinical experience, and workplace setting). Section B addressed staff training participation, perceived impact on patient care quality, workplace support, barriers to participation, and satisfaction with existing training opportunities, using a combination of close-ended, multiple-choice, and five-point Likert-scale items (Strongly Agree to Strongly Disagree), along with two open-ended questions for qualitative suggestions.

3.4 Data Collection Procedure

The questionnaire link was circulated through WhatsApp, LinkedIn professional networks, physiotherapy groups, and personal professional contacts. Data collection took place over a four-day period in May 2026. Participation was voluntary, and confidentiality and anonymity were maintained throughout.

3.5 Data Analysis

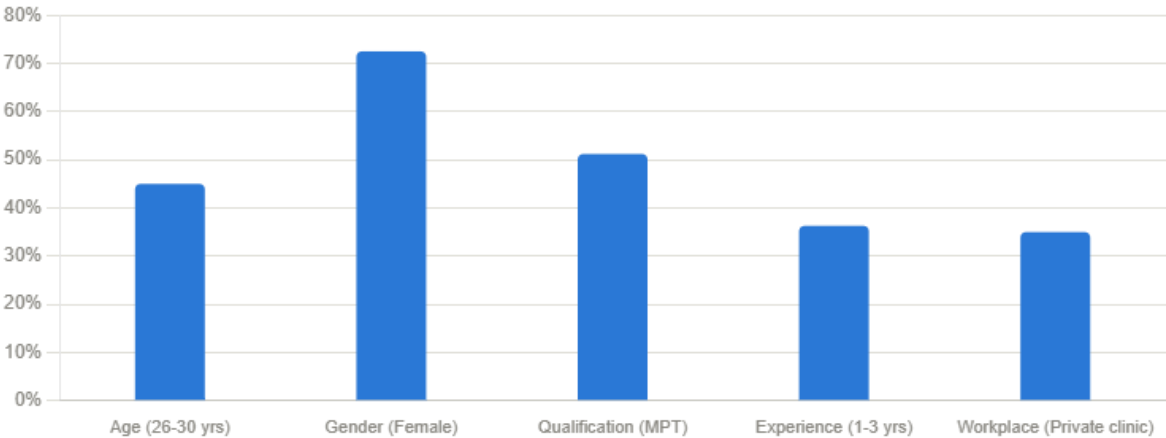
Responses recorded via Google Forms were organised using Google Sheets and Microsoft Excel and analysed using descriptive statistics — frequencies, percentages, tables, pie charts, and bar graphs — to interpret and present the findings.

IV. DATA ANALYSIS AND RESULTS

4.1 Demographic Profile of Respondents

Of the 80 respondents, 45% were aged 26–30 years and 26.3% were aged 21–25 years, indicating that the sample skewed toward early-to-mid-career professionals. Female physiotherapists made up 72.5% of respondents against 27.5% male. In terms of qualification, 51.2% held a Master's in Physiotherapy (MPT) and 41.3% held a Bachelor's (BPT). Regarding clinical experience, 36.3% had 1–3 years, 25% had more than 6 years, 20% had less than 1 year, and 18.8% had 4–6 years. Private clinics (35%) and hospitals (22.5%) were the most common workplace settings, with many respondents reporting affiliations across more than one setting.

Demographic variable	Category	Percentage
Age	26–30 years (largest group)	45.0%
Gender	Female	72.5%
Qualification	MPT	51.2%
Experience	1–3 years (largest group)	36.3%
Workplace	Private clinic (most common)	35.0%



4.2 Perceptions of Staff Training and Development

An overwhelming 98.8% of respondents considered staff training and development important in healthcare settings, reflecting near-universal endorsement of continuous learning among physiotherapists. 66.3% had attended a professional training or development programme within the past year, while 33.8% had not. Workshops (68.8%), certification programmes (60%), online courses (58.8%),

and CME/seminars (57.5%) were the most commonly attended formats. In terms of frequency, 56.3% participated occasionally, 22.5% frequently, and 20% rarely.

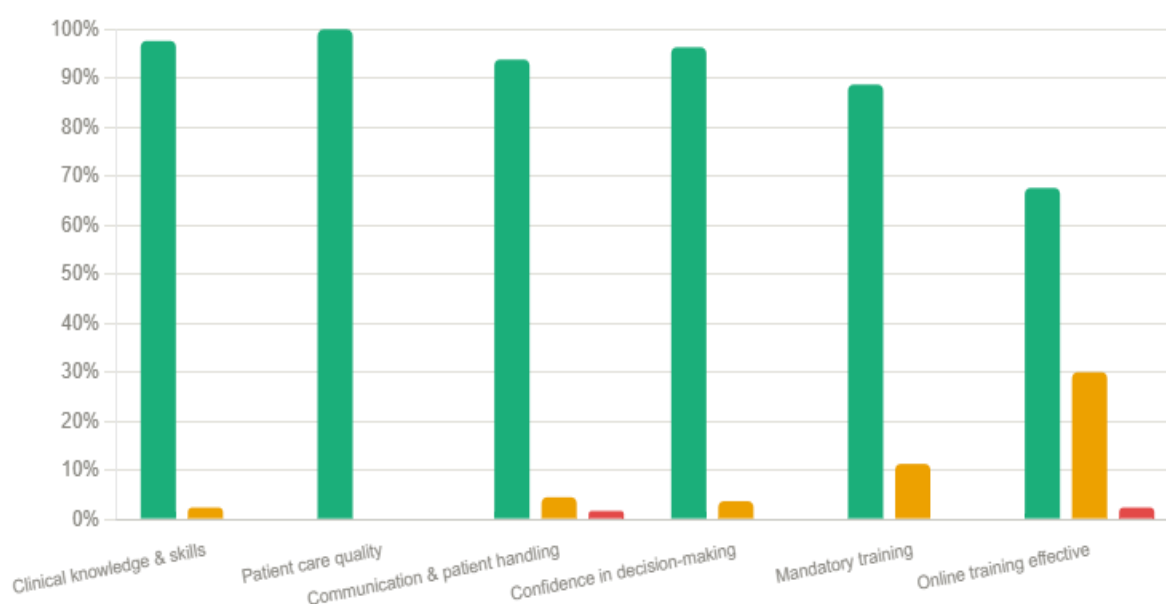
4.3 Perceived Impact on Clinical Competency and Patient Care

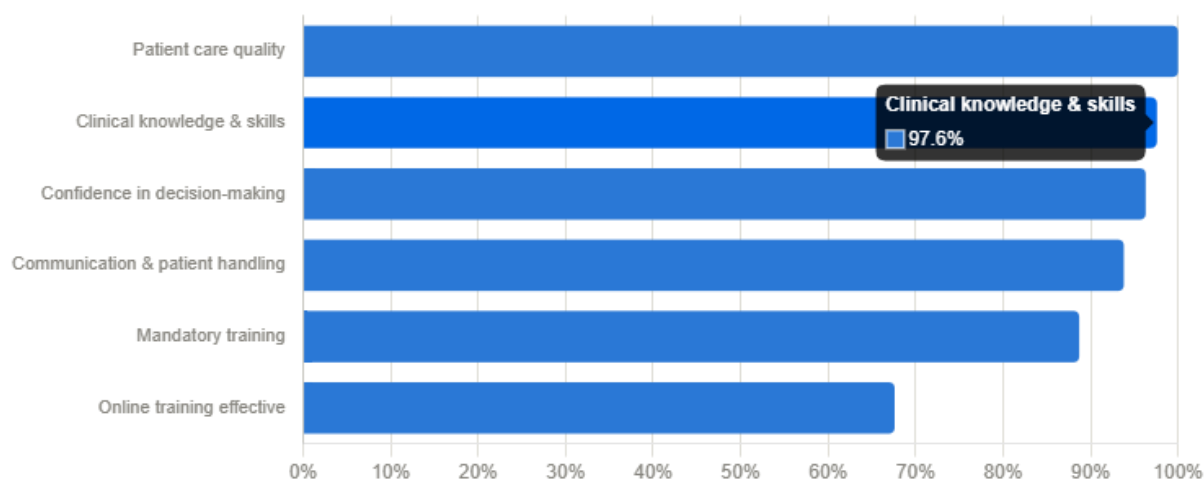
Respondents strongly associated training with tangible clinical benefits. 97.6% (56.3% strongly agree + 41.3%

agree) agreed that training improves clinical knowledge and skills, and 100% (66.3% strongly agree + 33.8% agree) agreed that training improves patient care quality, with no respondent disagreeing on either item. Similarly, 93.8% agreed that training improves communication and patient-handling skills, and 96.3% agreed that training

builds confidence in clinical decision-making. Online training was also viewed favourably, with 67.6% agreeing it is effective for professional skill development, though 30% remained neutral — suggesting comparatively less certainty about digital formats than about training in general.

Statement	Agree / Strongly agree	Neutral	Disagree / Strongly disagree	Statement	Agree / Strongly agree
Training improves clinical knowledge & skills	97.6%	~2.4%	0%	Training improves clinical knowledge & skills	97.6%
Training improves patient care quality	100%	0%	0%	Training improves patient care quality	100%
Training improves communication & patient handling	93.8%	~4-5%	small	Training improves communication & patient handling	93.8%
Training improves confidence in decision-making	96.3%	~3.7%	0%	Training improves confidence in decision-making	96.3%
Regular training should be mandatory	88.7%	11.3%	0%	Regular training should be mandatory	88.7%
Online training is effective	67.6%	30.0%	~2.4%	Online training is effective	67.6%

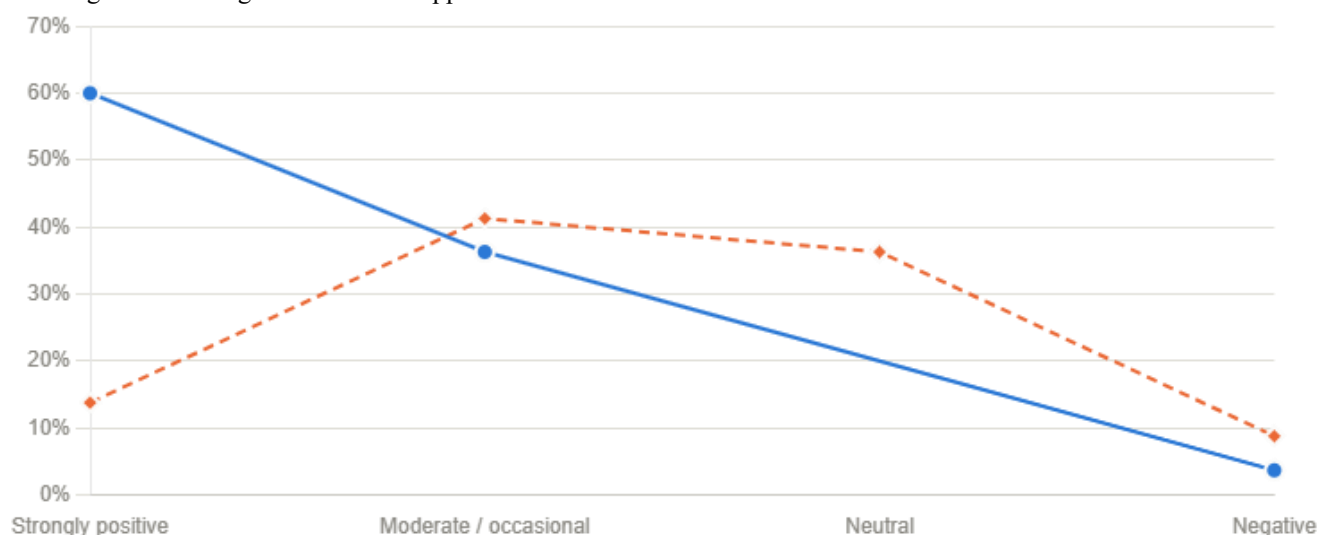




4.4 Workplace Support and Satisfaction

60% of respondents reported that their workplace actively encourages participation in training programmes, and a further 36.3% reported occasional encouragement — indicating that outright lack of support was rare.

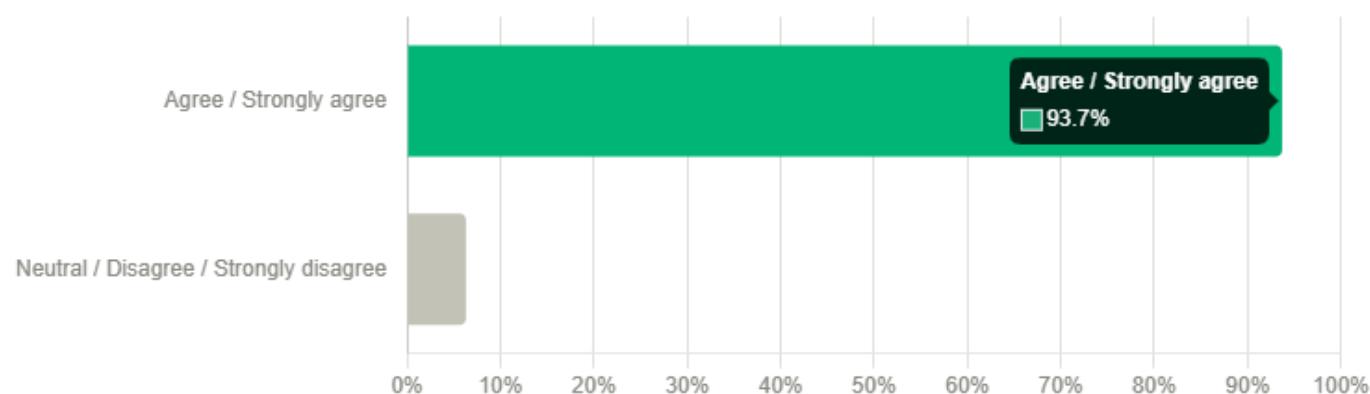
Satisfaction with available training opportunities was more moderate: 55.1% (41.3% agree + 13.8% strongly agree) expressed satisfaction, while 36.3% remained neutral and 8.8% disagreed, pointing to room for improvement in the quality or accessibility of existing programmes.



4.5 Barriers to Participation

Lack of time was the most frequently cited barrier (65%), followed by heavy workload (43.8%), financial constraints (42.5%), and limited training opportunities (35%); lack of institutional support was cited less often (17.5%). This was

corroborated by a separate Likert item, where 93.7% of respondents agreed that lack of time affects their participation in professional development activities — confirming time management as the single most significant obstacle physiotherapist's face.



4.6 Qualitative Insights

Open-ended responses reinforced the quantitative findings. Respondents most frequently called for regular hands-on workshops, evidence-based and practical training sessions, mentorship from experienced clinicians, institutional and financial support, flexible scheduling, and hybrid/online learning options. Communication and soft-skill training, along with interdisciplinary exposure, were also raised as areas for improvement.

V. DISCUSSION

The findings present a clear and internally consistent picture: physiotherapists overwhelmingly value staff training and perceive a strong, direct link between training participation and improved clinical knowledge, communication, decision-making confidence, and — ultimately — patient care quality. This aligns closely with prior literature (Aguinis & Kraiger, 2009; Salas et al., 2012; WCPT, 2019), which similarly links structured professional development to improved competency and care outcomes across healthcare professions.

What distinguishes the present findings is the gap between perception and access. While belief in the value of training is nearly unanimous (98.8%), actual participation in the past year is meaningfully lower (66.3%), and satisfaction with available opportunities is only moderate (55.1%). This gap is explained largely by structural, not attitudinal, barriers — lack of time and heavy workload account for the two most-cited obstacles, consistent with Filipe et al. (2014), who identified similar workload-related constraints across healthcare professions generally. Financial constraints and limited programme availability compound this further, particularly for physiotherapists in private clinics, who may lack the institutional training budgets available in larger hospital systems.

The comparatively lower confidence in online training effectiveness (67.6% agreement, with 30% neutral) is a

notable finding given the post-pandemic shift toward digital and tele-rehabilitation practice (WHO, 2020). This suggests that while online formats improve accessibility, physiotherapists may still perceive hands-on, practical training as more valuable for a profession that is fundamentally manual and patient-contact-based — a distinction healthcare organisations should consider when designing blended training models rather than defaulting to purely digital solutions.

VI. KEY FINDINGS

- 98.8% of physiotherapists consider staff training and development important in healthcare settings.
- 66.3% had attended a professional training/development programme in the past year; participation frequency was mostly occasional (56.3%).
- Workshops, certifications, online courses, and CME/seminars were the most commonly attended training formats.
- 100% of respondents who expressed a view agreed that staff training improves patient care quality (66.3% strongly agree, 33.8% agree).
- Training was also strongly associated with improved communication skills, patient handling, and confidence in clinical decision-making.
- 60% of workplaces actively encourage training participation, but satisfaction with available opportunities is only moderately positive (55.1%).
- Lack of time (65%), heavy workload (43.8%), and financial constraints (42.5%) are the leading barriers to participation.
- 88.7% support making regular training programmes mandatory for physiotherapists.
- Respondents favour hands-on, practical, and evidence-based training over purely digital formats, though online/hybrid learning is valued for accessibility.

VII. RECOMMENDATIONS

- Institutionalise regular, mandatory training cycles (workshops, CME, certifications) rather than relying on ad hoc or optional participation.
- Allocate protected time within clinical schedules specifically for training, to directly address the leading barrier of time constraints.
- Provide financial support or subsidised access to certification courses and conferences, particularly for physiotherapists in smaller private-practice settings.
- Prioritise hands-on, practical, evidence-based workshop formats, using online/hybrid learning as a complement rather than a substitute.
- Introduce structured mentorship programmes pairing early-career physiotherapists with experienced clinicians.
- Incorporate communication and soft-skills training alongside clinical/technical content, given its identified link to patient-handling quality.
- Establish periodic feedback and evaluation mechanisms to monitor training effectiveness and satisfaction over time.

VIII. CONCLUSION

This study confirms that physiotherapists hold a strongly positive perception of staff training and development, and consistently associate it with improved clinical competency, communication, decision-making confidence, and patient care quality. However, this positive attitude is not fully matched by consistent access: time constraints, workload pressure, and financial limitations continue to restrict participation for a meaningful proportion of physiotherapists, even where workplace encouragement exists. Closing this perception-to-access gap requires healthcare

organisations to move beyond passive encouragement toward structured, funded, and time-protected training systems — particularly hands-on and mentorship-based formats that physiotherapists themselves identify as most valuable. Doing so would not only support individual professional growth but, based on physiotherapists' own assessment, translate directly into improved patient care quality and healthcare service standards.

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