

INFORMATION FOR PUBLIC HEALTH UNITS ON HOME AND COMMUNITY CARE PHYSIOTHERAPISTS AND PHYSIOTHERAPIST ASSISTANTS AND COVID-19 VACCINATIONS

The Ontario Physiotherapy Association (OPA) with over 6,000 member physiotherapists, physiotherapist assistants and students is the Ontario Branch of the Canadian Physiotherapy Association.

We understand that Public Health Units have the critical job of coordinating and implementing local vaccination programs including the interpretation of priorities and communicating to multiple sectors of the population including health care professionals. We appreciate the complexity of this work and the demand on resources and we would like to help.

In the Ministry of Health's [guidance](#) for prioritizing health care workers for COVID-19 vaccination, physiotherapy is listed under the non-acute rehabilitation and therapy within the high priority category within Phase 1 of the Ontario government's three-phased vaccine distribution implementation plan. However, some physiotherapists and physiotherapist assistants, based on the nature of their work, setting, patient population served and individual circumstances would be appropriately categorized at a higher priority level.

Physiotherapists and physiotherapist assistants provide direct, in-person patient care that in many cases cannot be delayed or deferred without significant consequence to the patient's recovery or outcomes (e.g., frail elderly, those recently discharged from hospital following surgery, multi-morbidity/chronic conditions). Though in some situations under specific conditions physiotherapy services can be provided virtually, many patients require in-person visits to address their health care needs.

Physiotherapists and physiotherapist assistants who work in the very high-priority settings such as long-term care homes, retirement homes, community health centres, and in home care should be prioritized the same as other health professionals who work in those settings – whether they are direct employees or provide services in these settings in a contract position.

In addition, for those who work in the home and community sector, the published guidance indicates the priority may be higher for some physiotherapists and physiotherapist assistants who;

- Engage in higher exposure risk procedures including aerosol generating procedures (e.g., physiotherapy for cardiorespiratory conditions) and/or being in close proximity to patients, for a

prolonged period time, providing hands-on physiotherapy interventions especially around the upper back, neck and face.

- Work with people who have conditions and comorbidities who are at a higher risk should they contract COVID-19.
- Provide services in patients' homes and spaces where family members and other caregivers are present, increasing the risk of potential exposure and transmission.

Over half of the over 10,000 physiotherapists in Ontario work in home and community care settings and do not have a direct link to a public health care setting such as a hospital or may be self-employed. Because of this, they are relying on information provided by their local public health unit about vaccine availability and when and how to access vaccines. All physiotherapist assistants (PTAs) work with physiotherapists – with no registry of PTAs the best way to communicate with them is through physiotherapists.

The OPA can help. With our extensive network of members, we can target messaging to specific areas of the province. We are ready to assist Public Health Units and other partners involved in the implementation of community-based vaccination programs to communicate with home and community-based physiotherapists and physiotherapist assistants so they receive accurate and timely information to access the vaccine in their areas during phase 1 of the vaccine rollout.

Please contact [Gonxhe Kastrati](#) for more information on how we can help.

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