



All Ontarians, regardless of where they live, or their ability to pay, should have timely access to physiotherapists who can work up to their the full scope of practice for the essential care they need, as close to home as possible.

For the well-being of Ontarians:

1. Increase access to physiotherapy services in your community

No Ontarian, regardless of their financial circumstances, should have to go without the essential healthcare they need, including physiotherapy, to promote well-being, get back on their feet after injury, or live optimally with chronic conditions in their homes or communities.

All Ontarians deserve to have the access to the physiotherapists they need for their well-being.

Support:

- Expanding the investment in primary health care organizations to ensure that all regions and sub-regions across Ontario have access to primary health care with integrated physiotherapy services.
- Increasing the resources and capacity for publicly-funded physiotherapy services in: home care, community clinics, schools, hospital, primary health care and long-term care homes. No one should have to go without the care they need.

The Facts:

97% of patients who were treated by a physiotherapist through primary health care organizations in Toronto said that physiotherapy helped them move more easily and 94% said it helped them better manage their condition and helped them with their daily activities. “It would be great if more people had this service. I am very blown away”.¹

80% of clients who accessed physiotherapy services in Community Health Centres in Toronto indicated that they would not have been able to have physiotherapy otherwise, primarily due to issues of affordability, including lack of private health insurance and difficulty traveling to private clinics.²



Timely access to physiotherapists reduces the number of visits to emergency rooms and the length of hospital stays and allows Ontarians, especially seniors, to live longer with more independence in their homes and communities.^{3,4,5}

Inability to access physiotherapists contributes to increased use of expensive drug therapies, diagnostic testing and use of specialists.^{6,7,8}

Therapies including physiotherapy are recommended as alternatives to pharmaceuticals, such as opioids, to address acute and chronic pain conditions.^{9,10}

In the primary care organizations within the Toronto Central LHIN, patients who were treated by a physiotherapist for pain management reported a reduction of the use of pain medication (82%) and the use of other substances such as alcohol and street drugs (79%).¹¹

The integration of physiotherapy into primary care improves outcomes for seniors in chronic disease management (arthritis, diabetes, etc.), falls prevention and low back pain, to name a few.¹²

Physiotherapy works; clients who accessed community-based physiotherapy after a musculoskeletal injury showed significantly improved health-related quality of life.¹³

2. Remove barriers to access timely care by implementing the full scope of practice for physiotherapists

The most effective and efficient health system is one that puts patients first and facilitates timely access to care by allowing regulated health professionals to work to the full extent of their scope of practice.

We need to finish the job on behalf of patients and all Ontarians: Put in place the regulations needed to enable professionals to work to their full scope of practice, including the authorities for physiotherapists to order x-rays, diagnostic ultrasound and laboratory tests.

Support:

- Increasing timely access to care in our communities. Complete the remaining regulations to implement the authorities for physiotherapists to order diagnostic imaging, including x-rays and ultrasound, and to order laboratory tests.



ONTARIO PHYSIOTHERAPY ASSOCIATION

The Facts:

Bill 179 was passed, with all-party support, in 2009. It expanded the scopes of practice for physiotherapists and other professions to make it easier for Ontarians to get the healthcare they need.

Almost a decade later, Ontarians are still waiting for the promise to be fulfilled by passing the regulations needed to implement the amendments passed by the Legislature.

For physiotherapists, the authorities to order diagnostic imaging and laboratory tests within their practice have yet to be implemented and Ontarians still face barriers to accessing timely diagnosis and care.

Physiotherapists ordering diagnostic testing allows timely access to care, reduces the number of unnecessary, costly and time-consuming circular referrals, promotes diagnosis and treatment within clinically-acceptable norms, reduces visits to emergency rooms, reduces length of hospital stays and allows seniors to continue to live longer in their homes and avoid institutional care.^{14,15,16}

Physiotherapists have extensive training and knowledge of musculoskeletal conditions, assessment, diagnosis and treatment. Physiotherapists with triaging and screening roles in orthopaedics generate cost savings for the system, since they order fewer x-rays and eliminate unnecessary referrals to orthopaedic surgeons.^{17,18,19,20}

Over 750,000 Ontarians still do not have family doctors to order diagnostic tests when needed.²¹



WANT TO KNOW MORE?

The Ontario Physiotherapy Association is the Ontario branch of the Canadian Physiotherapy Association representing more than 5700 member physiotherapists, physiotherapist assistants and students in your communities.

Contact the OPA

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¹ TCLHIN Evaluation (Dec 2017)

² TCLHIN Evaluation (Dec 2017)

³ Submission to the house inquiry into health funding. Presented to the Standing Committee on Health and Ageing, Australian Physiotherapy Association, 2006

⁴ Cott, C.A., Devitt, R., Falter, L., Soever, L., & Wong, R. (2004). Adult rehabilitation and primary health care in Ontario. Arthritis Community Research & Evaluation Unit, University Health Network

⁵ Pinnington, M.A., Miller, J., & Stanley, I. (2004). An evaluation of prompt access to physiotherapy in the management of low back pain in primary care. Family Practice, 21(4):472-480

⁶ Priest, L. (2011). Canada's Costly Spine-Surgeon Backlog. The Globe and Mail, June 15, 2011. Accessed Online at: <http://www.theglobeandmail.com/life/health/new-health/health-news/canadas-costly-spine-surgeon-backlog/article2020599/>.

⁷ Weeks, C. (2011). High Doses of Opioids Tied to Risk of Death. The Globe and Mail, June 15, 2011. Accessed Online at:

<http://www.theglobeandmail.com/life/health/new-health/conditions/addiction/health-addiction/high-doses-of-opioids-tied-to-risk-of-death/article1980624/>.

⁸ Bishop A, et al. 2017. STEMS pilot trial: a pilot cluster randomised controlled trial to investigate the addition of patient direct access to physiotherapy to usual GP-led primary care for adults with musculoskeletal pain. BMJ Open 2017 7;doi: 10.1136/bmjopen-2016-012987.

⁹ Graveland B., 2017. Report urges Canada to seek opioid alternatives to cut down on addiction. Accessed Online at:

<https://www.theglobeandmail.com/news/national/report-urges-canada-to-seek-opioid-alternatives/article36965007/>

¹⁰ <https://physiotherapy.ca/opioids-and-pain-management>

¹¹ TCLHIN Evaluation (Dec 2017)

¹² Ontario Physiotherapy Association (2013). Physiotherapy in Primary Health Care. Accessed Online at:

http://www.opa.on.ca/pdfs/Roles_Physiotherapists_PHC_Organisations.pdf

¹³ Caplan N et al (2017). Association between community-based physiotherapy for musculoskeletal injury and health related quality of life (EQ-5D): a multi-centre retrospective analysis. Health Quality of Life Outcomes.15: 212.

¹⁴ Cott, C.A., Devitt, R., Falter, L., Soever, L., & Wong, R. (2004). Adult rehabilitation and primary health care in Ontario. Arthritis Community Research & Evaluation Unit, University Health Network.

¹⁵ Pinnington, M.A., Miller, J., Stanley, I. (2004). An evaluation of prompt access to physiotherapy in the management of low back pain in primary care. Family Practice, Vol. 21(4):472-480.

¹⁶ Submission to the house inquiry into health funding (2006). Presented to the Standing Committee on Health and Ageing, Australian Physiotherapy Association

¹⁷ Carr AJ. (2003). Orthopaedic outpatient departments: an evaluation of appropriateness, effectiveness, cost effectiveness and patient satisfaction associated with the assessment and management of defined referrals by physiotherapists. London: Department of Health; 2003. P. 3-31

¹⁸ Ontario Physiotherapy Association and the College of Physiotherapists of Ontario. (2008). Strategic Solutions: Optimizing Physiotherapists' Capacity in Ontario's Health Care System. Physiotherapy Scope of Practice Review, Appendix A: pp. 10-13.

¹⁹ Draker-White G, Carr AJ, Harvey I, et al. (1999). A randomised controlled trial. Shifting boundaries of doctors and physiotherapists in orthopaedic outpatient departments. J Epidemiol Community Health. 1999; 53: 643-650

²⁰ Aiken, A.B., Harrison, M. M., * Hope, J. (2008). Easing the burden for joint replacement wait times: The role of expanded practice physiotherapist. Healthcare Quarterly, Vol. 11(3).

²¹ Government of Ontario. (2011). McGuinty Government Ensuring Families Have Access to Quality Health Care. Accessed Online at: <http://www.news.ontario.ca/mohltc/en/2011/05/worlds-doctors-choosing-ontario.html>.