

# PHYSIOTHERAPISTS IN EMERGENCY DEPARTMENTS – FACT SHEET

## **CALL TO ACTION**

Doing more of the same will not solve the challenges faced by today's healthcare system. Now is the time to build on the successes and innovations seen in Ontario and across Canada, where physiotherapists working to their full scope of practice and competencies;

- Increase the capacity of the health care system to meet patient needs;
- Speed patient access to needed care in Emergency Departments (EDs); and,
- Help relieve the increasing pressures on hospitals through community and primary care services.

We call on the Minister of Health and health system leaders to:

- Complete the process that began in 2009 as part of Bill 179 to allow physiotherapists to work up to full scope of practice, including ordering diagnostic imaging and laboratory tests;
- Expand adoption of positions/roles for physiotherapists in EDs across the province; and,
- Expand integration of physiotherapists in primary care and access to community-based physiotherapy programs.

# FACTS

## Our health system is in crisis and increasing demand impacts access to services in Emergency Departments across Ontario and Canada

- Since 2010, EDs in Canada have experienced increasing pressures and overcrowding<sup>i</sup>. Data from The Canadian Institute for Health Information (CIHI) describes an increase of 42% in all visits from 2010 to 2020, with an increase of 97% of visits for those aged 85 and over.<sup>i</sup> During that same time-period, average length of stay increased by over 30%<sup>i</sup>.
- According to Health Quality Ontario (HQO), growth in visits to the emergency department is outpacing population growth in Ontario<sup>ii</sup>. From 2009 to 2014, the number of annual visits to emergency departments increased by 13%, more than double the 6% increase in the province's population during the same time-period.<sup>ii</sup>
- As Ontario's population ages, ED visits by older patients, who tend to require more complex care, will increase. As HQO reported, from 2009 to 2016, visits to the ED by people aged 65 and older rose by 29%.<sup>ii</sup>



• Patients who present to EDs in Ontario are becoming collectively sicker. As reported by HQO from 2009 to 2016, the number of patients visiting ED with high-acuity status increased by 44%, while the number of patients visiting ED who were admitted to hospital rose by 18%.<sup>ii</sup>

#### Staffing shortages are compounding these challenges to the point of crisis

- Recently, several Ontario EDs located in both urban and rural areas reported facing extreme challenges due to high patient volumes and shortage of staffing. In Toronto, University Health Network reported facing a tight situation for staffing, due mainly to high patient volumes and staff illness.<sup>iii,iv</sup> Other emergency hospital closures or shortages in Ontario in recent months include the Peel Memorial urgent care centre in Brampton, hospitals in Clinton and Perth, Norfolk General Hospital in Simcoe and South Bruce Grey Health Centre site in Chesley.<sup>v, vi, vii</sup>
- These challenges are also happening across Canada as evidenced by the recent short-term closure of emergency rooms and urgent care centers in local hospitals in Alberta (Airdrie) and in British Columbia (100 Mile House).<sup>viii</sup>

### Physiotherapists offer a solution that will help meet these challenges. Physiotherapists, working to their full scope and competencies, in EDs and other areas, increase capacity in the health care system and speed access to needed care

- Physiotherapists have been successfully introduced to interprofessional ED teams across Canada over the past several years and have emerged as key health care providers for patients presenting with musculoskeletal disorders.<sup>ix,x</sup>
- One of the most common reasons people seek care in EDs is due to musculoskeletal (MSK) disorders or injuries.<sup>x</sup> Due to their expertise in assessment and management of MSK conditions, physiotherapists in the ED can care for patients with soft tissue injuries, minor fractures, mobility and balance problems.<sup>x,xi</sup> Physiotherapists have been successfully integrated into EDs in many countries, including the United Kingdom, Australia, Singapore, Denmark, and the United States.<sup>xi,xii</sup>
- Literature evaluating the role of physiotherapists and physiotherapists in advanced practice roles in EDs has consistently reported high-level evidence to support the positive impact on the system, providers and patients (satisfaction and clinical outcome) level in the ED. These benefits include:<sup>xiii,xi,xiixiv</sup>
  - Reduced patient waiting time;
  - Reduced length of stay;
  - Reduced pain and disability; and,
  - High levels of staff and patient satisfaction.



- From the patient perspective, patients have reported satisfaction with physiotherapists in providing information about their conditions, including plans for post discharge management and follow-up.<sup>xi</sup>
- From the perspective of ED staff, the presence of the physiotherapist role improves the availability of other staff, which has allowed time to focus on other tasks, such as providing care for more critical interventions.<sup>xi,xii</sup> The positive impact of physiotherapy care in the ED has also been demonstrated in terms of efficacy of care, safety of care, and access to care.<sup>xi,xii</sup>
- In a recent comparison between the care provided by physicians and physiotherapists in a Montreal ED, it was found that there were no differences in terms of patient satisfaction with received care with both providers obtaining high satisfaction scores.<sup>x</sup> It was also found that a high level of agreement exists between diagnosis, as well as requests for medical imaging, which indicates that physiotherapists do not order more medical imaging than ED physicians, which is similar to findings in other studies.<sup>x</sup>
- In a 2021 research project in the Centre Hospitalier Universitaire emergency department in Québec, patients representing with musculoskeletal injuries/conditions seen and managed by physiotherapists in emergency rooms were compared to those seen by ED physicians. On follow-up, the physiotherapy group had less pain, higher satisfaction, experienced lower wait times, fewer required pain medication, and the number of orders for diagnostic imaging was significantly lower for the physiotherapy group. These results have contributed to the increased integration of physiotherapists in emergency rooms in the province.<sup>xv</sup>

<sup>&</sup>lt;sup>i</sup> Canadian Institute for Health Information. NACRS emergency department visits and length of stay by province/territory, 2016–17, 2017–18, 2018–19, 2019–20. Ottawa: The Institute; 2020 [cited 2022 Aug 12]. Available from: https://www.cihi.ca/en/nacrsemergency-department-visits-and-lengths-of-stay-2020-2021-andprovisional-2021-2022

<sup>&</sup>lt;sup>ii</sup> Health Quality Ontario. (2016). Under pressure: emergency department performance in Ontario. Toronto: Queen's Printer for Ontario. Available from: http://underpressure.hqontario.ca/

<sup>&</sup>lt;sup>iii</sup> Wilson, K. (2022, July 23). Toronto Western hospital's ER 'covered' for the weekend after risk of shutting down amid staff shortage. *CP24*. https://www.cp24.com/news/toronto-western-hospital-s-er-covered-for-the-weekend-after-risk-of-shutting-down-amid-staff-shortage-1.5999484

<sup>&</sup>lt;sup>iv</sup> Callan, I. (2022, July 23). Toronto hospital facing 'tight' staffing as healthcare pressure intensifies. *Global News*. https://globalnews.ca/news/9010815/univerisy-health-network-staffing-emergency-room-pressure/

<sup>&</sup>lt;sup>v</sup> Casaletto, L. (2022, July 28). Ontario hospital shuts down ICU ahead of long weekend as staffing shortages worsen. *City News Toronto*. https://toronto.citynews.ca/2022/07/28/lakeridge-health-hospital-icu-bowmanville-ontario/



<sup>vi</sup> Hassan, S. (2022, November 22). Rural Ontario communities hit hard by ER closures, hospitals face staff challenges. The Canadian Press. Accessed on November 29, 2022. https://globalnews.ca/news/9244714/rural-ontariocommunities-hit-hard-er-closures/

<sup>vii</sup> The Canadian Press. (22, October 31). Southern Ontario hospital temporarily closes emergency room due to COVID-19. Accessed on November 29, 2022. h ttps://globalnews.ca/news/9238569/norfolk-general-hospital-closesemergency-room-covid/

<sup>viii</sup> Sinoko, K. (2022, July 22). 100 Mile House ER to be closed overnight this weekend: Interior Health said closure is due to limited physician availability. *100 Mile Free Press*. https://www.100milefreepress.net/news/100-mile-house-er-to-be-closed-overnight-this-weekend/)

<sup>ix</sup> Withers, J., Zavitz, C., Nguyen, T., Bagole, J., Kashetsky, N., Graham, E., Brison, R., Law, M., Booth, R., & Miller, J. (2022). Experiences of long weekend as staffing shortages worsen. *City News Toronto*. https://toronto.citynews.ca/2022/07/28/lakeridge-health-hospital-icu-bowmanville-ontario/

<sup>×</sup> Matifat, E., Perreault, K., Roy, J. S., et al. (2019). Concordance between physiotherapists and physicians for care of patients with musculoskeletal disorders presenting to the emergency department. *BMC Emerg Med*; 19(1): 67. https://doi.org/10.1186/s12873-019-0277-7

<sup>xi</sup> Alkhouri, H., Maka, K., Wong, L., & McCarthy, S. (2020). Impact of the primary contact physiotherapy practitioner role on emergency department care for patients with musculoskeletal injuries in New South Wales. *Emergency Medicine Australasia*, 32(2), 202–209. https://doi.org/10.1111/1742-6723.13391

<sup>xii</sup> Hemant, J., Platon, R., Sorensen, U. M., & Praestegaard, J. (2020). The emergency physiotherapy practitioner (EPP) – a descriptive case study of development and implementation in two Danish hospitals. *European Journal of Physiotherapy*, 22(3), 155-162.

<sup>xiii</sup> Taylor, N. F., Norman, E., Roddy, L., Tang, C., Pagram, A., & Hearn, K. (2011). Primary contact physiotherapy in emergency departments can reduce length of stay for patients with peripheral musculoskeletal injuries compared with secondary contact physiotherapy: A prospective nonrandomised controlled trial. *Physiotherapy*, 97(2), 107–114.

<sup>xiv</sup> Matifat, E., Méquignon, M., Cunningham, C., Blake, C., Fennelly, O., Desmeules, F. (2019) Benefits of Musculoskeletal Physical Therapy in Emergency Departments: A Systemic Review, *Physical Therapy* Vol. 97 No. 9, 1150 – 1166.

<sup>xv</sup> Gagnon, Rose, Berthelot, S., Desmeules, F., Laroche, M-C., Tremblay, S., Hébert, L. (2021) Impact d'une offer de services en physiothérapie à l'urgence du CHU de Québec – Université Laval Available from: https://www.aqp.quebec/sommaire-executif-impact-dune-offre-de-service-en-physiotherapie-a-lurgence/ accessed 22 September 2022.