

Briefing Note for Ontario Health Teams: Increasing Attachment with Rehabilitation Professionals in Primary Care Teams

Opportunity:

As Ontario Health Teams consider Ontario's call for proposals to create and expand up to 80 primary care teams, the inclusion of physiotherapists (PTs), occupational therapists (OTs), and kinesiologists, (KINs), working to their full scope of practice within these teams must be considered as an effective way to increase capacity for patient attachment and ease the workload for primary care providers.^{i ii iii iv v vi vii}

Background:

In a primary care setting, patients can directly access PTs, OTs, and KINs, without first seeing a physician or nurse practitioner. Within their scopes of practice, these rehab professionals can address a wide range of conditions including, but not limited to, neuromusculoskeletal injuries and diseases, heart and lung disease, stroke, brain injury, spinal cord injury, cancer related sequelae, incontinence and pelvic dysfunction, chronic pain/conditions and pre- and post-surgical recovery.

Increasing Capacity of Interprofessional Primary Care Teams:

The inclusion of PTs, OTs and KINs, working to full scope within primary care teams, offers many benefits:

- **Increased capacity to manage larger numbers of attached patients.**^{iv v vi} For example, PTs in first contact roles can independently diagnose and manage patients presenting with neuromusculoskeletal concerns (20–30% of primary care visits).^{viii ix} As a result, the Ontario Physiotherapy Association estimates that first contact roles for PTs in primary care teams can increase attachment rates of primary care teams by approximately 250 active patients, or 425 total rostered patients on average. In addition, OTs address both mental and physical health needs, helping to reduce the pressure on other professionals and/or minimize the number of providers involved in an individual's care. Similarly, KINs integrate physical exercise and coaching to address pain and physical conditions, mental health issues such as depression and anxiety, and injury rehabilitation.ⁱⁱⁱ
- **Cost effectiveness and reduced demand on other members of the primary care team.** Team-based care enables patients to access the right provider at the right time more quickly and with fewer barriers. This pathway to rehabilitative care enhances cost-effectiveness as fewer visits are needed to arrive at the right provider, and patients get the care needed to return to function and work more effectively and quickly.
- **Improved patient outcomes.** The inclusion of PTs, OTs, and KINs on Interprofessional Primary Care Teams contributes to decreased wait times to access primary care and rehabilitative care, and increased levels of satisfaction for both patients and physicians.^{i ii iii x xi xii xiii xiv}
- **A more holistic approach to care.** For example, OTs deliver comprehensive care including assessment and interventions across the lifespan of physical, cognitive, and mental health, and interventions focused on supporting individuals to participate in, and perform, their everyday activities safely in their own homes.

Recommendations:

- Physiotherapists, occupational therapists and kinesiologists must be included in all primary care teams as a key strategy to increase attachment to primary care to optimize health outcomes, decrease health system costs, and address disparities in access.
- Existing evidence-based models of rehabilitation in primary care, including direct access, must be adopted in a standardized, yet locally responsive approach, taking a population health lens.

Contact:

We look forward to supporting this essential work and invite all OHTs to contact us at their convenience.

- Rehab Care Alliance: info@rehabcarealliance.ca
- Ontario Physiotherapy Association: physiomail@opa.on.ca
- Ontario Society of Occupational Therapists: osot@osot.on.ca
- Ontario Kinesiology Association: info@oka.on.ca

ⁱ Ontario Physiotherapy Association. (2017). Physiotherapy in Primary Health Care. Accessed: <https://opa.on.ca/wp-content/uploads/Physiotherapists-Primary-Health-Care.pdf>

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ⁱⁱⁱ Ontario Kinesiology Association. (2023). Position statement – Kinesiologists in Primary Care. oka.on.ca/document/5306/OKA%20-%20Kinesiologists%20and%20Primary%20Care%20-%20Oct%202023%20Final.pdf

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^{vi} Moore, J. et al. (2005). Risk Determination for Patients With Direct Access to Physical Therapy in Military Health Care Facilities. Journal of Orthopaedic & Sports Physical Therapy. 35(10): 674-678.

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