



## **RE: Seniors Health Division of Canadian Physiotherapy Association Response to Safe Long-Term Care Act**

**Nugent, K; Sadler, G; Andrews, K; Johnson, H; Liu, G; Santaguida, L; Vani, S.**

### **1. How should governments and stakeholders cooperate to improve the quality and safety of long-term care?**

Physiotherapy is an evidence-based and regulated health care profession in Canada. Physiotherapists regularly engage with academic research to improve the care they provide to patients. Research produced by Canadian physiotherapists is essential to inform policy to care for older adults in long-term care.

Canadian researchers publish in *Physiotherapy Canada* (peer-reviewed journal: <https://www.ncbi.nlm.nih.gov/pmc/journals/988/>) and other international peer-reviewed journals to provide evidence for the changing strategies in physiotherapy practice. Governments and stakeholders should look to published evidence in strategies of physiotherapy care among older adults to inform policy.

Physiotherapists in Canada are part of the primary health care team and hold an essential role in assessing, diagnosing and treating symptoms of illness, injury or disability. Physiotherapists also hold an important role in older adult care within long-term care facilities. Past research has unanimously outlined the importance of physiotherapy and exercise as a strategy for healthy aging (Liu-Ambrose et al. 2022). Physiotherapists also play a critical role in screening older adults for falls, mobility and disability (Liu-Ambrose et al. 2022).

While community-dwelling individuals seek physiotherapy care to restore an injury or illness, physiotherapy among older adults is primarily adaptive in nature (Liu-Ambrose et al. 2022). An adaptive physiotherapy aim engages strategies for compensation for loss or absent capacity and focuses on providing assistive equipment. Many physiotherapists working with older adults in long-term care use an adaptive rehabilitation model to provide care. In pursuing an adaptive rehabilitation model in long-term care, physiotherapists can assist in the enhancement of quality of life for those in the late stages of life but still have functional mobility. Physiotherapy in long-term care has been shown to improve activities of daily living (McArthur et al., under review) which can improve quality of life and support staff by decreasing the amount of care provision required.

Importantly, for residents to excel in physiotherapy interventions and treatments, the funding model of long-term care must transition to incentivize functional mobility and activities of daily living outcomes over other models.

Physiotherapy can also assist in the care for people with advanced illnesses and in palliative care. Physiotherapy can focus on pain management and maintaining mobility to



promote dignity in this critical phase of life (Kumar et al. 2010). Through improvement in end-of-life care via physiotherapists, our government can allow people in palliative care to remain in their homes for longer and spend more time with their loved ones at their final stage of life (Kumar et al. 2010)

As a key member of primary health care teams, physiotherapists are in the unique position to have direct access to patients to make effective improvements in quality of life (Deslauriers et al. 2017). To reduce the burden of health care professionals, personal support workers and family/care partners in long-term care, physiotherapists can be included in the funded primary care team to provide care for older adults and administer physiotherapy interventions without barriers of requiring requisitions from general practitioners (Deslauriers et al. 2017).

Finally, governments and stakeholders should look to improve the design of long-term care facilities to better integrate residents into the broader community. Life-space mobility is described as the immediate area that a person lives within and moves about in their daily life (Seinsche et al. 2023). For many older adults in long-term care, their current life-space mobility is limited to their room on their floor and the dining hall. Increasing life-space mobility has been demonstrated to improve mobility impairments among older adults (Seinsche et al. 2023). Increasing life-space mobility can include choosing a location for long-term care facilities that are integrated into the urban fabric, providing easy access to transportation, parks, cultural institutions and commercial areas. This helps residents remain connected to the community and fosters opportunity for engagement. Additionally, designing pedestrian-friendly infrastructure will ensure residents are able to navigate an area comfortably and independently. The campaign “8 80 Cities” calls to governments and stakeholders to develop our communities that could be inclusive of the abilities for an 8-year-old and 80-year-old to optimize the quality of life for residents of all ages (<https://www.880cities.org>).

#### **Key Messages:**

- Governments and stakeholders should use Canadian physiotherapy research to inform policy in long-term care.
- Physiotherapists’ role in long-term care is essential for the continuation of healthy aging for older adults and promotes adaptive rehabilitation over restorative rehabilitation strategies.
- Embracing community-immersed approach in the design of long-term care spaces can increased the outreach options for long-term care homes and access to community resources.
- Physiotherapists need to be integrated in Federal decision-making models regarding healthy public policy to support older persons in Canada.

## **2. How can governments and stakeholders cooperate to help foster the implementation of the new national long-term care standards?**



The National Long Term Care Standards outline 33 indicators that should be reported and monitored for residents of long-term care. However, the majority of these indicators do not reference a threshold for change or concern. For example, one indicator “Falls in the last 30 days in long-term care” reports the percentage of long-term care residents who had a fall in the last 30 days against the number of total residents in a long-term care facility. However, there is no indication of what threshold would require further therapy or falls interventions among the residents, or how the long-term care facility should improve their proportion of resident falls. Reporting the result of falls without a plan of how to address this outcome will not improve the quality of life for residents in long-term care.

The indicators do not include outcomes relative to adaptive rehabilitation, negating the role of physiotherapists in long-term care environments. In addition, all of the indicators are from the perspective of reporting signs or symptoms of disability and functioning of the resident. When quantifying and reporting these indicators, the statistics will be over-represented among a group who require 24/7 care in long-term care when compared to community dwelling older adults.

The National Long Term Care Standards should include reporting clinician and staffing statistics to better showcase how care is being provided. There are currently no standards for the number of physiotherapists or physiotherapy assistants working in long-term care facilities among Canadian provinces or territories.

The National Long Term Care Standards do not include any active interventions or standards describing residents’ potential to improve or have to change to prevent decline. Maintained mobility is implied but not explicitly stated as a goal for long-term care staff referred to as Rehabilitation Facilitators, not Physiotherapists. Actively and explicitly including physiotherapists alongside the primary health care team outlined in the National Long Term Care Standards will establish a precedent for physiotherapy to be integrated into the lives of residents at long-term care.

**Key Messages:**

- Indicators referenced in the National Long Term Care Standards should include resident- and staffing-related indicators (e.g., skin integrity, falls, staffing ratios, minimum sessions of PT for each resident)
- Indicators should include opportunity for adaptive rehabilitation to occur
- Physiotherapists are essential members of older adults’ long-term care needs, and therefore should be an integral role among clinicians stated in the National Long Term Care Standards
- The National Senior’s Council must also integrate a physiotherapy professional on their membership composition to further assist and support the implementation of these standards.

**3. How can governments and stakeholders cooperate to address the health human resources challenges in long-term care, including staff retention and recruitment?**



As noted in the National Long Term Care Standards, there are no standards for the number of physiotherapists, physiotherapy assistants or number of physiotherapy sessions for residents recommended in long-term care. To address the required number of physiotherapists staffing in long-term care to provide effective and safe physiotherapy interventions and treatment, more physiotherapists need to be recruited into the field of older adult care. Student physiotherapists are highly influenced in determining their career choices during their clinical placements (one placement in year 1, and three placements in year 2) (Hall et al. 2021). Governments and stakeholders should cooperate with Masters of Physiotherapy programs, of which there are 15 across Canada, in respective post-secondary institutions to coordinate placements within long-term care for physiotherapy students. Governments and stakeholders have the opportunity to provide incentives to increase the number of placements and mentors in long-term care for physiotherapy students.

*“Employers who want to recruit physiotherapy graduates may consider partnering with physiotherapy programmes to offer clinical placement experiences and develop mentorship programmes that help build novice physiotherapists’ competence and confidence.”*

– Hall et al. 2021

#### Recommendation to Government:

- As Canada needs more healthcare workers and physiotherapy is facing the same acute crisis in HHR as other healthcare professions. These national shortages are being felt in communities across the country, particularly those that are in rural or remote.
- The physiotherapy profession would welcome the expansion of the Canada Student Financial Assistance program to help more physicians and nurses in underserved and remote communities.
- Physiotherapy graduates should be the natural choice for the program expansion in 2024 as this would help to recruit and retain health care workers.
- In addition, the government Express Entry Program that extended to physiotherapists is an important example of the interdisciplinary contribution that physiotherapy professionals and their expertise can bring to support the HHR crisis and older persons.
- We would encourage the federal government to ensure that all recruitment, retention and upstream educational solutions be inclusive of physiotherapy expertise due to their multi-dimensional skill-set including workforce planning and ability to care in multiple domains where the shortage is acutely experienced.
- We also strongly support the government’s consideration to **further integrate** physiotherapists into team-based models of care can help address the HHR gap as this will remove some of the burdens currently placed on primary care physicians and reducing surgical and specialist referral rates.
- Allowing physiotherapists to practice to their full scope potential has the capacity to improve patient outcomes, reduce pressure on other healthcare providers, and optimize system capacity.



#### **4. How can we enhance public reporting on long-term care to strengthen transparency and accountability in the sector?**

The current reporting of long-term care is based on population health measures. This includes mortality, disease or illnesses and falls. To meaningfully shift the quality of long-term care provided to residents in Canada and improve reporting within this field, all parts of a Quintuple Aim (Nundy et al. 2022) must be measured and reported. This includes:

- Improving patient experience of care
  - Improving the resident and caregiver experience by providing rehabilitative care that is patient-centred and flexible to individual needs
- Improving the health of populations & advancing health equity
  - Improving the health of the LTC population by enhancing equitable access to rehabilitative care that is integrated with other services and support
- Reducing the per capita cost of long-term care
  - Services are delivered in a way that reflects value - better outcomes are achieved for our LTC dollars
- Improving provider experience
  - Improving the work life of the LTC team, including rehabilitative care providers

#### **5. What type of information would you like to see in a Pan-Canadian public report on long-term care?**

The following is information that physiotherapists would find beneficial to see in the Pan-Canadian public report on long-term care:

##### **Domain 1: Improving patient experience of care**

- Time from admission to receipt of physiotherapy care
- Percentage of residents and caregivers that wish to be part of discussions regarding physiotherapy care and treatment
- Percentage of residents and caregivers reporting positive experiences of care delivered from physiotherapists and team
- Residents self-reported quality of life (e.g., WHOQOL Questionnaire) where able

##### **Domain 2: Improving the health of population and advancing health equity**

- Ensure all residents have access to physiotherapy services and equipment within their residences and support accessing those services
- Physiotherapy services offered to all residents regardless of characteristics such as cognitive impairment or old age
- Mitigation of functional decline through physiotherapy treatment to improve or maintain available function



Domain 3: Reduce the per capita cost of long-term care

- Percent avoidance of long-term care among Canadian citizens and families
- Percent of residents that are able to return to the community after long-term care support
- Percent of residents that require a reduction of long-term care needs (e.g., improved independent mobility)
- Meeting the requirements of best practices for rehabilitation following injury and/or illness

Domain 4: Improving the provider experience

- Percent of positive experiences from the perspective of the care provider (i.e., physiotherapists)
- Ratios of physiotherapists and rehabilitative support staff to residents within long-term care facilities

**References:**

Liu-Ambrose T, Li LC. Physiotherapy for Healthy Aging. *Physiother Can.* 2022 Jan 1;74(1):1-3. doi: 10.3138/ptc-2021-0106-gee. Epub 2022 Jan 31. PMID: 35185240; PMCID: PMC8816357.

Kumar SP, Jim A. Physical therapy in palliative care: from symptom control to quality of life: a critical review. *Indian J Palliat Care.* 2010 Sep;16(3):138-46. doi: 10.4103/0973-1075.73670. PMID: 21218003; PMCID: PMC3012236.

Deslauriers S, Toutant ME, Lacasse M, Desmeules F, Perreault K. Integrating Physiotherapists into Publicly Funded Primary Care: A Call to Action. *Physiother Can.* 2017;69(4):275-279. doi: 10.3138/ptc.69.4.GEE. PMID: 30369694; PMCID: PMC5754183.

Seinsche J, de Bruin ED, Carpinella I, Ferrarin M, Moza S, Rizzo F, Salatino C, Giannouli E. Older adults' needs and requirements for a comprehensive exergame-based telerehabilitation system: A focus group study. *Front Public Health.* 2023 Jan 11;10:1076149. doi: 10.3389/fpubh.2022.1076149. PMID: 36711352; PMCID: PMC9875084.

Hall M, Mori B, Norman K, Proctor P, Murphy S, Bredy H. How Do I Choose a Job? Factors Influencing the Career and Employment Decisions of Physiotherapy Graduates in Canada. *Physiother Can.* 2021 Spring;73(2):168-177. doi: 10.3138/ptc-2019-0059. PMID: 34456428; PMCID: PMC8370726.

Nundy S, Cooper LA, Mate KS. The Quintuple Aim for Health Care Improvement: A New Imperative to Advance Health Equity. *JAMA.* 2022;327(6):521–522. doi:10.1001/jama.2021.25181