Issues and Challenges for Discussion at the Strategic Roundtables

This is a summary of the issues and challenges facing physiotherapy that have emerged from the extensive consultations conducted as a part of CPA’s strategic planning process.

Consultations To-Date

Over 1,000 members completed a strategic planning survey that asked for input about the most pressing issues facing Canadian physiotherapy. Of these:

- slightly more than half of the respondents were engaged in private practice
- about a third identified their type of practice as “public setting”, and,
- the remainder were engaged in a variety of practice settings such as faculty members, students or unspecified.
- 70% have been in the profession for at least 10 years.

Input from the survey included write-in comments that provided texture and deeper understanding of the concerns, preoccupations and suggestions of CPA members. (In this context the terms “CPA” and “Components” refer to the combined association and all of its Components including the National Office, the provincial associations, practice divisions, Physiotherapy Assistants and students).

The consultation process also included individual interviews with a cross-section of physiotherapy leaders such as provincial association presidents, division chairs and external informants from the academic sector, government and research groups (e.g. The Conference Board).

The Next Step: Roundtable Discussions

The next step in the process is to convene a series of roundtable discussions of the issues, to consider the questions of:

- What are ways the CPA can best address or influence this issue?
- What relationships and collaborations will be necessary?
- Who needs to be influenced?
- What are best practices in this area or where can they be found?

There will be up to 9 in-person and online roundtables convened across the country to bring knowledgeable and highly informed physiotherapy thought leaders together to consider these questions. Results will be used to inform the Strategic Planning Workshop, to be attended by CPA’s leaders, for the purpose of setting the priorities for the Strategic Plan.

The Roundtable “Ask”

The following pages provide a high-level summary of the issues that will be tackled by the roundtable discussions. The roundtable phase has been designed to move the CPA Strategic Planning process from an examination of what should be the Association’s (and the profession’s) focus to a consideration of how best to move forward.

To be clear about the purpose of the roundtables, participants will not be asked to set the strategic priorities but, rather, to ADVISE on what options and alternatives, new thinking and innovative approaches should be considered in addressing those issues that will comprise the Association’s strategic direction.
THE KEY ISSUES

There is no order of importance to the issues presented here. Any or all of them might be addressed in the form of strategic priorities in the ultimate 2018-2023 CPA Strategic Plan.

Defining physiotherapy’s evolving role and vision

The profession needs a vision of what physiotherapy is and how it is changing and developing. The evolving environment for physiotherapy is complex, dynamic and uncertain. Some aspects of the future can be seen clearly; others are not at all clear.

The profession itself can help shape its future but it will also be subject to forces that are not controllable and to which physiotherapy must adapt. Defining a clear vision and path forward that makes sense for the public, the profession’s stakeholders, partners and physiotherapists will be challenging.

Some of the questions involved in defining the evolving nature of physiotherapy are:

- What is physiotherapy now and where should it be in the future to make physiotherapy services valuable and value-added for patients?
- What are physiotherapy services and who should provide them?
- What aspects of patient care are included or best left for others in interdisciplinary teams or other parts of the rehabilitation system?
- Is physiotherapy hands-on treatment? Consulting? Supervising?
- What role will prevention play in physiotherapy?
- How is all of this changing?
- How can technology best be applied and integrated in physiotherapy services?
- Who are physiotherapy’s collaborators and competitors?
- How do physiotherapists best engage in inter-professional teams and healthcare systems?
- How can physiotherapy align services with population changes or changes in public health care policy and priorities?
- What does increasing specialization mean for the definition of physiotherapy?

These are just some of the many complex questions involved in creating a compelling vision for physiotherapy.
Raising the profile of physiotherapy

There is a perception that some key stakeholders (the public, physicians, health care administrators, insurers, government, etc.) do not have enough awareness and understanding of physiotherapy’s compelling benefits to patients, or, how physiotherapists can contribute as part of a team to meet patient needs.

The desire of respondents to raise physiotherapy’s profile is complicated by the reality that the interests and perspectives of various audiences and stakeholders are different and would need to be addressed separately.

People are insufficiently aware of the strong evidentiary case for physiotherapy and policy makers may be unaware of the strong physiotherapy business case. As a result, they may be inclined to favour and fund less effective therapies.

Many member physiotherapists look with envy at the marketing activities of other professions, through both conventional and social media channels, and wonder why their profession isn’t more active.

Survey participants suggested, among other ideas:
- Emphasizing physiotherapy’s benefits with specific problems like back pain, injury recovery, cancer, mental health and ER triage, to name just a few
- Explaining the benefits of early intervention
- Communicating consistently across the whole CPA
- Developing strongly inclusive messaging directed at the diversity of Canadians’ identity and orientation, etc.
- Highly energetic advocacy of the case for physiotherapy, with the audiences and in the places that matter most
- Building understanding of the strong inter-professional collaboration skills of physiotherapists.

Members look to the Association to be very active and effective in telling the profession’s story and want a very significant increase in the Association’s focus on this point.

Increasing and broadening access to physiotherapy services

This is not a new issue for physiotherapy but there is a sense of going backwards or, at best, barely holding our own. There are so many needs of so many segments of the Canadian population that effective work will clearly require the efforts of all CPA Components to respond effectively to them.

The access to service problem can occur for several reasons. For example:
- There are glaringly underserviced populations (for example, rural and remote communities, First Nations, immigrants, seniors, homecare, the working poor, persons with disabilities and so on), where there just aren’t enough physiotherapists, whether or not the service is funded.
- Even people in the better-served locations may have difficulty accessing funded services or may find their coverage too limited.
Quality

It is one thing to promise value; it is another to deliver it. Informants feel that CPA must be one of the leading partners in the continuous enhancement of healthcare services, working with educators, researchers, government, other healthcare professions and the broader healthcare sector.

Many participants in this process feel that not enough is being done to close the gap between the generation of new knowledge about such factors as efficacy, practice models and applicable technology and the application of knowledge in physiotherapy practice—a process known as knowledge translation.

This gap may be contributing to concerns that physiotherapy may be falling behind.

Scope of practice

An issue closely related to the quality of practice is the regulatory model that defines what physiotherapists are legally permitted to do under their enabling provincial and territorial regulations. While applicable regulation varies by jurisdiction, the key differences lie in the need for a physician referral as a precondition to providing funded services to private clinic patients and the authority to order diagnostic procedures such as x-rays.

Some provincial associations have helped to make impressive regulatory gains; others have yet to do so. But, in particular, the need to obtain a referral from an MD affects both healthcare costs and patient service.

In some cases, physiotherapists who are entitled to order diagnostic procedures are reluctant to assume the responsibility of doing so and this may adversely affect quality.

Members expect their provincial association, supported by the national office, to represent their interests in this important quality-related area and, increasingly, they expect concrete progress. This requires effective advocacy with government, negotiation with insurers, good use of available evidence and strong support from members, since advocacy gains tend to be achieved over time.