

**COVID-19 Quick Canadian Physiotherapist Survey:** Summary of the fifth (July 24-27<sup>th</sup> 2020) pan-Canadian survey of physiotherapists' experiences with COVID-19

On Friday July 24, BC-Primary Health Care Research Network launched the Cycle 5 of the monthly COVID-19 Quick Canadian Physiotherapist Survey. An email invitation to participate was distributed to physiotherapists through provincial professional associations, as well as via Twitter, and personal networks. The survey remained open until July 27 at 11:59pm PST.

**Main results: Many physiotherapists are providing both modified in-person care and virtual care to patients, which has meant adapting new workflows. As well, integrating pandemic related changes into practice has been challenging given many procedures are time consuming and costly for practices. Physiotherapists are managing fatigue, uncertainty and a variety of fluctuating stresses as they continue to provide patient care.**

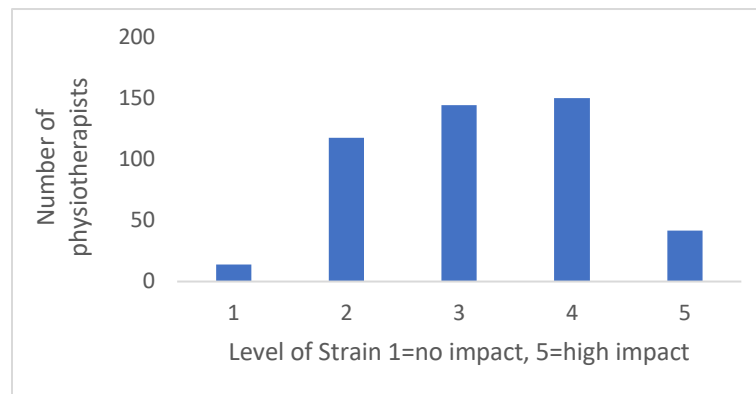
**Virtual care continues to be a prominent component of physiotherapy practice**

- 58% of physiotherapists continue to offer virtual care. Of those providing virtual care, nearly all (93%) are providing both in-person care and virtual care service delivery options to patients.

**Large variability in Physiotherapists' patient volumes and level of stress**

- Physiotherapists are currently treating an average of 43% of their normal patient caseload
- One quarter reported treating 5% or less of their normal patient caseload, whereas one quarter reported treating 80% or more of their normal patient caseload
- Physiotherapists rated the current level of strain on their practice related to COVID-19 as an average of 3.2 on a scale from 1=no impact; 5=high impact

**Physiotherapists (n=470) level of strain**



- 97% of physiotherapists are continuing to experience significant stress, yet one quarter (24%) reported their stress level has begun to ease and that overall, they feel positively about their practice and their health.
- 17% concerned about patients who have been unable to access physiotherapy during pandemic
- 16% concerned about future of own practice
- 11% reported "my ability to bounce back or adjust to adversity has become limited"
- 9% remain troubled by lack of clear communication from regulatory bodies and governments

**Physiotherapists report indirect negative health consequences for patients due to COVID-19**

- 22% state that the health of patients with chronic health conditions has been negatively impacted by delayed or deferred physiotherapy during the pandemic
- 19% have seen patients with new injuries resulting from altered normal activities

**Policy Recommendations**

Physiotherapists are juggling the provision of both in-person and virtual care as the pandemic continues. Some physiotherapists have seen their patient volume return to pre-pandemic levels, which has meant increasing their total work hours to be able to meet patient demand while accommodating new workflow procedures. These changes are time consuming, costly, and contribute to ongoing stress. Other physiotherapists continue to practice with a significantly reduced caseload. Physiotherapists need further support integrating new protocols, procedures, and workflow related to a sustainable model of combined in-person and virtual care from health care leaders and regulators.

**Physiotherapists reported a large variety of pandemic workflow changes that have been adopted.**

- Increased cleaning, sanitization, and laundry required.
- Wearing personal protective equipment (e.g. masks, face shields) for physiotherapists and patients.
- Screening for COVID-19 symptoms: completed online before appointment or in-person.
- Increased time and space needed for in-person patient appointments: some physiotherapists are seeing reduced number of patients, whereas others are extending clinical hours and days to accommodate more patients.
- Changes to administrative personnel and office procedures: some clinics have reduced staff to limit contacts with patients, other clinics have added staff to assist with increased cleaning and administrative tasks
- Reduced number of physiotherapists working in clinic at a time: decreased interaction and communication between colleagues, no staff meetings/in-services
- Reconfiguration of clinic space: separate treatment areas, patients flow through separate entrance and exit doors, no waiting rooms
- Additional administrative tasks for physiotherapists (e.g. coordinating patient bookings)
- Integrating virtual care into hybrid model of practice:
  - Coordinating patients to attend combination of virtual and in-person physiotherapy [e.g. initial assessment in-person and virtual follow-up visits, virtual subjective assessment and in-person objective assessment (if needed)]
  - Developing and implementing online group classes for chronic disease management
  - Promoting value of virtual care model to patients

**Sample:** 499 physiotherapists responded from across Canada. Every province was represented and one territory, with the greatest participation from British Columbia (35%), Ontario (29%), and Quebec (21%). The majority (73%) of physiotherapists reported working in private practice with 36% owning their clinic. Public practice physiotherapists made up 24% of the sample. Over three quarters (80%) of respondents identified as women, one quarter (25%) reported working in a rural setting, 20% worked in a hospital, over half (54%) reported working as part of an interdisciplinary team, and 27% reported that more than half of their patients spoke English or French as a second language.