

THE ROLE OF THE **PHYSIOTHERAPIST** IN PRIMARY CARE

WHAT IS A PHYSIOTHERAPIST?

 A Physiotherapist (PT) assesses patients and plans and carries out individually designed treatment programs to maintain, improve or restore physical functioning and mobility, alleviate pain and prevent physical dysfunction in patients¹

HOW ARE PTS EDUCATED & REGULATED?

- PTs are skilled professionals that must have obtained a degree in Physiotherapy for entry to practice (at UBC, the program moved from a baccalaureate to a Masters in 2004, with the first class graduating in 2006)
- PTs are regulated under the <u>Health Professions Act</u> and their scope of practice and any restricted activities they are authorized to do are outlined in the Physical Therapists Regulation
- In order to practice physiotherapy in BC, all PTs must be registrants of the College of Physical Therapists of BC
- Each individual PT is professionally responsible and accountable to practice autonomously within their defined legislated Scope of Practice and level of competence as part of the interdisciplinary primary care team, to support safe, competent and ethical care for patients, families, and communities

WHAT ARE THE KEY FUNCTIONS OF A PT?

PTs enable patients to live as independently as possible while maintaining a high quality of life through:

Assessment

- PTs use a patient-centred, evidence-based approach to assess:
 - o musculoskeletal related injuries, pain, disease and disorders through movement, strength, endurance, balance, and other physical abilities (e.g. gait analysis, balance assessments)
 - neurological related injuries, pain, disease and disorders (e.g. stroke or Parkinson's disease) by testing motor control, reflexes, sensation, tone, coordination, vestibular, and other neurological functions
 - cardiorespiratory status through endurance testing, graded exercise tolerance, auscultation, monitoring of respiratory rate, breathing pattern, heart rate, oxygen saturation and blood pressure before, during and after functional activities or exercise.
 - the impact of injury, pain, disease and disorders on functional movements, activities of daily living, participation and quality of life

Treatment/Management

- Provide individualized treatment plans that may include one-on-one or group sessions, and/or a home exercise program to address:
 - o coexisting medical conditions, current lifestyle, environmental factors
 - o acute and chronic pain through non-pharmaceutical treatments
 - functional decline

¹ Statistics Canada, National Occupational Classification (NOC) definition, retrieved January 6, 2020 from: https://www23.statcan.gc.ca/imdb/p3VD.pl?Function=getVD&TVD=314243&CVD=314247&CPV=3142&CST=01012016&CLV=4&MLV=4















THE ROLE OF THE **PHYSIOTHERAPIST** IN PRIMARY CARE

Education/Advocacy

- Consult, educate and makes recommendations to patients and their families regarding:
 - self-management education for recovery, pain relief, injury prevention and improved physical movement and mobility
 - o fall prevention (e.g. risk factors, balance exercises, proper footwear)
 - o assistive, adaptive and protective equipment and devices (e.g. walking aids)

Referrals/Collaboration

- Participates in team-based care by collaborating with primary care team and community agencies to build care plans/coordinate referrals
- Seeks feedback from patient's and their families
- Links patients with community resources; consults and advises on health promotion programs

CASE SCENARIO/EXAMPLE

Below is an example of the role that a PT may provide within an interdisciplinary primary care team. It is recognized that team composition will vary due to population needs, team practice models, health human resources available and geography.

During the weekly primary care round, the team identifies a 67 year old widowed male with moderate dementia, moderate depression, hypertension and history of a stroke who reported having fallen at home three times in the last week. The team is concerned about the patient's left-sided weakness and ongoing risk of falls. After a review of the patient's health record the PT arranges to conduct a gait analysis and balance assessment. The PT recommends therapeutic exercises, mobility aids and a foot drop orthotic. The PT also arranges for the patient to try on some hip protectors. The PT recommends to the patient that he join the primary care strength and balance class and the Stroke Recovery Club, which is offered at the local community centre. The PT recognizes the patient's social isolation and obtains consent to refer him to other health care providers, such as a Social Worker and/or Occupational Therapist. Depending on the composition of the primary care team, the referrals may go to other community providers.

The PT adds this patient to the primary care round agenda and works with the scheduling assistant to arrange a follow up appointment to review the patient's interprofessional care plan.