# Navigating the Grey Zone of Physiotherapy Assistant Autonomy in Homecare: Perspectives of

Physiotherapists and Physiotherapy Assistants
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# Background

- Aging population with increasing comorbidities in Canada, but limited funding and shortage of physiotherapists (PTs)
- Shift to community-based services and use of physiotherapy assistants (PTAs) for cost-effectiveness and increased access to care
- 2013: Ontario government incentivized PTAs in homecare<sup>1</sup>

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- College of Physiotherapists of Ontario (CPO) guidelines<sup>2</sup>: PTs responsible for all care provided by PTAs, PTAs cannot assess or change the treatment plan
- Literature from USA shows a lack of clarity on the PTA role, including an uncertainty around what tasks PTAs can perform<sup>3,4</sup>
- Studies from the UK and USA cite trust as a key feature in the PT/PTA working relationship<sup>4,5</sup>
- No Canadian literature on the use of PTAs in homecare
- Challenges identified in literature may be amplified as PTs/PTAs practice in isolation in homecare

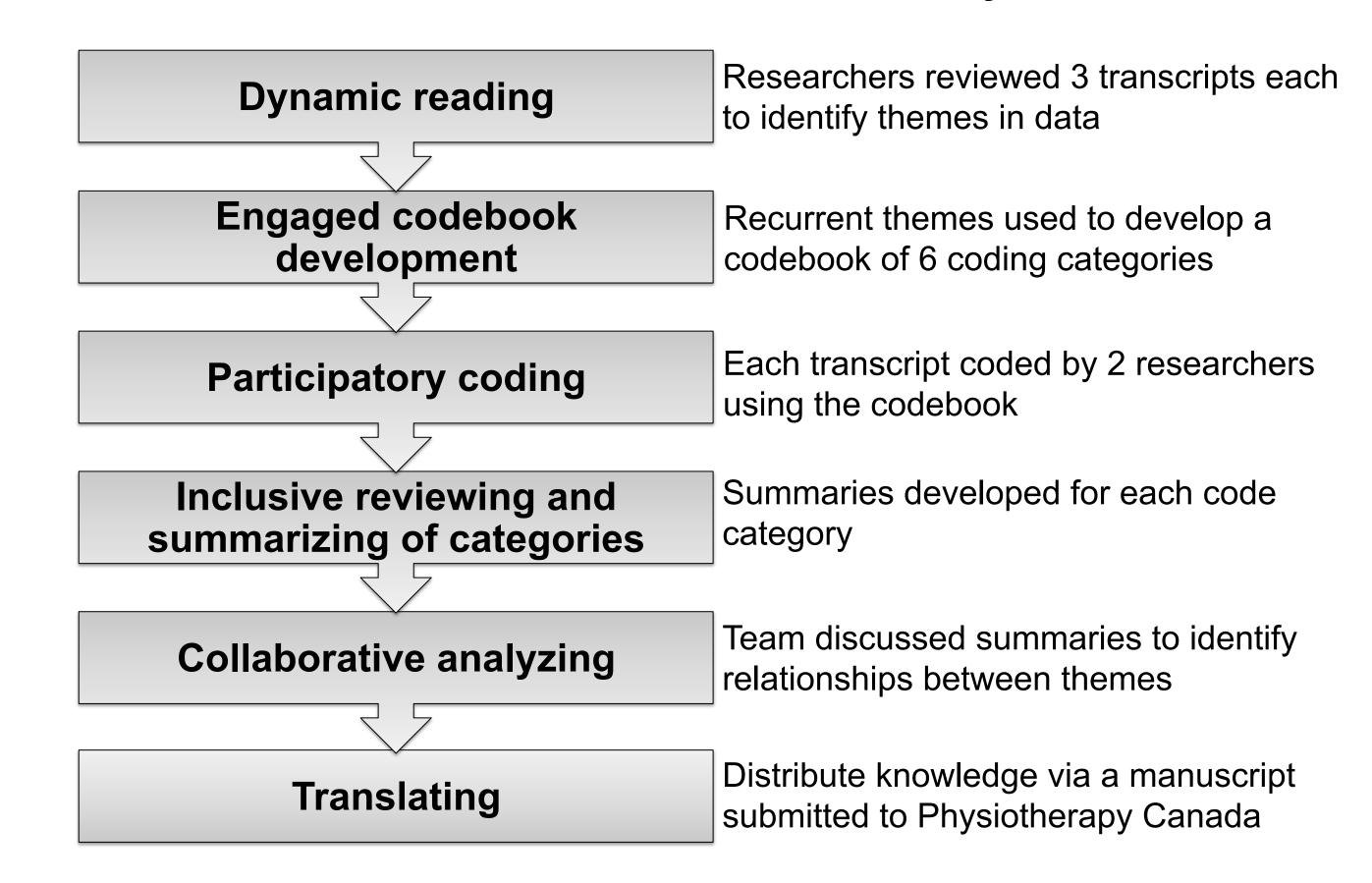
# Research Question

What are the perspectives of PTs and PTAs providing homecare services in Ontario regarding their experiences since the introduction of PTAs into homecare rehabilitation teams?

## Methods

- Qualitative descriptive study design
- Approved by the University of Toronto's Research Ethics Board
- PTs and PTAs working in 3 Ontario Local Integrated Health Networks (LIHNs) recruited via email through the homecare agency
- 10 PTs + 5 PTAs interviewed via phone/Skype by 3 researchers
- Interviews were transcribed and quality checked

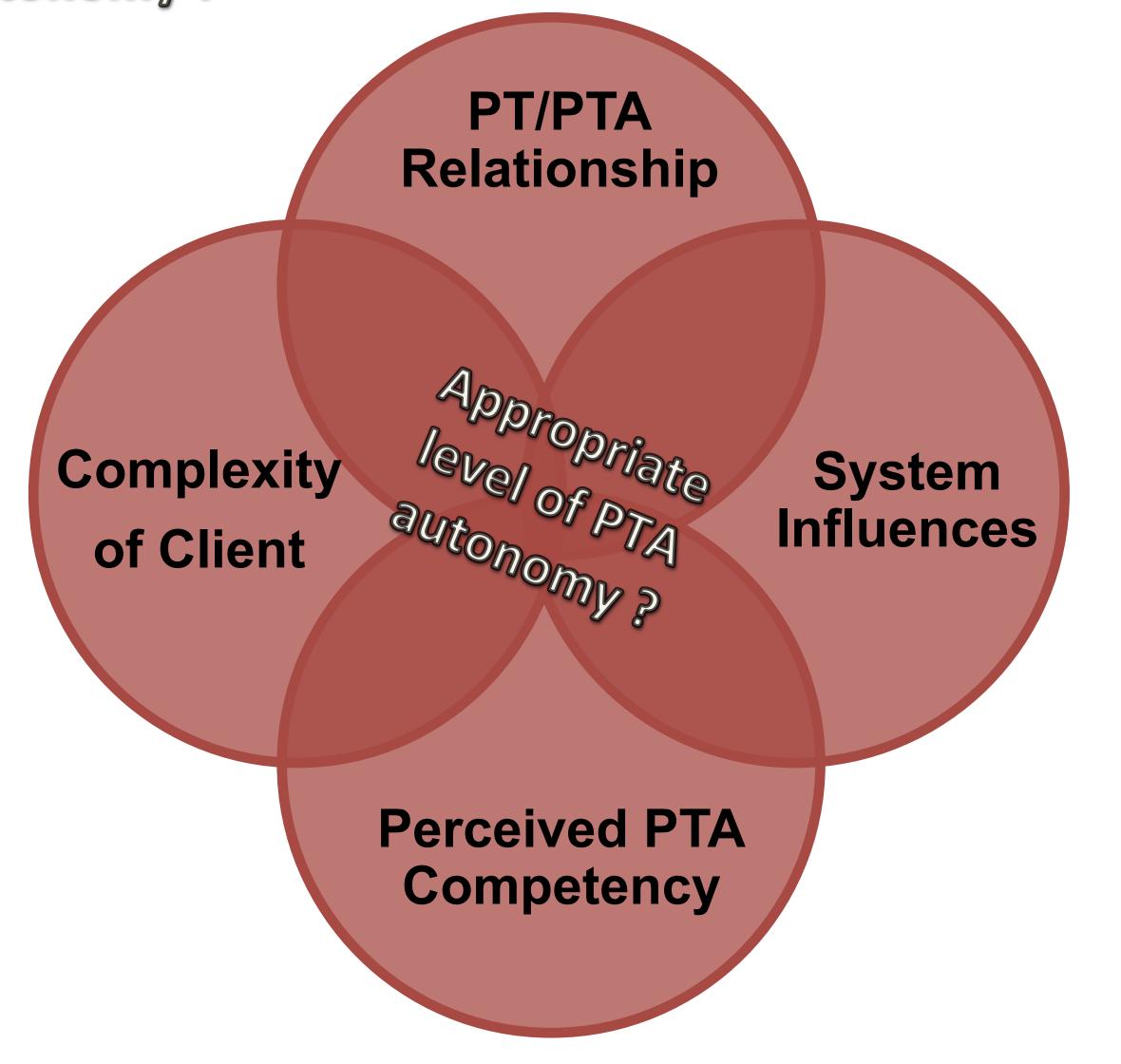
### **DEPICT** model used for data analysis<sup>6</sup>:

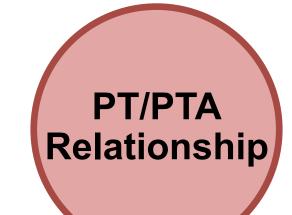


## Results

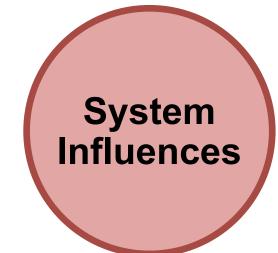
Appropriate level of PTA autonomy?

**Key Finding**: The appropriate amount of PTA autonomy falls on a continuum. At one end, PTAs follow prescribed treatment plan exactly, at the other end, PTAs have the ability to change the treatment plan. Four key factors determine where along this continuum is appropriate in a specific situation.

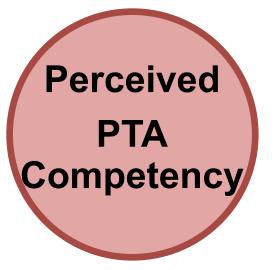




"The fact that they're working under me, I have to have some **trust** with their ability to do their job, that's why it's important to work with someone that you feel you have a **good communication** and has the same kind of **work ethic** that you're expecting."



"On the system level, I think the **LHINs are very unrealistic** with what they're giving us. I think they really have to understand the **College guidelines**. It's hard to keep up with the clients when you're in there three months and you've got basically your two visits after your assessment and your joint visit."



"If I know the PTA, and I know that they know what they're talking about, then I'll just let them progress an exercise by themselves."



"There are multiple comorbidities that these patients have that are complex, and most of the time there is a safety issue in terms of falls risk. I see this as a challenge because a physiotherapist assistant is not as skilled as a physiotherapist.

# Discussion

- PTs/PTAs deeply committed to patient care and achieving optimal outcomes
- 2 documents exist to guide PT clinical responsibilities:
  - CPO guidelines: allow PTAs no autonomy to change treatment plans, no ability to assess
  - Essential Competency Profile for Physiotherapists in Canada<sup>7</sup>:
     PTAs able to problem solve/exercise judgment within limits set by PT
- Our results align with previous findings<sup>8</sup>: PTAs do perform components of assessment, such as simple exercise progression
   Dilomma exists between achieving entimal patient outcomes and
- Dilemma exists between achieving optimal patient outcomes and following CPO guidelines, which are inconsistent with the Essential Competency Profile for Physiotherapists in Canada guidelines
- For PTs in homecare, knowing PTA and trusting them goes beyond determining a basic assessment of competency

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## **Implications for Practice**

#### **Impact of PTAs**

- PTAs benefit clients: increased access to physiotherapy care and play a key role in building patient confidence
- PT's noted their role has shifted to include more managerial tasks

#### Mitigating Supervision and Delegation Challenges

- PTs and PTAs should discuss expectations
  - what, when and how to communicate in home care
  - PTA's autonomy to modify the treatment plan for specific patients
- Homecare agencies should create opportunities for
  - PTs and PTAs to get to know each other
  - PTs to train PTAs to perform specific skills
- LIHNs should allow PTs freedom to decide which cases are appropriate for PTAs
- College of Physiotherapists of Ontario could consider:
  - clarify guidelines re: what is meant by assessment
  - regulating PTAs in Ontario

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