



Physiotherapy in Long-term Care – an essential part of resident-centred care

Submitted by:

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COVID-19 has shone a spotlight on the cracks within the long-term care (LTC) sector. There is a significant push both provincially and nationally from politicians, family members and residents, and clinicians and staff within the LTC sector to address the current challenges in our provincial LTC homes. Residents in LTC are becoming increasingly complex and experience more co-morbidities, frailty, and cognitive decline. LTC is often seen as a place where older adults with complex health conditions go to wait out their time until they die. Subsequently, rehabilitation such as physiotherapy is often not considered important as LTC residents might not “get better”. There needs to be a shift in the approach to LTC that ensures resident centred care that supports a meaningful end of life. Physiotherapy supports this by providing relief from pain and other symptoms, and helping residents live as actively as possible.

Physiotherapists are skilled allied health professionals who are specially trained to meet the multi-faceted needs of those now entering and living in LTC. We have the unique skill set required to work with complex residents with multiple co-morbidities and differing levels of cognitive impairment. We are essential for preventing negative outcomes for LTC residents like bed sores, contractures, muscle wasting, and chronic pain through our involvement in several resident care areas such as:

- 1) performing functional mobility assessments
- 2) designing, delivering, and evaluating falls prevention and exercise programs
- 3) minimizing responsive behaviours and pain through non-pharmacological interventions like exercise and movement
- 4) reducing pressure injuries by ensuring proper positioning and equipment (e.g., pressure relieving surfaces)
- 5) ensuring residents have appropriate equipment for mobility, fall prevention, and injury avoidance
- 6) promoting least restraint use through physical interventions, customized seating, and appropriate care planning.

We also support staff wellness within LTC homes through staff injury prevention. The chronic shortage of traditional nursing affiliated frontline workers has resulted in overstressed staff, high rates of injury and illness, and distress among workers due to the inability to provide adequate care. The skills of physiotherapists and physiotherapy assistants alleviate this urgency for sufficient staff and provide best practice care for residents. For example, consistent and ongoing education on safe resident handling and mobility techniques is



a requisite for avoidance of staff injury. Physiotherapists, with their intimate knowledge of body mechanics, are invaluable to support and empower frontline staff with safe resident handling. A key role for physiotherapy in LTC is to assist residents to regain or maintain their mobility. Besides the obvious health benefits this mobility imparts to the resident, staff also profit from the reduced workload of moving residents with restricted mobility.

Adequate physiotherapy services in LTC are needed to provide invaluable services that improve quality of life for residents and working conditions for staff, but current staffing levels vary widely across the province. Some homes have 1 full time equivalent physiotherapist for 500 beds, while others have 1 full time equivalent for 89 beds. As hands on care providers, we require sufficient staff to safely meet the complex needs of the residents, family, and staff for whom we provide care. Physiotherapists often work closely with physiotherapy assistants to provide hands on care. Indeed, there are many aspects of our interventions that are physically challenging and require more than one person. For example, there are many residents that require 2 or more people to safely assess and mobilize. However, some homes do not have physiotherapy assistants to support these tasks, meaning residents' needs are often not met because of a lack of personnel. Physiotherapists also work collaboratively with occupational therapists to ensure the residents' needs are met. Again, there are several homes that do not have occupational therapists on staff and physiotherapists have to engage in double duty to attempt to meet resident needs. This situation means residents do not receive adequate care from both highly skilled professions.

Specially trained staff to provide care for these complex residents is needed now, but physiotherapy services are often forgotten in the calls for action. We hear the calls for more nurses and continuing care aids, but what about other professions like physiotherapy who support resident-centred care? As physiotherapists, we do not want our expertise and valuable contributions to be overlooked when needed changes to LTC are being considered. We are an essential part of the LTC community, and contribute to providing safe, appropriate, and effective person-centred care that improves resident quality of life. Without adequate physiotherapy services in LTC residents are at increased risk for bed sores, contractures, muscle wasting, and chronic pain. Staff are also at increased risk for injuries as residents have more difficulty transferring which places more demand on already overworked staff. Our group, the Nova Scotia Physiotherapy/Physiotherapy Assistant LTC Special Interest Group, is advocating for a minimum allocation of 1 full time equivalent physiotherapist and occupational therapist and 2 full-time equivalent physiotherapy and occupational therapy assistants per 100 beds to equitably meet the needs of LTC residents across Nova Scotia.

Sincerely,

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