

**Vancouver, Sept 20 2021: Select Standing Committee**

**Presenter: Christine Bradstock, CEO of the Physiotherapy Association of BC (PABC)**

**Presentation Timeslot: 3:30**

**Location: SFU Morris J. Wosk Centre for Dialogue, 580 W Hastings St**

**Call to Action:** Increase funding for physiotherapy training seats at UBC-Okanagan and Victoria.

**Points to Cover:**

### **General**

- Physiotherapists hold unique roles as primary healthcare providers with a wide scope of practice: pain management, pediatrics, post-operation care – especially knee and hip replacement, seniors care including balance and falls prevention, stroke rehabilitation, maternity care, workplace injury, ICBC, WorkSafe BC, and cancer rehabilitation.
- There is a crucial shortage of physiotherapists in BC (The Conference Board of Canada, 2018). Demands for physiotherapy is increasing: in 2014 the number of seniors who accessed physiotherapy services was 566,000. That is expected to jump to 1.5 million by 2035 across Canada (The Conference Board of Canada, 2018). In 2018, 300 new physiotherapists were hired in BC (only 228 in 2020), (see chart of College Registrant numbers) which still leaves vacancies across the province. **We need to train more physiotherapists locally.**
- In alignment with the Mandate letters for the Minister of Health, Minister of Advanced Education, and Minister of Children and Family Development, we address topics of reconciliation, equity, and anti-racism as part of our presentation. **This includes improving access for indigenous communities to culturally safe health care within their communities (Min. of Health), and improving support for Children and Youth with Special Needs (Min. of Children and Family Development).**

### **Seniors**

- The population is aging, demand is increasing, physios are also aging and retiring at a growing rate making recruitment and retention for locally trained physiotherapists essential. In 2014 nearly 16% of Canadians were aged 65 and over. By 2035 that is expected to be nearly 24%. **The number of seniors needing and receiving continuing care is projected to double by 2035 to 2.9 million** (The Conference Board of Canada, 2018).
- The number of Canadians accessing physiotherapy has been rising, increasing from 8.4 per cent of the adult pop. in 2001 to 11.6 per cent in 2014. This represents an increase of 3.8 per cent per year. By way of comparison, Canada's adult population has grown by an annual average of 1 per cent since 2001. **If this trend continues, then approximately 16.7 per cent of Canadians are expected to consult a PT by 2035. This translates into a sizable 6.1 million Canadians, and includes 1.5 million seniors** (The Conference Board of Canada, 2018).
- Falls prevention programs improve quality of life and reduce mortality in seniors. **British Columbia's provincial Health Office reported in 2009 that Indigenous people are twice as likely as non-Indigenous to be hospitalized following a fall. More seriously, falls are the leading cause of death in Indigenous seniors** (Canadian Physiotherapy Association, 2014). Physiotherapists can include falls prevention teaching in exercise and education sessions. **Physiotherapists prescribe exercise programs aimed at regaining or maintaining strength, flexibility, balance and endurance that will help reduce the risk of fall and fall-related injuries.**
- B.C. pays a higher price per senior because of how health care is funded in Canada. The Canada Health Transfer is done on a per capita basis, so it would treat someone who's 45 in their prime working age the same as they would treat someone who's 75 at the peak of their health care consumption. Between 1980 and 2016, British Columbia experienced the largest net inflow of senior migrants of any province. **Seniors who migrated to BC between 1980-2016 will end up costing the province \$7.2 billion, while Quebec will ultimately experience a savings of almost**

**\$6.0 billion. In pop. numbers, BC took in over 40, 000 seniors and, by comparison, Quebec lost over 37, 000 seniors** (Clemons et al, 2017).

### **Indigenous Peoples**

- **The physiotherapy profession’s focus on lifestyle modifications and exercise prescription is consistent with the promotion of health and wellness and demonstrates the contribution physiotherapists may bring to improving health outcomes for Indigenous peoples.** Physiotherapy can contribute positively to existing programs and new opportunities to maintain and improve the health of Indigenous peoples across the life span.
- Jordan’s Principle was first adopted in 2007 by the House of Commons by way of a unanimous decision. Jordan’s Principle was designed to ensure that Indigenous children do not experience delays or denials of service due to jurisdictional disputes in regards to health care coverage. **There is a growing belief that the government’s response to Jordan’s Principle does not reflect the vision that was advanced by the House and this must be addressed.** (Assembly of First Nations, 2015).
- **There is a cultural gap in the quality and delivery of health care offered to Indigenous peoples.** The already limited access to health care for Indigenous peoples is compounded by a lack of cultural appropriateness in its delivery. Physiotherapists who practice in these communities’ report that they recognize the limitations of ‘western medicine’ and look to Indigenous leaders and elders for guidance to achieve a more comprehensive approach to care (Canadian Physiotherapy Association, 2014).
- There is a lack of data on the total amount of Indigenous Physiotherapists that are practicing in BC. The College of Physical Therapists of BC (CPTBC) did not have any data for us to draw upon. PABC conducted a survey in 2021 that drew from our membership base. Of 600 respondents, 5 people self-identified as Indigenous. If we take this percentage (0.83%) and apply it to the registry of 4380 PTs in BC, meaning there are only 36 practicing Indigenous Physiotherapists in BC. If we apply the 2016 Census information of 270,585 Indigenous peoples living in BC, this means that there is only 1 indigenous PT for every 7313 indigenous people. In contrast, there is 1 PT for every 1098 people living in BC per 2016 population numbers. These findings, while perhaps not indicative of the complete picture, highlight the severe deficiency of data we have regarding indigenous PTs and how our workforce does not represent the population.
- Anecdotally it is important to mention **Recommendation 23** of the TRC Calls to Action: *We call upon all levels of government to: Increase the number of Aboriginal professionals working in the health care field. Ensure the retention of Aboriginal health-care providers in Aboriginal communities. Provide cultural competency training for all health-care professionals.* (Truth and Reconciliation Commission: Calls to Action, 2015). Another important piece that should be mentioned is In Plain Sight, a report commissioned by the BC Ministry of Health to address Indigenous Racism found within the BC Health Care System. **Recommendations 18 and 23** address the need to recruit indigenous students, and develop joint medical programs that deal with both western and indigenous medicine (Turpel-Lafonde, M.E, 2020).
- UBC’s Faculty of Medicine (UBC: Faculty of Medicine, 2021) and the Department of Physical Therapy (UBC: Dept. of Physical Therapy, 2021) have both released strategic plans for 2021-2026 that directly address some of these key recommendations from the TRC and In Plain Sight in terms of Indigenous recruitment/enrollment within their programs.

### **Paediatrics**

- There is limited information regarding paediatric physiotherapy in BC. Data requests from CPTBC indicated that there are 204 active physiotherapists that label paediatric physiotherapy as their primary area of practice. There was 226,304 worked hours between the 204 physiotherapists (Date Range: 06/01/2020 – 05/31/2021). There was very little data/literature on how many children access physiotherapy in BC making it hard to quantify specific needs or deficiencies. That makes assessing future needs very difficult.

- Wait times for the diagnosis of certain disorders such as autism spectrum disorder (ASD) can take up to a year. This is compounded by the fact that most paediatric physiotherapists work within the public health care system (Office of the Representative for Children and Youth, 2020). Early intervention is critical to the treatment of children living with ASD, and the shortage of paediatric physiotherapists compounds an already dire outlook for these children who struggle with their fine motor skills.
- We have met with the Ministry of Children and Family Development in the last month to highlight our concerns on this matter. In 2018 we worked on a recruitment and retention strategy for the ministry as well.

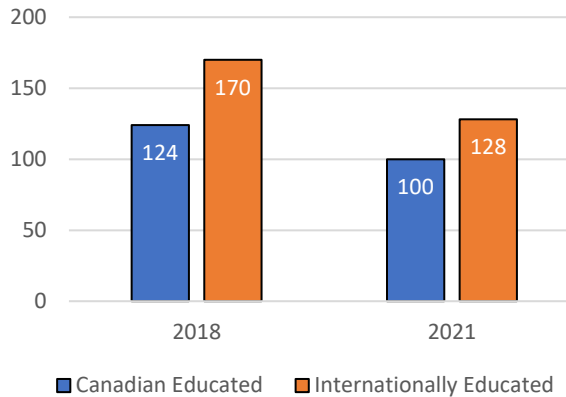
### **Options for Training Seat Distribution**

We, the Association, believe that having a target increase of 200 seats, and a total of 300 seats, would help to address the need, fill the current/short term gaps and assist with the anticipated increase in requirements for physiotherapists we expect from the Health Authorities, MCFD, Seniors Care, Indigenous Care, ICBC and WorkSafe BC; as well as the roll-out of the team-based care model for healthcare in BC.

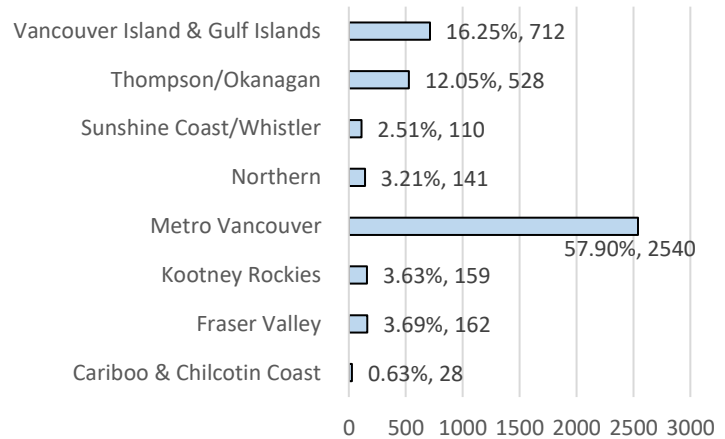
We defer to the Provincial Government, UBC and other post-secondary institutions for the final distribution model and cohorts at distributed sites around the province, but suggest these factors be considered:

- 1) Build upon UBC expertise, experience, and coordinate meeting the objectives of both the UBC Faculty of Medicine and the UBC Dept. of Physical Therapy Strategic Plans for 2021-2026
- 2) Partner with key stakeholders such as First Nations Health Authority, the Ministry of Health, the Ministry of Children and Family Development, and the Ministry of Advanced Education.
- 3) Build upon the successful distribution sites taking place at UNBC and the Fraser Valley
- 4) Add a training program at UBCO and in Victoria
  - a. Focus on Seniors, Indigenous People, Paediatrics as Areas of Practice
- 5) In accordance with Budget Consultation 2022, we would seek to align with the Government's foundational principles of: Lasting and Meaningful Reconciliation, and Equity and Anti-Racism (Government of British Columbia, 2021).

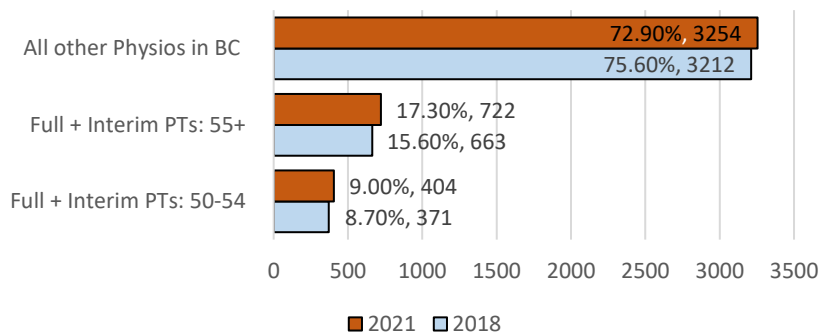
### New Registrants - 2018 vs. 2021



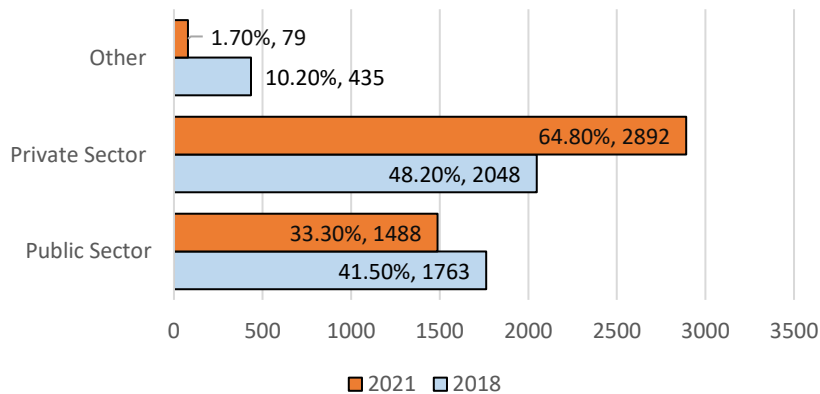
### Distribution of BC Physiotherapists



### Aging Demographics of BC's PTs 2018 vs. 2021



### Registrants by Practice Sector 2018 vs. 2021



The New Registrant Charts compares New Registrants in 2018 vs. 2021. This indicates a decline in the number of registrants. It is important to note that BC registered fewer international registrants which may be due to the COVID19 pandemic. It also indicates a significant decline in intra-provincial migration likely due to COVID19 as during that year only 80 registrants come from UBC.

The Distribution of BC Physiotherapists indicates a heavy focus on the Lower Mainland. The vast majority of PTs work in Metro Vancouver/Vancouver Island, with only 22% of PTs having to service over 90% of the provinces land mass.

BC Physiotherapists are aging. Just over 26% of BC's Physiotherapists are over the age of 50 years old. These increases are in line with the rate at which BC's population is also aging, which in turn emphasises the need for an increase in training seats to counterbalance attrition. PTs will be retiring in large numbers, so this needs to be taken into account.

Lastly, there has been a shift in the primary practice sector of BC Physiotherapists, with more moving to the Private sector. The large difference in the "Other" variable is due to a change in reporting by the CPTBC.

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