2018 Tasmanian Election Issues Summary

Funding primary contact physiotherapists in all emergency departments in Tasmania
The Australian Physiotherapy Association seeks your commitment to funding primary contact physiotherapists in all emergency departments (ED) across Tasmania.

This strategy will have many benefits. Patient flow will improve. Waiting and treatment times will improve. There will be fewer requests for imaging, which can be expensive. All in all, hospitals, patients and taxpayers win.

Physiotherapy in the ED improves patient outcomes and reduces the rate of return visits to the emergency department. Patients also report high satisfaction with physiotherapy services in EDs, secondary to improvements in function. Inclusion of physiotherapy services in ED improves both the efficiency and continuity of care. An improvement in the continuation of care supports a safe return home and return to the community.

An Australian study has shown that patients treated by primary contact physiotherapists waited on average 31 minutes less than those treated by other practitioners and had an average treatment time of 108 minutes compared with 148 minutes. Overall, 93% of patients treated by primary contact physiotherapists were discharged from the ED within a 4-hour time period compared to 75% of patients discharged when treated by other practitioners.¹

Physiotherapy-led specialist orthopaedic screening clinics have also been shown to bring high value to the health system.² ³ ⁴

Expanding services for people with recurrent and persistent pain
The Australian Physiotherapy Association seeks your commitment to expanding services for Tasmanians with recurrent and persistent pain.

Physiotherapy is a cost effective and efficient primary health resource in managing the chronic disease burden within the Tasmanian health system.

In 2007, the estimated total cost of persistent pain to Australia was $34.3 billion, or $10,847 per person living with chronic pain.⁵ The number of PBS prescriptions dispensed for opioid medicines per 100,000 people (age standardised) was 73,641 in Tasmania compared with a national average 55,126. ⁶ Despite the prevalence of persistent pain being about 20% of the Australian population, only 0.2% gain access to specialist services.

Many people suffer in silence, using ineffective drug treatments without the support of other forms of evidence-based treatment. With the recent changes in codeine/opioid access, consumers can feel more at ease knowing that physiotherapy is an accessible, safe and effective treatment for pain management.

Expanding services to address persistent and recurrent pain is a proven, cost-effective solution that will allow Tasmanians living with chronic conditions to get back to their normal work, study and family lives.

There is increasing research on the physiotherapy management of chronic conditions that suggests that ‘light-touch’ models of physiotherapy, such as assertive outreach using phone-based models and ‘booster
sessions’, can improve outcomes for patients, and improve the cost-effectiveness of the delivery of health services. Optimising this model for Tasmanians requires more initiatives to be evaluated and funded.

Legislating to allow prescribing for physiotherapists

The Australian Physiotherapy Association seeks your commitment to amending the relevant legislation to allow physiotherapists to prescribe where the practitioner’s registration is endorsed under section 94 of the Health Practitioner Regulation National Law (as the South Australian law allows) and where the activity occurs within a clinical trial which has Human Research Ethics Committee approval (as the Queensland law allows).

It is our view that the sustainability of the Tasmanian health system will improve when the expertise and roles of health professionals are optimised. Admission to a physiotherapy degree course in Australia requires ATAR scores of between 90 and 98.7 Thus, physiotherapists represent some of our most academically gifted professionals and offer substantial capability in our health system.

We believe that reappraising the role of physiotherapists and, in some cases, the gate-keeping mechanisms that occur before a physiotherapist is seen, can improve patient centred service delivery, smooth the pathways of the patient in the system and reduce ‘transaction costs’. Targets for this reappraisal should include allowing physiotherapists to play a role in optimising the use of medicines.

A recent, yet to be published, systematic review of non-medical prescribing confirms that it can be both clinically effective and cost effective. Another recent systematic review of the barriers and facilitators of successful non-medical prescribing indicates that government action can play an important role in success.8

Approximately 10% of all ED presentations are appropriate to be seen by a Primary Contact Physiotherapist (PCP), and the third most common reason for delays in PCP managing their patients has been reported to be delays in gaining access to prescribing analgesia. There is a clinical trial of prescribing by physiotherapists in this environment.

The Australian Physiotherapy Association (APA) is preparing a proposal to the Physiotherapy Board of Australia to seek endorsement for physiotherapists to prescribe within their scope of practice. Such an endorsement would allow Tasmanian physiotherapists to assist in sustaining the Tasmanian health system.

Legislating to allow physiotherapists to provide work capacity certificates

The Australian Physiotherapy Association seeks your commitment to legislative change that would allow Tasmanian physiotherapists to issue the certificate of capacity for an injured worker. We believe this will result in improved return to work outcomes for injured workers, and efficiencies for the healthcare and compensation systems.

Physiotherapists are highly skilled in the assessment and treatment of musculoskeletal injuries and have a primary role in the rehabilitation and return to work of injured workers. There would be economic and efficiency benefits to both the injured worker and the insurer if the treating physiotherapist is permitted to complete the work capacity certificate in addition to treating the patient with a musculoskeletal condition.

In the private sector, physiotherapists assess, manage and treat patients with a range of musculoskeletal presentations generally without a medical referral. In the public sector, patients managed by physiotherapists in the emergency department may be treated and where appropriate, discharged without
seeing a medical officer. However, a significant limitation to services is the current legislation that restricts these first contact physiotherapists from issuing work capacity certificates.

There is increasing evidence to suggest that improved access to timely, effective rehabilitation, will result in faster return to suitable duties and reduce waiting times in the public sector.

In Victoria, physiotherapists in private practice are already able to authorise the continuing capacity certificates and a recent analysis found that 55 per cent of all certificates issued by physiotherapists\(^9\) recommended a return to alternate or modified duties compared with just 23 per cent of general practitioners.\(^{10}\)

Changes to the Workers Rehabilitation and Compensation Act 1988 would allow physiotherapists to authorise work capacity certificates, benefiting the injured worker, health system and insurance provider.

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7. www.myhealthcareer.com.au