

Our advocacy priorities for the 2023 NSW Election

Strengthening access to physiotherapy in NSW

Physiotherapy provides a path to better health and wellbeing but for too many people living in NSW access is denied or inadequately funded. The current health system leaves too many people isolated and disconnected and without access to the essential care they need and deserve. Long wait times, fragmented services, workforce sustainability and affordability factors impact significantly on equitable access to essential care for a number of high-priority groups.

We need to strategically prioritise access and outcomes beginning with lifting the barriers to access. A key opportunity lies in building capacity from within physiotherapy, lifting barriers and by charting a path to better health equity. Advanced and extended scope of clinical practice by physiotherapists can make a real impact on value and the patient journey including improving patient wait times, ensuring more timely access to evidence informed treatment and mitigating the burden of chronic disease management.

Priority Asks

Investment in physiotherapy will advance health, improve care, and increase value for the people of NSW. New models of care utilising high-value physiotherapy are urgently needed. More focus on integrating physiotherapists into primary care through funding reform and integrating prevention into the management and delivery of care is needed. In addition, there is a need to strengthen care at the primary and acute care interface through physiotherapy in urgent care. Advancing hospital physiotherapy is also central to reform—supporting physiotherapists to work to the top of their scope can help address current inefficiencies in the hospital sector.

Our solutions to improve the patient journey, deliver cost-effective services and enhance patient care:

01 BETTER COMMUNITY CARE

The rising tide of chronic disease and overburdened hospital system cannot be addressed without significant reform to drive prevention and funding to the full scope of physiotherapists in primary care. In addressing complex care needs, including at the acute care interface, new funded care pathways are required in primary and community care to address the barriers to chronic disease management and quality pain care. The APA is calling for funding to ensure patients in NSW have access to the care they need including through stronger investment in publicly funded physiotherapy to increase the coverage of preventive health services in NSW.

02 PHYSIOTHERAPY IN THE HOSPITAL

Chronic underfunding and increased demand has led to declining public hospital performance. Physiotherapists possess a wide range of skills that prevent both hospital presentations and admission, support a patient's journey through the hospital system and facilitate timely discharge. The APA is calling for these skills to be further utilised to alleviate the pressures currently experienced in the NSW hospital system. We are also calling for enhanced and equitable resourcing of paediatric and pelvic floor physiotherapy services available publicly to the people of NSW.

03 RURAL PHYSIOTHERAPY

Targeted investment and realignment of funding priorities is critical to address vast unmet need in rural NSW. The APA is calling for funding to enable the inclusion of physiotherapy services in the delivery of multidisciplinary care in rural health settings. We are also calling for stronger models to enable integrated care to strengthen access to care and build capacity of health service delivery in rural areas. This includes state level partnerships with Primary Health Networks (PHNs) and blended funding models that meet community need.

04 COMPENSABLE SCHEMES

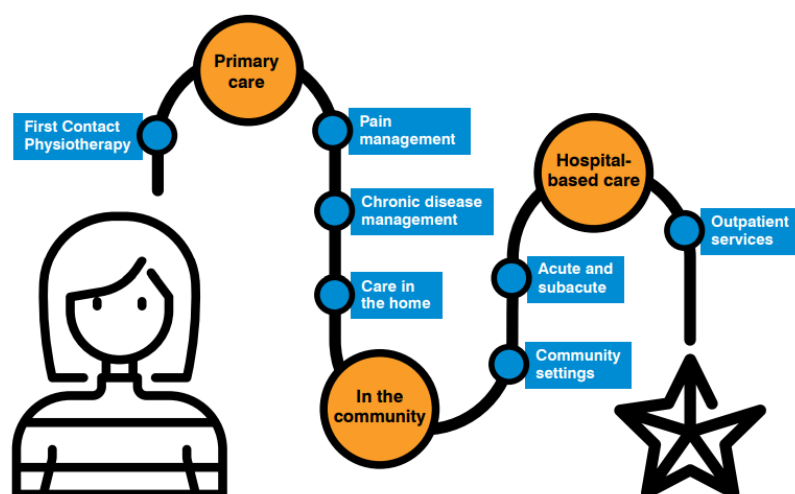
There is a need to ensure adequate remuneration, support and streamlining of high-value healthcare provision for injured people in state-based compensation schemes. A priority must be placed on addressing the mounting inequity between current reimbursement of physiotherapy services within these schemes and the increasing expectations placed on physiotherapists. Continuation of the current position will only lead to a further deterioration of scheme related outcomes and escalating costs for provision of the schemes.

05 PHYSIOTHERAPY IN URGENT CARE CLINICS

The APA is calling for physiotherapy to be embedded in all Urgent Care Clinics. The Urgent Care Clinic model provides the opportunity to progress a new, more efficient pathway that provides better and faster access to diagnosis, treatment and care of musculoskeletal pain and conditions. This systemic reform would combine better health outcomes for patients with significant overall cost reductions and efficiency gains in the health care system. Urgent Care Clinics that include Physiotherapy can be the solution to manage and treat urgent musculoskeletal presentations in the optimal way, for both patient outcomes and health system efficiencies. In the rural context, funding for expansion of physiotherapy services to provide a fixed amount of urgent care and on-call service will support rural General Practitioners (GP) and Hospital Emergency department functions.

Physiotherapy across settings

Delivery of preventive care, treatment, and rehabilitative physiotherapy services across the lifespan in selected populations and settings.



FOCUS AREA ONE

Better community care to improve health outcomes for NSW

Physiotherapy provides value to NSW residents at all stages of life and in response to many different life events. However, physiotherapy is often underutilised despite strong evidence for integrated care models that include allied health services. We need to instigate solutions beyond outdated medical models and a sole discipline focus to get the best health and efficiency outcomes.

Physiotherapists routinely interact with high-risk populations in need of preventive care in primary healthcare settings, hospitals and community health services. Physiotherapists have the skills and knowledge to embed health promotion and prevention activities into routine care. The cost-effectiveness of our interventions is proven both in the literature and through cost-benefit analysis. The APA commissioned the Nous Group to undertake a landmark analysis of the value of a range of physiotherapy interventions (Nous Group, 2020). By doing so, we have, for the first time, built a robust picture of our high-level impacts and the value this provides to the healthcare sector.

Priority 1.1 | **Physiotherapy-led early intervention and prevention strategies**

Action: Invest in public funded physiotherapy to increase the coverage of preventive health services in NSW.

Physiotherapy helps people of all ages to prevent, manage and/or rehabilitate injury, illness or disability and screen for a range of preventive health issues. Community-based physiotherapy also has a key role in preventing hospitalisation or to reduce the length of hospitalisation.

The APA is calling for a greater focus on improving access to physiotherapy services for all people in NSW, particularly priority populations that stand to benefit the most from physiotherapy to support prevention and maintenance of chronic conditions. In particular, this should include greater use of, and access to, generalist and advanced practice physiotherapists to reduce hospital and medical clinic wait lists, reduce costs, and improve outcomes for patients.

Primary preventive strategies that include mechanisms to enable multidisciplinary teams, including physiotherapists, are also needed. Physiotherapists have a unique skill set in promoting physical activity with specific clinical populations across a broad scope including for prevention and maintenance of chronic conditions, falls prevention, prevention of workplace injuries, prevention of chronic pain, prevention of sporting injuries, and maintenance of function in those with a disability.

Priority 1.2 | **Improved access to care pathways for chronic conditions**

Action: Prioritise access to physiotherapy for people with chronic conditions and COVID-19.

Physiotherapy plays a vital role in the management of chronic conditions across musculoskeletal, pain, cardiorespiratory and neurological conditions. As such, they have the ability to play a critical role in helping patients navigate their ongoing management and mitigating the burden on the health system. Current funding arrangements provide extremely limited access to allied health services for patients with chronic conditions, insufficient to address their complex needs.

Investment in models of care in NSW public health, along with influencing commonwealth funding models, is required to allow better and more equitable access to chronic care management for the people of NSW.

Rehabilitation programs can help ease fatigue and improve the mood of people with ongoing chronic symptoms. Physiotherapists have the skills in chronic disease management and are able to offer patients tailored treatments to assist in fatigue management, pain control, strength and balance.

Investment in publicly funded physiotherapy to drive new models of care is required. This includes long COVID rehabilitation pathways where a good multidisciplinary response is essential.

FOCUS AREA TWO

Better use of hospital and community services to improve patient flow

The path to better health is to optimise the patient journey by removing the current barriers and by enabling the patient to follow well-understood pathways with clear steps to vital care including physiotherapy. By advancing hospital and community physiotherapy, we offer pathways that maximise the contribution of physiotherapists in inpatient, outpatient and community-based services, in both private and public hospitals, providing significant benefits to the patient and the healthcare system.

Physiotherapy offers solutions in both managing demand and playing an important role in avoiding admissions and in lowering readmission rates. From the Emergency Department (ED), to almost every ward of acute and subacute health services, through rehabilitation and in community health centres, physiotherapists employ knowledge and skills across a wide range of musculoskeletal, cardiorespiratory and neurological conditions to improve people's health. Physiotherapists are highly trained and specialised and provide a flexible and adaptable workforce that have been at the forefront of Advanced Practice in NSW for over 15 years.

Priority 2.1 | **Advanced practice physiotherapy recognition**

Action: [Develop advanced practice physiotherapy roles to improve the patient journey.](#)

Advanced practice (AP) physiotherapists hold high levels of clinical expertise to assess and independently manage specific patient cohorts. They provide a solution to current workforce pressures with the potential to create a more efficient hospital system through further utilising the skills possessed by physiotherapists. Advanced practice clinics and services have been implemented in a number of areas in NSW, however they are inconsistent across Local Health Districts (LHDs) and Specialty Health Networks (SHNs) with significant inequity of access depending on location. The APA is calling for further investment to develop advanced practice physiotherapy roles and ensure consistency of resourcing for these roles across districts and networks therefore enabling the full potential of the workforce to be utilised. This includes addressing barriers which prevent the recognition of the skills held by AP physiotherapists in the current award.

Priority 2.2 | **Ensure adequate and equitable access to physiotherapy treatment for paediatrics and pelvic floor disorders**

Action: [Increase investment in physiotherapy Paediatric and Pelvic Health Services across Local Health Districts/Specialty Health Networks.](#)

The Henry Review has recommended that “The Ministry of Health recognise that the demand for allied health services for children, young people and families far exceeds supply”. Physiotherapy plays a key role in early childhood assessment and intervention which can improve lifelong outcomes and facilitates access to other support services (e.g. NDIS). Access to such physiotherapy services should be equitable across all LHDs and SHNs.

Disorders of the pelvic floor are high in prevalence and can have lifelong implications. Physiotherapy for pelvic floor disorders has a strong evidence base. It is recommended as a first-line treatment for urinary incontinence, faecal incontinence, chronic pelvic pain and pelvic organ prolapse (RACGP, NICE guidelines, ICS - International continence society, RANZCOG). Access to public pelvic floor physiotherapy is limited or non-existent across a large number of districts and localities.

Enhancement of paediatric and pelvic health physiotherapy services to ensure equity of access should be a priority to improve life-long health outcomes for the people of NSW.

FOCUS AREA THREE

Prioritising rural physiotherapy

Every community across NSW deserves access to vital health services including physiotherapy, however many rural communities have no physiotherapy services, contributing to disparities in healthcare. Stronger investment in publicly funded rural physiotherapy and integrating prevention into the management and delivery of care will help address health disparities. Rural health reform beyond medicine has been slow and fragmented. Targeted investment and realignment of funding priorities is critical to enable inclusion of physiotherapy services in the delivery of multidisciplinary care in rural health settings.

Priority 3.1 | **Strengthen access to rural physiotherapy**

Action: Fund physiotherapy and allied health to enable more integrated care, strengthen access to physiotherapy and build capacity of health service delivery in rural NSW.

We need more focus on access to physiotherapy for those who need it the most. Providing equitable access to care continues to be a fundamental challenge for rural physiotherapists working within private and public settings. A rural health strategy needs to address the challenges of delivery services in rural communities, including addressing the specific needs of those who live there. More investment is needed in integrated care models and incentivised team-base care arrangements to increase access. New rural funding models that ultimately lead to the success and sustainability of a service are needed to drive fully integrated care encompassing telehealth. Scaling up and replicating these successful models is vital and reliant on ongoing access to funds beyond grant rounds. Expanded capacity for Primary Health Networks to fund physiotherapy solutions to address rural services challenges is also vital. These solutions need to support existing providers as well as setting up opportunities for workforce growth.

Priority 3.2 | **Building a sustainable rural physiotherapy workforce**

Action: Provide incentives to attract more physiotherapists to address vast unmet need in rural NSW.

Strategies to support retention requires a strong commitment to improving the policies, programs and infrastructure specifically targeted to building capacity for allied health service provision. Recognition of rural practitioners as a highly skilled, supported and a valued resource is also needed to incentivise career choices in rural health. There is a need to incentivise allied health professions in the same way GPs are to work in regional, rural and remote areas to improve income streams and make it more viable to practise rurally. Strategies implemented federally, including the Workforce Incentive Program (WIP), have failed due to their flawed design which directs funding through GP clinics. The APA is calling on the NSW Government to offer support and initiatives to assist in growing NSW's rural physiotherapy workforce.

FOCUS AREA FOUR

Developing healthy and viable compensable schemes

The APA supports the continuing development of healthy and viable compensable schemes which enable the physiotherapist to deliver timely and cost-effective, high value healthcare to achieve mutually beneficial scheme outcomes. The APA believes that integral to this is ensuring adequate remuneration, support and streamlining of service provision for injured people across all state-based compensation schemes.

An immediate priority must be placed on addressing the mounting inequity between the current reimbursement of physiotherapy services within these schemes and the increasing costs of service provision for the physiotherapist. Despite there being an 11.3% increase of the CPI over the last 2 years, the SIRA gazetted fee rate for an initial physiotherapy consultation (PTA001) has only increased by 3.44% over the same period. Continuation of this position will only lead to a further deterioration of scheme related outcomes and ultimately an escalation of costs for provision of the schemes.

A further focus needs to be directed to the mitigation of red tape with the delivery of reasonable, timely and evidence-based physiotherapy services. At present a physiotherapist can wait for up to 21 days for approval to deliver treatment already regarded as evidence based and outcome focused, which can have a significant impact on continuity of care. Additionally, a physiotherapist can wait the same period of time for approval to complete a brief report which can likely result in an immediate upgrade of certification. Neither of these situations are reflective to the evidence based guidelines supported by SIRA, conducive to quality care or beneficial to the optimal customer experience. When compared to other more attractive treatment funding models, this only serves as a deterrent to the state's best physiotherapists choosing to manage patients in compensable schemes.

Priority 4.1 | **Commensurate remuneration**

Action: [An immediate review of remuneration fees for delivery of physiotherapy services within compensable schemes.](#)

The inequity of fee increases over recent years, during a time when significant demands have been placed on physiotherapists to assist with continued delivery of essential and advanced scope practice roles is highly disappointing. The APA has significant concerns that if this is to continue, it will only result in lower value healthcare delivery which will ultimately cost the schemes more due to poorer outcomes. The current fee structure additionally hampers the delivery of timely evidence based care and provides limited opportunities for remuneration of valued added services such as liaison and report writing with other key stakeholders in the scheme. The APA seeks an immediate review of the current fee schedules to achieve greater parity with other funding models and create an environment advantageous to aid the recovery of the injured person.

Priority 4.2 | **Enabling streamlined physiotherapy service provision**

Action: [Review of the compensable schemes to remove red tape to the delivery of more streamlined services.](#)

In compensable schemes, there remains considerable roadblocks at both a procedural and administrative level to the smooth delivery of accepted physiotherapy management. The APA would strongly encourage a review of current procedures to enable the uninterrupted delivery of physiotherapy in the early and most crucial stages of claims. This needs to encompass appropriate duration of consults that allows diagnostic formulation, risk stratifying, clinically reasoning to identify and implement high value care pathways and an ability to assess and report on relevant capacities and tolerances. Scheme changes need to also occur to create an ability to share crucial information amongst all stakeholders without restriction to drive scheme related outcomes. These current barriers remain a significant deterrent to physiotherapists wanting to take on the management of this cohort of patients.

FOCUS AREA FIVE

Physiotherapy in Urgent Care Clinics

Faster treatment, better outcomes and lower costs are required to meet current and future healthcare needs in NSW. The solutions that will fix healthcare lies in valuing the skills of the entire health workforce. There is a need to move beyond traditional structures and conventional primary care towards more integrated care models that include allied health services such as physiotherapy. Targeting spending on physiotherapy would bring more value for money by reducing the need for costly secondary care. The Urgent Care Clinic trial provides the opportunity to test a new more efficient pathway that provides better and faster access to diagnosis, treatment, and care of musculoskeletal pain and conditions.

Priority 5.1 | **Urgent Care Clinics**

Action: Prioritise a publicly funded First Contact Physiotherapy (FFCP) service in Urgent Care Clinics nationally.

Action: Prioritise a FFCP service in the planned priority primary care centres for NSW.

Physiotherapy is key to ensuring continuity of care across the primary and acute care interface by contributing to alleviating GP workload and diverting non-life threatening emergencies from EDs. Rolling out FFCP in primary care, and as part of the urgent care clinic trials, will have key benefits both for patients and for the health system in the form of cost savings and better utilisation of resources, including the health workforce. A FFCP service would be provided by appropriately qualified AHPRA regulated autonomous clinical physiotherapy practitioners who are able to assess, diagnose, treat and discharge a person without a medical referral – where appropriate.