

Our **advocacy priorities** for the 2024 Tasmanian Election

This is where reform begins

Measures are needed to improve access to essential care, reduce out-of-pocket costs and, most importantly, reduce costly and inefficient treatments. The Australian Physiotherapy Association (APA) presents new, advanced pathways that optimise the patient journey through referral, diagnosis and treatment. We offer the policy solutions that will deliver contemporary care models and drive clinical excellence. We outline new opportunities to leverage the physiotherapy workforce to support healthier lives and to drive system-level change to advance health, improve care and increase value.

Strengthening access to physiotherapy for all Tasmanians

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

We need to strategically prioritise access and outcomes, beginning with lifting the barriers to accessing healthcare. Physiotherapists can make a real impact on value and the patient journey including improving patient wait times and ensuring more timely access to appropriate treatment and investigations. A key opportunity lies in building capacity of the profession and supporting them in working to their full scope of practice.

Priority Asks

Investment in physiotherapy will advance health, improve care, and increase value. 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, delivery cost-effective services and enhance patient care:

01 BETTER COMMUNITY CARE

The rising tide of chronic disease cannot be addressed without significant reform to drive prevention and early intervention into the system. In addressing complex care needs, funding care pathways in primary care are lacking, particularly for those with multi-morbidity. The APA is calling for stronger health access plans to ensure Tasmanians have access to the care they need including stronger investment in publicly funded physiotherapy to increase the coverage of preventive health services in Tasmania.

02 PHYSIOTHERAPY IN THE HOSPITAL

Chronic underfunding has led to declining public hospital performance. Physiotherapists possess a wide range of skills that support a patient's journey through the hospital system. The APA is calling for these skills to be further utilised to alleviate the pressures. We are also calling for funding for physiotherapy-led osteoarthritis pre-and post-operative packages to support recovery through the hospital system. The APA is calling for these skills to be further utilised to alleviate the current stressors on our hospitals. This includes removing barriers that prevent advanced practice physiotherapists working to the top of their scope of practice.

03 RURAL PHYSIOTHERAPY

Targeted investment and realignment of funding priorities is critical to address vast unmet need in rural Tasmania. 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 Tasmania (PHT) to fund physiotherapy-led models of care in rural Tasmania.

04 WORKFORCE REFORMS

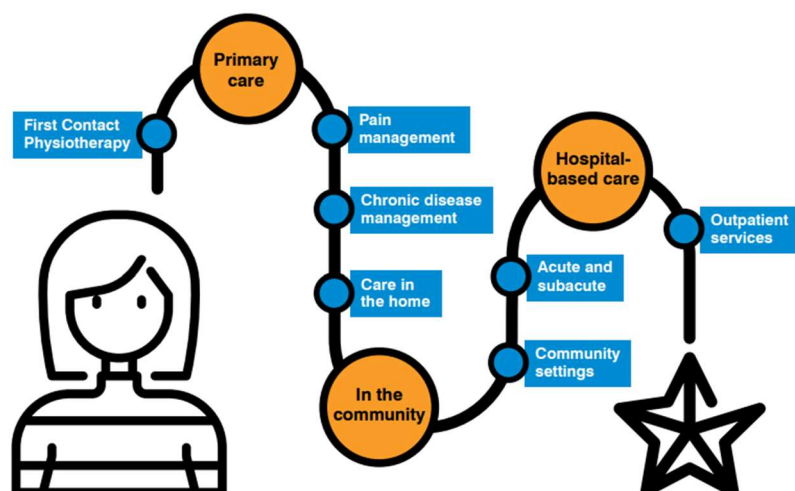
More focus is required on investment for all health disciplines experiencing shortages alongside funded solutions to achieving an optimal balance of skill mix in addressing patient need. A priority must be placed on the professionally qualified clinical and regulated staff groups, including both doctors and nurses, encompassing a number of vital allied health professions. This group includes physiotherapy, one of the largest group of registered primary healthcare professionals— where we are now facing a supply crisis, and in need of urgent nationally directed interventions.

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 healthcare 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 (ED) 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 Tasmanians

Physiotherapy provides value to Tasmanians at all stages of life and in response to many different life events. However, it 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 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, and can embed health promotion and prevention activities into routine care. Physiotherapists are perceived by the general public as highly credible and trusted healthcare practitioners. 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 | **Enabling efficiency in the WorkCover system.**

Action: Legislative change that would allow Tasmanian physiotherapists to issue the certificate of capacity for an injured worker

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. 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. However, a significant limitation to services is the current legislation that restricts physiotherapists from issuing work capacity certificates.

Physiotherapists are primary contact clinicians. As a result, members of the community do not need to be referred by a doctor for treatment. Current return to work legislation allows a person who has had a workplace accident to go directly to their physiotherapist for treatment, however the injured person currently needs to be referred back to a medical practitioner for certification. This may result in delays in returning to work and unnecessary costs. Allowing Tasmanian physiotherapists to issue the certificate of capacity will overcome this problem.

In Victoria and New South Wales, physiotherapists are able to write subsequent certificates of capacity and have shown a willingness and a

strong interest in engaging in the treatment and certification of injured workers.

The APA believes this will result in improved return to work outcomes for injured workers, and efficiencies for the healthcare and the compensation system.

Priority 1.2 | **Physiotherapy-led early intervention and prevention strategies**

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

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 stay in hospital.

The APA is calling for a greater focus on improving access to physiotherapy services for all Tasmanians, 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 1.3 | **Integration of physiotherapy into digital communication platforms**

Action: Physiotherapy led pilots within primary care and the hospital system to support interoperability and streamline the patient journey.

New technologies are providing opportunities to address current fragmentation in the system by improving the coordination of healthcare and preventing adverse events. The use of digital technologies to overcome barriers currently experienced by patients will not only improve patient experience but will also empower them in their health choices.

An integrated healthcare system, which includes physiotherapy, will improve the patient experience. Digital technologies are already commonplace in physiotherapy practice including the adoption of technologies to support connectivity such as digital record keeping and secure messaging. As part of a multidisciplinary team, physiotherapists will have access to patient records and tests, which will decrease the stress on patients to bring results and information to appointments. Enabling secure messaging will allow for better communication with other health providers, ensuring timely treatment, and the adoption of patient-centred health programs will empower patients by allowing them to be more engaged in their treatment.

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, where expertly managed dizziness, soft tissue injuries and low back pain, to almost every ward of acute and subacute health services, through home-based rehabilitation and in community health centres, physiotherapists work to improve people's health and keep them well, improving access to care for all Tasmanians. Physiotherapists are a highly trained and specialised, flexible and adaptable workforce.

Priority 2.1 | **Advanced practice physiotherapy**

Action: Develop advanced practice physiotherapy roles to improve the patient journey.

Advanced practice 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 Tasmania.

The APA is calling for further investment to develop advanced practice physiotherapy roles and therefore enable the full potential of the workforce to be utilised.

Priority 2.2 | **Expand and implement pre and post-surgery interventions**

Action: Fund physiotherapy-led rehabilitation programs for pre-and post-operative packages.

Physiotherapy is a valuable and cost-effective alternative to other interventions, such as surgery, in the management of osteoarthritis.

We have seen waitlists for orthopaedic surgeries increase resulting in prolonged pain and disability for those awaiting surgery. In addition to supporting post-operative rehabilitation, physiotherapists can assist those currently on surgical waitlists in managing their pain and maintaining functional activities. The APA is calling for funding to further expand and implement existing physiotherapy-led pre and post-operative packages.

Hospital care



Hospital care in acute, rehabilitation and in home care

Acute care



Provide assessment and treatment to improve strength, function and mobility. Assist and advise on discharge planning.

Respiratory conditions, cardiac care, intensive care units, gerontology, oncology, post surgical care.

Rehabilitation



Deliver treatment focusing on improving strength and functional independence to enable safe discharge.

Neurological conditions, joint replacements, long illness, amputation, pulmonary and cardiac rehabilitation, accidents and injuries.

Home care



Support early discharge by providing treatment and rehabilitation in the home.

Stroke, post fall, long hospital stay, traumatic brain injury, chronic disease management.

FOCUS AREA THREE

Prioritising rural physiotherapy

Every community across Tasmania 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.

To address entrenched inequities, we need to fund innovative rural models of care, encompassing physiotherapy and allied health, to enable fully integrated care. This includes ensuring funding for rural telehealth to supplement and support the success and sustainability of a service. Scaling up and replicating these successful models is vital, as a sustainable service is reliant on ongoing access to funds beyond grant rounds. Enabling Primary Health Tasmania (PHT) to advance physiotherapy-led models of care to address service delivery challenges in rural areas is also key.

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 Tasmania.

We need more focus on how access to physiotherapy can be improved for those who need it the most. There is a need to support innovative models of care, including reform of primary care that allows patient access to physiotherapy as publicly funded first contact practitioners. In addition, supporting physiotherapists, as primary practitioners, to refer to specialist medical practitioners will better utilise the existing workforce, cut red tape and add value to GP services enabling them to dedicate more time to clinical care.

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

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

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. This essentially puts the only physiotherapist in town out of business. The APA is calling on the Tasmanian Government to offer support and initiatives to assist in growing Tasmania's rural physiotherapy workforce.

FOCUS AREA FOUR

Workforce reform and building a better pipeline to the workforce

We need to tackle the critical workforce shortage in physiotherapy.

From a health workforce perspective, the APA supports a strong focus on the care and support sector where policy inaction has seen the skills profile of this vital workforce deteriorate. It is this workforce that remains the most undervalued, resulting in low job satisfaction and low relative pay and it must be prioritised.

The APA believes a wider policy lens is needed to seek opportunities from within the entire health workforce, a workforce that is in desperate need of attention, investment and reform. The broader economic benefits found through efficiencies by moving care from hospitals into primary and community health services, and at the primary and acute care interface as a key policy aim will require a broad set of disciplines. Investing in the development of physiotherapists is essential to delivering on these commitments and taking the pressures off the high cost parts of the system.

Health workforce reform will need a broader focus on skill retention and a level of policy and planning alignment to fully examine the changing profiles. Greater focus on the improved utilisation of skills through advanced scope of practice roles to address current and future workforce issues will be needed. In addition, reform must tackle the existing system complexities including removing barriers to integrated care.

Priority 4.1 | Valuing skills

Action: Funding to develop the existing physiotherapy workforce including enabling upskilling and advanced skill acquisition.

Health workforce policies to increase the skills of the workforce is important to raising productivity. A focus on attracting and retaining critical skills and enabling higher-level skills is vital to addressing quality and supply concerns. This will require a sustained policy effort with focus on enabling the required workforce transitions to new models of care across the health system. Investment in new publicly funded physiotherapy is needed to drive new models of care. The APA is calling for increased funding to develop the existing physiotherapy workforce including enabling upskilling and advanced skill acquisition to manage increasing complexity and co-morbidities.

Priority 4.2 | Student placements

Action: Funding to support clinical placements.

As an autonomous profession it is essential physiotherapists are prepared to enter the workforce upon graduation. As such, physiotherapy training programs include clinical placements to provide the opportunity for students to implement their learning in a supervised environment.

With the introduction of the physiotherapy program at University of Tasmania, there is a growing demand for clinical placements.

There are funding barriers limiting the ability of health services and physiotherapy practices to support students. Specific to private practice, current legislation makes it difficult, and sometimes financially unviable, for physiotherapists in this setting to support students. This has the potential to impact the preparedness of the next generation of physiotherapists. The APA is calling for funding opportunities to support physiotherapy businesses in providing clinical supervision and training.

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 Tasmania. 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.](#)

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 emergency departments. 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.