

Position Statement

Access to Physiotherapy Services in Ontario

Introduction

The Regulated Health Professions Act (RHPA) states “*it is the duty of the Minister to ensure that individuals have access to services provided by the health professions of their choice.*” Perspectives on access to healthcare services are represented by a diverse group including government, legal counsel, consumers, employers, providers, think tanks, regulators, health networks, professional associations and the public.

Limitations to the rights of a person to enter into a patient-physiotherapist relationship can be considered access issues. Generally, barriers to access are categorized as legal barriers, information barriers, geographic barriers, human resource barriers and financial barriers.

This position statement identifies the limits of the College’s role in addressing regulatory barriers to an individual’s access to physiotherapy services in Ontario from a perspective focused in health system improvement and population health.

Background

The challenge with a broad based issue such as access to services in physiotherapy is that multiple profession-based organizations and leaders have a role to play. In taking a ‘right touch regulation’¹ approach to such a complex and important issue for Ontarians, the Council has positioned their perspective on health system improvement and the population as a whole.

Position

To assure consideration of issues central to the College role, the profession’s competence, and most importantly the public’s need(s), access to service discussions of Council table are to be held within the following parameters:

- Evidence informed practice
- Labour mobility and health human resources
- Scope of practice of physiotherapy
- Safety and risk in care delivery
- Utilization and cost effectiveness
- Models of care that promote quality outcomes

Glossary

Access: In the context of this position statement, access refers to the ability of a patient or a prospective patient to obtain physiotherapy services without inappropriate or undue barriers.

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1 Right Touch Regulation, August, 2010, Council for Healthcare Regulatory Excellence.