



Rehabilitative
Care Alliance

Community Rehab Capacity During the COVID-19 Pandemic: Survey Highlights

Rehabilitative Care Alliance

November 2020



Background & Objectives

- ▲ During the initial stages of the pandemic in the spring of 2020, there were significant decreases in access to community-based rehabilitation. With the resumption of surgeries across the province, it is important to ensure there is sufficient capacity for patients requiring post-acute rehabilitation.
- ▲ The Rehabilitative Care Alliance collected data on pre-COVID, current, and future anticipated rehab capacity from providers of publicly funded community rehabilitation services in order to facilitate this cross-continuum planning. Surveys were distributed mid-September and returned mid-October, 2020.
- ▲ The data collected provides valuable information to inform ongoing regional planning for community-based rehab services during the pandemic.
- ▲ The collected data also highlights the important role that community-based rehab plays in the Ontario health system.

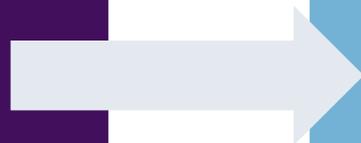


Engagement and Distribution

Engagement Strategy

The RCA secretariat engaged and obtained input on the survey questions from:

- CorHealth
- Ontario Physiotherapy Association
- Ontario Health – Shared Services
- Service Provider Organizations
- Ontario Hospital Association



Broad Distribution Approach

The RCA secretariat implemented a broad distribution strategy, sharing the survey with:

- regional vice presidents and directors and clinical leads
- via OHA and OPA newsletters and the RCA distribution list
- directly to community physiotherapy clinics and service provider organizations



Key Highlights from Surveys - Ambulatory

- ▲ 161 ambulatory rehab clinics responded to the survey and at the time of the survey 94% indicated that they were operating at reduced capacity
- ▲ The average operating capacity at the time of the survey reported across all respondents was 57%
- ▲ Ambulatory rehab clinic respondents indicated that patient volumes for Q1 FY20/21 were 35% of the average quarterly patient volumes for FY19/20.
- ▲ Respondents indicated that they are not expecting to return to 100% capacity this fiscal year. On average, ambulatory rehab respondents indicated that clinics are expecting to operate at 81% capacity
- ▲ 55% of responding organizations indicated implementing a waitlist strategy. Wait list strategy development was more frequently reported in hospital-based organizations. Among those developing a waitlist strategy, moving toward virtual care was the most common strategy employed. Triaging patients for care was the second most commonly cited approach



Key Highlights - Ambulatory

- ▲ The two most frequently cited factors that have had the largest impact on overall capacity are: full or partial clinic closures and patients declining services (either in person or virtual depending on what was offered). As clinics opened, the need to physically distance patients was also frequently cited as having a significant impact on capacity
- ▲ With the exception of pediatrics, the proportion of visits delivered in-person (as compared to virtually) was reduced
- ▲ There was greater variation in moving toward virtual care regionally than by population group. The regional variability appeared to correlate with COVID-19 rates i.e., those regions with higher COVID-19 cases, were generally the regions with fewer in person visits



Key Highlights – In-home Rehab Capacity

- ▲ 24 in-home service delivery organizations responded to the survey, each organization indicating multiple regions served
- ▲ 48% of responding organizations delivering in-home rehab services indicated that they were operating at reduced capacity
- ▲ Of those who reported operating at reduced capacity, the average operating capacity reported for physiotherapy and occupational therapy services was 73%
- ▲ ‘Clients declining in-person rehab’ and ‘Limiting in-person in-home visits to only urgent or emergent cases’ were the two most commonly cited factors impacting capacity