Publicly-funded physio assessments in Winnipeg are down 85% since services were consolidated in 2017

## Fewer access points and narrower criteria

In late 2017, outpatient services for adult musculoskeletal care were reduced from eight hospital departments to one.

Eligibility restrictions on publicly-funded outpatient physiotherapy further reduced access to those needing care.

## Faster to assess, slower to discharge

### Wait times have decreased

Since consolidation, the average wait time for an assessment decreased from 15 days to 7 days.

### Discharges take longer

The treatment duration—the time from initial assessment to patient discharge—increased after consolidation.

### Patients see their therapist less

The number of appointments per patient decreased after consolidation.

## Access to fee-based clinics is not equal

A previous study showed that, compared to the Winnipeg population, people who attend private physiotherapy clinics:

* Have higher incomes
* Have more education
* Less often identify as Indigenous or a visible minority

Graphic:

## Monthly publicly-funded assessments now and before consolidation

* Now: 110 assessments per month (6,715 total from December 2017 to December 2022, a total of 61 months)
* Before: 794 assessments per month (18,261 total from January 2016 to November 2017, a total of 23 months)
* Cervical spine: before 35.9 assessments per month, now 6.3
* Shoulder: before 109.5, now 8.3
* Elbow: before 22.7, now 3.0
* Wrist/hand: before 154.7, now 43.8
* Lumbar spine: before 122.1, now 20.0
* Hip: before 59.9, now 2.3
* Knee: before 167.4, now 5.5
* Ankle: before 32.7, after 4.6
* Foot: before 13.8, now 1.7
* Miscellaneous: before 43.3, now 4.4

Not included in the totals above due to limited numbers:

* Thoracic spine/ribs: before 6.4 assessments per month, after 0.9 per month
* Head: before 1.1 per month, after 0.1 per month
* Where diagnosis was not included on a report, it was counted as an assessment, but not assigned a specific body part

## Recommendations

1. Collect higher quality rehab data
   1. Standardize the recording of accurate, complete demographic information and diagnosis categories.
2. Address the gaps to accessing care
   1. To improve access to publicly-funded outpatient services, add income-based eligibility criteria for diagnoses currently deemed ineligible to receive physiotherapy care. Most provinces have measures in place to address such inequities to access of care.

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