# Publicly-funded physio assessments in Winnipeg

## ARE DOWN

85%

since services were consolidated in 2017

#### Fewer access points and narrower criteria

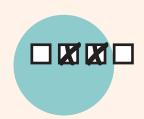
In late 2017, outpatient services for adult musculoskeletal care were reduced from eight hospital departments to one.

Eligibility restrictions on publicly-funded outpatient physiotherapy furthur 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

### Not included in the totals above due to limited numbers:

Thoracic spine/ribs – Now: 0.9/month • Before: 6.4/month

Head - Now: 0.1/month • Before: 1.1/month

Where diagnosis was not included on a report, it was counted as an assessment, but not assigned a specific body part.

### RECOMMENDATIONS

#### Collect higher quality rehab data

Standardize the recording of accurate, complete demographic information and diagnosis categories.

#### Address the gaps to accessing care

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.

Monthly publicly-funded assessments

now and (before) consolidation