

Direct Access To Physiotherapy From The Perspective Of The Austrian Population

Wolfgang LACKENBAUER*, Andreas BEREZ, Madeleine FRÜHWIRTH, Jessie JANSSEN
IMC University of Applied Sciences Krems, Krems, Lower Austria, Austria

* Corresponding Author: Wolfgang Lackenbauer, wolfgang.lackenbauer@fh-krems.ac.at

Abstract. *In Austria patients have indirect access to physiotherapy, this means that patients first need to be seen by a physician before they can access physiotherapy. However, in Europe 13 countries have switched to direct access to physiotherapy, as some benefits to this model have been proven. Currently it is unknown if the Austrian population is willing to use direct access to physiotherapy. In addition, the perceived barriers of the general Austrian population to direct access have never been explored, despite them being important stakeholders. Therefore, this study aimed to 1) investigate the willingness of the Austrian population to make use of direct access to physiotherapy and 2) explore possible concerns of the Austrian population towards future direct access to physiotherapy. An online survey consisting of demographic data, closed and open questions was conducted. The closed questions were analysed using the program SPSS, the open questions using Mayring's content analysis. Despite only a quarter of the 294 participants being aware of the term direct access, 76 % considered using direct access. Persons who were familiar with the term direct access and persons who had already been in physiotherapeutic treatment were more willing to make use of direct access. The greatest concerns expressed by the Austrian population focused on incorrect treatment. The participants would therefore prefer physiotherapists to learn additional medical expertise and diagnostic skills in the case of direct access. Despite the low level of awareness, the level of agreement to use it is high. Interventions such as educating the general population about direct access and physiotherapists about serious pathologies with the use of red flags should be explored in further research.*

Keywords: increased practice autonomy, survey, physiotherapy, Austrian population.

1 INTRODUCTION

There are two ways a patient can access physiotherapy: Direct and indirect. In a health care system, where physiotherapists act as first contact practitioners (direct access), patients can refer themselves directly to a physiotherapist without being referred by another health care professional (e.g. by a physician) [1]. On the other hand, in some countries (including Austria), patients require a medical referral before they can consult a physiotherapist [2]. While proponents of direct access to physiotherapy argue with the potential benefits of lower costs for the health care system [3-5] and decreased workload for general practitioners [5], [6], opponents of direct access to physiotherapy services primarily express concern that physiotherapists might fail to recognize the presence of serious medical conditions, which require medical evaluation and/or treatment [7]. Due to a high prevalence of orthopedic and musculoskeletal pain disorders in the general population [7], [8] a heightened research interest on enhanced practice autonomy for physiotherapists (=direct access) has been in the field of musculoskeletal medicine [9]. In Austria, the introduction of direct access to physiotherapy service has now been discussed for several years [10].

Within this discussion, it is of uppermost importance to include the patient's perspective as they are eventually the health care consumers. Including the patients' perspective might also be critical for moving the discussion/agenda of increased practice autonomy for Austrian physiotherapists forward. Therefore, this study aimed to 1) investigate the willingness of the Austrian population to make use of direct access to physiotherapy and 2) explore possible concerns of the Austrian population towards future direct access to physiotherapy.

2 METHODS

The chosen cross sectional concurrent mixed methods design consisted of an online survey with eight closed-ended and four open-ended questions was conducted. This study was conducted in accordance with the Checklist for Reporting Results of Internet E-Surveys (CHERRIES) [11].

2.1 RECRUITMENT

The link to the survey was distributed via Facebook, Instagram and WhatsApp. In addition, the link for the survey was sent to personal contacts of the authors of this study, with the request for further distribution. The first page of the survey encompassed the information sheet.

2.2 DEVELOPMENT OF THE SURVEY

An online survey was created with the program Unipark and consisted of eight closed-ended and four open-ended questions. The closed-ended questions were used to collect demographic data and to survey the experience of participants with physiotherapy in the past. The open-ended questions asked about the general attitude toward direct access to physiotherapy, and what concerns, disadvantages or opportunities might be associated with it.

2.3 ANALYSIS

The eight closed-ended questions were analysed with IBM SPSS 25. The Chi² test was used to examine the differences between knowledge of open access and use of previous physiotherapy treatment with willingness to use direct access. The four open-ended questions were interpreted using the inductive content analysis according to Mayring [12].

3 EVALUATION

3.1 WILLINGNESS OF THE AUSTRIAN POPULATION TO MAKE USE OF DIRECT ACCESS TO PHYSIOTHERAPY

The survey was completed by 294 people, of which 71% were females. The concept of direct access to physiotherapy seemed to be largely unknown to the majority (74,1%) of participants. Participants who were familiar with the term direct access were more willing than participants who were unfamiliar to make use of direct access (92,1% vs 70,5%, Chi²=14,4, p=0,001) In addition, participants who had already been in physiotherapeutic treatment were more willing than participants who had not been in physiotherapeutic treatment (82,3% vs 64,8%, Chi²=11,7, p=0,003).

3.2 POSSIBLE CONCERNS OF THE AUSTRIAN POPULATION TOWARDS FUTURE DIRECT ACCESS TO PHYSIOTHERAPY

The study participants express the greatest concerns about incorrect treatment and missed serious pathologies by physiotherapists. In the case of direct access to physiotherapy, the study over half of the participants would like physiotherapists to acquire additional medical expertise and advanced (differential) diagnostic skills.

4 CONCLUSIONS

Within the discussion of future direct access to physiotherapy in Austria, it is crucial to include all stakeholders, as is common in other countries. Including the patient's perspective is central as they are eventually the health care consumers.

Results of this study suggest that there appears to be a generally positive attitude within the general population towards future direct access to physiotherapy in Austria. Especially those participants, who already had experience with physiotherapy in the past, would use direct access to physiotherapy service in the future. However, the concern within the general population that physiotherapists might overlook serious pathologies needs to be taken seriously and, in consequence, be addressed by setting the highest standards possible when educating physiotherapists in medical (red flag) screening and differential diagnosis.

5 ACKNOWLEDGEMENTS

We would like to thank the participants who took their time to complete the survey.

4 REFERENCES

- [1] C. C. Goodman and T. E. K. Snyder. *Differential Diagnosis for Physical Therapists. Screening for Referral*, 5th ed., St.Louis, USA: Saunders Elsevier, 2013.
- [2] H. A. Ojha, R. S. Snyder, and T. E. Davenport, "Direct access compared with referred physical therapy episodes of care: a systematic review," *Phys Ther*, vol. 94, no. 1, pp. 14-30, Jan. 2014, doi: 10.2522/ptj.20130096.
- [3] D. Piscitelli, M. P. Furmanek, R. Meroni, W. De Caro, and L. Pellicciari, "Direct access in physical therapy: a systematic review," *Clin Ter*, vol. 169, no. 5, pp. e249-e260, Sept-Oct. 2018, doi: 10.7417/CT.2018.2087.

- [4] T. R. Denninger, C. E. Cook, C. G. Chapman, T. McHenry, and C. A. Thigpen, "The Influence of Patient Choice of First Provider on Costs and Outcomes: Analysis From a Physical Therapy Patient Registry," *J. Orthop Sports Phys Ther*, vol. 48, no.2, pp. 63-71, Feb. 2018, doi: 10.2519/jospt.2018.7423.
- [5] I. Torjesen, "Self referral to physiotherapy for back pain reduces pressure in GP appointment," in *BMJ*, Feb. 2019. [Online]. Available: <https://pubmed.ncbi.nlm.nih.gov/30804045/>
- [6] F. Downie, C. McRitchie, W. Monteith, H. and Turner, "Physiotherapists as an alternative to a GP for musculoskeletal conditions: a 2-year service evaluation of UK primary care data," *Br J Gen Pract*, vol. 69, no. 682, pp. e314-e320, May 2019, doi: 10.3399/bjgp19X702245.
- [7] N. E. Foster, J. Hartvigsen, P. R. and Croft, "Taking responsibility for the early assessment and treatment for patients with musculoskeletal pain: a review and critical analysis," *Arthritis Res Ther*, vol. 14, no. 1, pp. 1-9, Feb. 2012, doi: 10.1186/ar3743.
- [8] Department of Health. *The Musculoskeletal Service Framework. A Joint responsibility: doing it differently.* (2006). [Online]. Available: http://webarchive.nationalarchives.gov.uk/20130124073659/http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4138412.pdf
- [9] F. Desmeules, J. S. Roy, J. C. MacDermid, F. Champagne, O. Hinse and L. J. Woodhouse, "Advanced practice physiotherapy in patients with musculoskeletal disorders: a systematic review," *BMC Musculoskelet Disord*, Jun. 2012. [Online]. Available: <https://pubmed.ncbi.nlm.nih.gov/22716771/>
- [10] Physio Austria. *Direct access to Physiotherapy - FAQ: DISCUSSION ABOUT THE POSSIBILITY OF A FUTURE WITHOUT REGULATION IN AUSTRIA.* (2017). [Online]. Available: https://www.physioaustria.at/system/files/general/directaccess-faqs_direktzugang_website_fin_august_2017.pdf
- [11] G. Eysenbach, "Improving the quality of Web surveys: the Checklist for Reporting Results of Internet E-Surveys (CHERRIES)," *J Med Internet Res*, Jul-Sept 2004. [Online]. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1550605/>
- [12] P. Mayring. *Qualitative Inhaltsanalyse - Grundlagen und Techniken.* BELTZ, 2013.