

2023 CAOT Pre-Budget Brief

The Canadian Association of Occupational Therapists (CAOT)

October 2022



Preventing falls



Helping seniors age in place



Improving home and community care



Assisting children in classrooms



Supporting caregivers



Accelerating hospital discharge

OCCUPATIONAL THERAPY: CHANGING LIVES FOR THE BETTER



Increasing accessibility



Managing chronic illnesses



Alleviating chronic pain



Improving mental health outcomes



Ensuring fitness to drive



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OCCUPATIONAL THERAPY DURING AND POST COVID-19 Summary of Recommendations

Recommendation # 1: Address vulnerabilities in long-term care (LTC) by implementing enhanced national long-term care standards that include regulated health professionals, such as occupational therapists (OTs).

Recommendation #2: Implement an aging in place strategy that scales up investments in home and community and includes OTs on all primary care teams across Canada.

Recommendation #3: Recognize OTs as mental health service providers in urban, rural, remote, and Indigenous communities. Increase funding for occupational therapy in the Public Service Health Care Plan (PSHCP) and in Indigenous Services Canada's (ISC) programs.

Recommendation #4: Include OT in health care plans.

“As occupational therapists, we have the resources and knowledge to cope in the presence of uncertainty; choose healthy occupations that contribute to our self-care and the wellbeing of our families; foster interpersonal connections and a sense of belonging; find new ways to fulfil important roles; and discover occupations that can provide structure, routine, and meaning within our disrupted lives. We have the opportunity to contribute to our nation’s wellbeing by sharing what we know with others.”

–Hammell, K.W. (2020)

INTRODUCTION

The COVID-19 pandemic has resulted in disruption to everyday lives due to illness, social isolation, restricted mobility, and changes to work and school arrangements, causing significant stress on the physical and mental health of Canadians.

The cost to the country has been great:

- 44,000 Canadians have died from COVID-19 (Government of Canada, 2022)
- LTC residents accounted for 4% of all COVID-19 cases and 43% of COVID-19 deaths (National Institute on Ageing [NIA], 2022)
- 77% of adults have reported feeling negative emotions (Canadian Mental Health Association [CMHA], 2021)
- 6 in 10 Indigenous people reported that their mental health has worsened (Statistics Canada, 2021)
- 1 in 10 Canadians experienced thoughts or feelings of suicide (CMHA, 2020)
- 10-20% of individuals experience a variety of mid- to long-term effects after recovering from an initial COVID-19 infection (World Health Organization [WHO], 2021); however, current research suggests that the figure could be as high as 50% (Osman, 2022).
- Absenteeism rates continue at a higher level as compared to pre-pandemic rates, with total lost days per worker in 2021 at 14.9 in the public sector and 9.8 in the private sector (Statistics Canada, 2022)

Given that OTs' scope of practice focuses on physical, mental, emotional, and spiritual wellbeing, they can contribute low-cost high-impact solutions to the major challenges facing Canada's health care system, including LTC, supporting seniors to age in place, addressing the mental health crisis, increasing productivity by facilitating return-to-work, and providing supports for individuals experiencing long COVID.

Occupational therapy is one of the professional categories wherein the demand will exceed supply between 2019 and 2028 (Government of Canada, 2021). Considering the Health Human Resources (HHR) crisis, the recognition and optimization of OTs' scope of practice is paramount to ensuring that Canadians have access to both physical and mental health care services.

Below are four recommendations that outline how the Government of Canada can continue to "build back better" and how OTs can contribute to economic recovery and increase the resiliency of Canada's health system. According to "Closing the Gaps: Advancing Emergency Preparedness, Response and Recovery for Older Adults" by the NIA and the Canadian Red Cross (2020), OTs are pivotal to emergency preparedness, response, and recovery for older adults across Canada.

Recommendation # 1: Address vulnerabilities in LTC by implementing enhanced national long-term care standards that include regulated health professionals, such as OTs.

Meet Amira: A formerly vibrant woman living in LTC, she watched with dread as COVID-19 claimed the lives of her friends. She then contracted the illness herself and spent weeks recovering. She now suffers both loss of function and depression. **She needs an Occupational Therapist.**

The Lancet characterized the LTC situation in Canada as a “national disgrace” (Webster, 2021). The federal government must take a leadership role by implementing enhanced national LTC standards with investments tied to positive outcome measures and include regulated professionals such as OTs. According to a Royal Society of Canada (2020) report on COVID-19 and LTC, 90% of direct care is provided by unregulated and unlicensed care aides or personal support workers, which does not address the complex medical needs of residents, leaving them vulnerable to COVID-19.

OTs bring a unique skill set suited to LTC needs and provide cost-effective services for individuals experiencing progressive functional and/or cognitive decline, including complex, chronic, or progressive illnesses. They assess older adults’ health and safety needs with families and interprofessional teams and design and implement customized plans so that seniors can enjoy the highest possible quality of life. OTs employ approaches that highlight individual abilities instead of restrictions, supporting individuals to restore or maintain function and independence using mobility devices, environmental modifications, mindfulness, goal setting, and activity routines. OTs facilitate socially inclusive environments that foster recreational, civic, cultural, leisure, and social activities that reduce social isolation.

OTs are accountable, qualified, and needed in LTC. Dr. Ben Mortenson (OT), who was selected to serve on the Health Standards Organization’s National Long-Term Care Services Standards Technical Committee, chaired by Dr. Samir Sinha, can contribute to much-needed national LTC services standards.

Recommendation #2: Implement an aging in place strategy that scales up investments in home and community and includes OTs on all primary care teams across Canada.

Meet Randall: A full-time caregiver for his mother (who had a stroke), does not want her in LTC. He wants her to be able to stay in her home but worries about the risk of falls. **They need an Occupational Therapist.**

OTs are the most comprehensive and cost-effective providers of home and community care that enable seniors to age in place. Ninety-one percent of Canadians of all ages – and almost 100% of Canadians 65 years of age and older – report that they plan on living independently in their own homes (NIA, 2020). A critical shift is needed in how Canada's health care system responds to aging seniors (expected to grow by 68% in the next 20 years – CIHI, 2021). OTs need to be part of all primary care teams as they are adept at managing chronic and complex medical conditions and assessing the housing needs of seniors who want to age at home.

Seniors aging in place is a cost-effective alternative to LTC and alternate levels of care (ALC) in hospitals. Home care is one third the price of institutional LTC, and hospital care is 20 times more expensive than providing the same services through home care (Ageing Well, 2020). The Government of Canada must develop an **Aging in Place Strategy** and invest in home and community care to provide seniors the necessary supports at home – while freeing up LTC for those who need it most and accruing cost savings for the health care system. OT interventions related to housing can postpone entry into residential care, saving up to \$48,000 per year per person (Laing & Buisson, 2008). OTs recommend fit and evaluate assistive technologies, such as wheelchairs, grab bars, and bathroom fixtures, to assist seniors experiencing physical and cognitive challenges. They also help maintain/improve an individual's mobility and functioning, and enhance their safety, accessibility, and independence in the home.

OTs and occupational therapy assistants (OTAs) are a crucial part of the work force and should be an important component of an Aging in Place Strategy. Marnie Courage (OT) serves on the Accessible Standards Canada's Technical Committee on Outdoor Spaces, as well as the Canadian Standards Association Technical Sub-Committee, charged with developing standards for accessible housing.

Recommendation #3: Recognize OTs as mental health service providers in urban, rural, remote, and Indigenous communities. Increase funding for occupational therapy in the Public Service Health Care Plan (PSHCP) and in Indigenous Services Canada's (ISC) programs.

Meet Rachel: She lost her mother and her job to COVID-19 in the same month. She has fallen into a deep depression and cannot get out of bed. She is on a five-month waiting list to see a psychiatrist and cannot wait that long to get help. **She needs an Occupational Therapist.**

OTs are mental health care providers skilled at addressing physical, emotional, environmental health issues, trauma, Post Traumatic Stress Disorder (PTSD) and the disruption caused by COVID-19.

COVID-19 has exacted a significant toll on the mental health of Canadians with over 50% indicating that their mental health has declined since March 2019 (CMHA, 2021). This will continue as the economic ramifications, changes in daily routines, increased responsibilities like homeschooling, working online from home, symptoms of long COVID, and delayed health care procedures continue to stress the lives of Canadians. CMHA has called the impact of the pandemic on mental health an "echo pandemic." Canadians need access to timely, equitable, inclusive, and affordable mental health care. The Government of Canada, along with its provincial and territorial partners, must take immediate action to recognize ALL regulated health professionals for their full scope of practice, including OTs, and establish a much-needed Mental Health Transfer.

OTs provide mental health support to Indigenous communities on reserve. Despite the abject need for mental health providers north of 60, OTs are excluded from ISC's list of mental health providers. This reduces access to necessary holistic mental health services and supports, as OTs are experts in helping clients manage significant life disruptions and supporting them to thrive in life. OTs provide trauma-informed and culturally safe therapeutic interventions in Indigenous communities, facilitate cognitive behavioural therapy (CBT), support individuals with developmental disabilities, and support individuals with long COVID. They teach practical ways to cope with anxiety, PTSD, depression, and help clients implement short- and long-term goals to return to daily routines.

Recommendation #4: Include OT in health care plans.

Meet Roger: An executive working long hours until COVID-19 forced his company to furlough him, he is feeling aimless and anxious, and coping with alcohol. Now his company is calling him back to work and he is worried about experiencing panic attacks on the job. **He needs an Occupational Therapist.**

OTs are experts in developing and implementing return-to-work plans that address both physical and emotional wellbeing.

Employers and employees alike are grappling with managing ever-changing workplace protocols, fear of COVID-19, balancing changes to their home situation and for some, experiencing long COVID symptoms. Even prior to COVID-19, the burden of absenteeism on the Canadian economy was \$16.6B annually (Conference Board of Canada, 2013). Work absences per worker/year has increased since pre-pandemic days, with the total lost days per worker in 2021 at 14.9 in the public sector and 9.8 in the private sector (Statistics Canada, 2022). These numbers will likely remain consistent as Canadians struggle to recover from the mental, emotional, and physical effects of COVID-19.

Upwards of 30% of people diagnosed with COVID-19 will not return to their previous level of health 14-21 days after a positive COVID-19 test, leaving them with long COVID symptoms (Greenhalgh et al., 2020). Such symptoms can include physical function problems, shortness of breath, brain fog, fatigue, headaches, dizziness, and mental health issues (John Hopkins Medicine, 2021). According to the WHO (2022), people with long COVID may have difficulty functioning in everyday life, which impacts their ability to perform daily activities, such as work or household chores.

OTs are uniquely positioned to rehabilitate those suffering from long COVID through individualized programs that facilitate improvement in function and support a therapeutic and safe pathway for returning to work. OTs have been recognized in the United States and in the UK as integral members of the interdisciplinary health teams treating long COVID (Vanichkachorn et al., 2021, John Hopkins Medicine, 2021, Parkin et al., 2021).

Unfortunately, OT services are not available or adequately covered under most health benefits' plans, and Canadians are left without access to health care services that would support a safe return to work.



Conclusion

OTs support Canadians across the lifespan, through chronic or episodic conditions, including both physical and mental health. CAOT is ready to support and collaborate with the Government of Canada in its post-pandemic recovery to ensure that all Canadians can experience optimal health and wellbeing.

You may reach our CEO, H el ene Sabourin, at hsabourin@caot.ca.

About CAOT

CAOT is the national organization that supports more than 20,000 OTs, OTAs, and students who work or study in Canada.

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