

# 2021 Pre-Budget Consultation Brief

Submitted to the Standing Committee on Finance  
From: Canadian Association of Occupational Therapists  
[www.caot.ca](http://www.caot.ca)



Preventing falls



Helping seniors age in place



Improving home and community care



Delaying hospital admission



Supporting caregivers



Accelerating hospital discharge



Increasing accessibility

## OCCUPATIONAL THERAPY: CHANGING LIVES FOR THE BETTER



Managing chronic illnesses



Alleviating chronic pain



Improving mental health outcomes



Ensuring fitness to drive



**CAOT - ACE**

Canadian Association of Occupational Therapists  
Association canadienne des ergothérapeutes

Canadian Association of Occupational Therapists  
100-34 Colonnade Road, Ottawa, ON K2E 7J6 Canada  
(613) 523 -2268 or (800) 434-2268

## OCCUPATIONAL THERAPY DURING AND POST COVID-19

### Summary of Recommendations

**Recommendation # 1:** Immediately address vulnerabilities in Long Term Care (LTC) by ensuring an adequate work force that includes full-time occupational therapists in every long-term care home.

**Recommendation #2:** Prioritize and invest in an “aging in place” strategy that includes occupational therapists as part of home and community care.

**Recommendation #3:** Recognize occupational therapists as mental health service providers in urban, rural, remote and Indigenous communities.

**Recommendation #4:** Include occupational therapy interventions as part of return-to-work strategies post COVID-19.

## INTRODUCTION

The June 25th, 2020 issue of the Globe and Mail stated that, according to the Canadian Institute for Health Information (CIHI), “over 80 per cent of Canada's known COVID-19 deaths were in residents of nursing or retirement homes as of May 25, nearly double the average for countries in the Organization for Economic Co-operation and Development.”

The May 20th, 2020 Canadian Armed Forces (CAF) report on the state of five Ontario long-term care homes was characterized by Prime Minister Justin Trudeau as “deeply disturbing.” André Picard, in his opinion piece in the May 27th, 2020 issue of the Globe & Mail stated that “CAF observations are a sickening litany of abuse.” He goes on to emphasize that “the problems are well known and so are the solutions. We need an adequate, properly trained work force.”

Occupational therapists (OTs) are a vital part of that work force and provide solutions for both physical and mental health during and post COVID-19 phases of the pandemic. OTs are regulated health professionals working on the front lines in the fight against COVID-19, alongside doctors, nurses and other allied health professionals across the continuum of health care, in hospitals, primary care teams and long term care (LTC). OTs have and will continue to help Canadians during the acute phases of COVID-19 and throughout the long road of rehabilitation to recovery. OTs help keep people out of hospitals and LTC and in their homes by helping individuals manage multiple and progressive chronic conditions and pain, supporting activities of daily living, adapting living environments to promote safety and accessibility, supporting caregivers and restoring/maintaining independent functioning.

**Recommendation # 1:** Immediately address vulnerabilities in LTC homes by ensuring an adequate work force that includes full-time occupational therapists and occupational therapy assistants in every long-term care home.

**Meet Amira:** A formerly vibrant woman living in long term care, 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 OT.

COVID-19 has exposed the deadly gaps in health care when it comes to the health of Canada's seniors in long-term care. As patient-centred, regulated professionals, OTs are part of a qualified workforce that provide the level of care needed for individuals with multiple co-morbidities and who are experiencing progressive functional and/or cognitive decline. OTs are educated to meet seniors' physical and psychosocial needs throughout the aging process and especially in the presence of complex, chronic, or progressive illnesses. They assess older adults' health and safety needs in collaboration with family and interprofessional team members and design and implement plans to support seniors to enjoy the highest quality of life possible, based on their daily activities. OTs are the only members of health care teams that focus on the fit between the environment (i.e. care facility or private home) and the person's strengths and abilities. They employ an approach to client care that highlights their abilities, enabling individuals to restore or maintain functional abilities and independence, and adapt to cognitive or functional decline through mobility devices, environmental modifications, and activity routines. OTs help facilitate socially inclusive environments that foster recreational, civic, cultural, leisure and social activities that reduce social isolation. As regulated health professionals, OTs are accountable, qualified, and needed in LTC. There needs to be a full-time OT in every LTC home.

**Recommendation #2:** Prioritize and invest in an "aging in place" strategy that includes occupational therapists as part of home and community care.

**Meet Randall:** A full-time caregiver for his mother who had a stroke, he placed his mother's name on a waitlist for LTC when the reports of outbreaks of COVID-19 in LTC made him pause. He now wants her to be able to stay in her home but worries about the risk of her falling. They need an OT.

### **Aging in Place**

Given the current state of LTC in Canada, where vulnerable seniors are housed in congregant settings with inadequate space, staff shortages, and lack of training in COVID protocols, enabling seniors to age in place in their homes and communities has become critical for their health and well-being. OTs and occupational therapy assistants (OTAs) are a crucial part of the work force that can make it possible for seniors to age in place. CIHI identified 1 in 3 seniors for whom appropriate home and community-based support could delay LTC admission (Seniors in Transition, 2017). The Government of Canada must urgently lead in the development of an **Aging in Place Strategy** and invest in home and community care in order to provide seniors the supports they need to age in place in the comfort, safety and dignity of their own homes. This, in turn, will allow the 30% of seniors who would otherwise be in LTC to age at home, freeing up LTC for those who need it most. This will accrue significant cost savings for the health care system as Canada's population continues to rapidly age.

To enable aging in place, a qualified work force is essential across the continuum of care. Occupational therapists are an essential part of that work force. OTs bring an expert perspective to accessibility, safety, and function so that Canadians can stay home longer and safer. OTs recommend, fit, and evaluate assistive technologies such as wheelchairs, grab bars, and bathroom fixtures to assist seniors experiencing physical, sensory and cognitive challenges; helping maintain/improve the individual's mobility, functioning and independence in the home. OTs make seniors homes safe, functional, and aesthetically pleasing through collaboration with industry partners and provision of advice on customized structural modifications to design living spaces and layouts.

Occupational therapy interventions related to housing can postpone entry into residential care, saving up to \$48,000 per year per person (Laing & Buisson, 2008). Additionally, home modifications resulting from occupational therapy assessments can prevent 31% of falls in the home (Kruse et al., 2010) which are often precursors to hospitalization and entry into LTC. OTs assess and recommend accessibility features in the home that take into account current and future needs. For example, they will assess an individual with early onset dementia and recommend features in the home that will help prevent wandering, confusion, and falls. OTs also support caregivers with skills training for assisting with activities of daily living such as dressing, food preparation and eating, behavioural management and avoiding burnout.

“ *Home modifications resulting from occupational therapy assessments can prevent 31% of falls in the home (Kruse et al., 2010)* ”

Scaling up OTs and OTAs as part of an aging in place strategy is therefore crucial to allowing the 30% of seniors who are able to age in place with adequate supports to do so, and to free up LTC beds for those who have the highest needs.

**Recommendation #3:** Recognize occupational therapists as mental health service providers in urban, rural, remote and Indigenous communities.

**Meet Rachel:** She lost her job and her mother to COVID-19 in the same month. She's fallen into a deep depression and can't get out of bed. She is on a waiting list to see a psychiatrist that's estimated at five months long. She feels she can't wait that long to get help. She needs an OT.

COVID-19 has exacted a significant toll on the mental health of Canadians with over half of Canadians saying their mental health has declined since March. This will be ongoing as the economic ramifications, changes in daily routines, new roles (e.g., homeschooling, new processes in the workplace) and delayed health care continue to disrupt the lives of Canadians. The Mental Health Commission of Canada (MHCC) has called it an “echo pandemic” of mental health. To manage the scale of current mental health needs, and to better prepare for a second or third wave, the Government of Canada needs ALL regulated health professionals to be recognized and utilized to their full scope of practice.

Unfortunately, access to mental health services through occupational therapists is limited by a lack of funding coverage in health benefit plans, including the Government of Canada’s Public Service Health Care Plan (PSHCP), where occupational therapy is excluded. This is despite psychological health challenges now accounting for more than half (52%) of all approved disability claims in the federal public service; and overall in Canada, 30% of disability claims being attributed to mental illness, with depression the leading cause (Office of the Ombudsman for Mental Health and Employee Well-being, 2020), **before** COVID-19.



*(52%) of all approved disability claims in the federal public service; and overall in Canada, 30% of disability claims being attributed to mental illness, with depression the leading cause (Office of the Ombudsman for Mental Health and Employee Well-being, 2020)*



Occupational therapists also provide significant mental health support to Indigenous communities on-reserve. Despite the abject need for mental health providers north of 60, OTs are excluded from the list of mental health providers at Indigenous Services Canada. This is an oversight that reduces access to the holistic mental health support; OTs are experts in helping clients manage significant life disruptions and enabling them to thrive in life. With a focus on engaging in daily activities (occupations), OTs provide trauma-informed and culturally safe therapeutic interventions, facilitate cognitive behavioral therapy (CBT), teach practical ways to cope with anxiety, PTSD, depression



and dysregulated routines, and help clients implement short-term and long-term goals to return to daily routines and activities. OTs help:

- Seniors in LTC with mental health and physical co-morbidities
- Individuals with substance abuse disorders in shelters
- Indigenous communities
- Workers struggling with return-to-work directives
- Children coping with the loss of routine and structure
- Individuals with developmental disabilities

It is therefore critical that OTs be recognized for their full scope of practice which includes mental health services, and for those interventions to be accessible to Canadians through coverage, particularly in the PSHCP and Indigenous Services Canada.

**Recommendation #4:** Include occupational therapy interventions as part of return-to-work strategies post COVID-19.

**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 suffering a panic attack on the job. He needs an OT.

As restrictions begin to ease, and Canadians return to work, employers and employees alike are grappling with managing new workplace protocols, fear of COVID-19, and changes to their home situation. Even before COVID-19, the burden of absenteeism on the Canadian economy was high, with the Conference Board of Canada indicating that absenteeism costs the economy \$16.6B annually (Conference Board of Canada, 2016). Given the disruption of the pandemic and its mental health impact, it is anticipated that absenteeism will rise. Occupational therapy is a low cost, high impact solution for employers seeking to help transition individuals back to work, particularly those impacted by physical and/or mental illness. OTs assess an individual's functional capacity following a life change and provide solutions for integration back to work while keeping in mind



the needs of the employer and employee. OT (as an adjuvant to "treatment as usual") is shown to increase long-term depression recovery and long-term return to work in employees with major depression (Hees et al., 2013). Having an OT on an interdisciplinary team can accelerate return to work, and reduce disability payouts, leading to a more productive team and lower costs for the employer.



*Occupational therapy (as an adjuvant to "treatment as usual") is shown to increase long-term depression recovery and long-term return to work in employees with major depression (Hees et al., 2013)*



## **Conclusion**

Occupational therapists support Canadians across the lifespan, through chronic or episodic conditions, and help support the mental health needs of a population reeling from the disruption of COVID-19. They are needed more than ever to help Canadians return to health and well-being. It is time to act now and recognize OTs for their full scope of practice. The Canadian Association of Occupational Therapists (CAOT) is ready to support the Government of Canada in post-pandemic planning, LTC reform, and help seniors age in place while enjoying positive health and wellness outcomes. You may reach our CEO, H el ene Sabourin, at [hsabourin@caot.ca](mailto:hsabourin@caot.ca)

## **About**

The Canadian Association of Occupational Therapists (CAOT) represents over 18,000 occupational therapists across Canada.



**CAOT - ACE**

Canadian Association of Occupational Therapists  
Association canadienne des ergothérapeutes

## References

Canadian Institute for Health Information. Seniors in Transition: Exploring Pathways Across the Care Continuum. Ottawa, ON: CIHI; 2017.

Grant, K. (2020, June 25). 81% of COVID-19 deaths in Canada were in long-term care – nearly double OECD average. Retrieved June 30, 2020, from <https://www.theglobeandmail.com/canada/article-new-data-show-canada-ranks-among-worlds-worst-for-ltc-deaths/>

Gurney, M. (2020, May 14). COVID-19: Read the Canadian Forces report on long-term care. Retrieved from <https://www.tvos.org/article/covid-19-read-the-canadian-forces-report-on-long-term-care>

Branch, C. A. (2020, January 23). The Office of the Ombudsman for Mental Health and Employee Well-Being. Retrieved from <https://www.ic.gc.ca/eic/site/113.nsf/eng/07667.html#a21>

Hees, H. L., de Vries, G., Koeter, M. W., & Schene, A. H. (2013). Adjuvant occupational therapy improves long-term depression recovery and return-to-work in good health in sick-listed employees with major depression: results of a randomised controlled trial. *Occupational and environmental medicine*, 70(4), 252–260. <https://doi.org/10.1136/oemed-2012-100789>