

March 27, 2020

Patrick Dicerni Assistant Deputy Minister and Executive Officer, Drugs and Devices 438 University Ave, Toronto, ON M7A 1N3

Delivered by email

Dear Mr. Dicerni,

I am writing on behalf of the members of the Ontario Society of Occupational Therapists who are over 4300 registered occupational therapists working hard to support our province's health system to manage through this extraordinary pandemic period. **Occupational therapists have grave concerns about this week's notice of closure of the province's Assistive Devices Program (ADP).**

Our concern is that this move severely compromises authorizers' (occupational therapists and others) ability to contribute to the patient flow so necessary at these times to reduce strain on our hospitals. The inability to keep access to necessary mobility and other equipment that is critical to patients' safe discharge and ability to manage or be managed safely at home is inconsistent with the essential nature of the work that therapists are performing daily to keep the system moving.

Authorizers for assistive devices applications were notified of the ADP's closure on Tuesday March 24, 2020. With no prior warning or engagement of stakeholders such as the health professional associations, vendors or manufacturers, this news was received as both a shock and an affront to the efforts of frontline clinicians who are trying to respond responsibly to the expectations of essential services. On the one hand the Ministry is asking therapists to support system flow - to support expedited discharges from hospitals and to support Ontarians to be safe in their homes to avoid any unnecessary hospitalizations or ER visits. On the other hand, at the same time, a critical resource that supports occupational therapists to enable their clients' safe mobility and ability to manage at home is withdrawn.

ADP has communicated that no further applications will be received or processed until further notice. We raise the following concerns about the implications of this situation for your attention:

- To facilitate discharge for patients able to return home or to long-term care from acute care hospitals, access to appropriate seating and mobility systems for those with mobility needs is critical. Closure of ADP will delay the capacity for timely discharges which is so critical at this point in time as hospitals prepare for surge patients relating to COVID-19.
- Clients living in the community who are in need of mobility equipment upgrades or new equipment as a result of functional decline will be put at increased risk of falls, pressure injuries,

and functional dependence as a result of delays in access to appropriate equipment. This can result in increased demand on emergency departments and acute care, and will increase demands on home and community care nursing and PSW resources.

- In Long-Term Care Homes, seating and mobility equipment is essential to reduce the risk of falls and injury, to provide safe, independent mobility, and to reduce the risk of injuries should a resident transfer independently and unsafely. The seating and mobility equipment in LTC is essential to prevent/treat pressure and shearing wounds and provide appropriate positioning to facilitate swallowing and prevent aspiration. LTC facilities do not have reservoirs of appropriate equipment that can be loaned to meet individual resident needs. Without the appropriate seating and mobility equipment, residents will be consigned to remain in bed and at risk for the secondary complications of being bedridden; wounds, contractures, aspiration pneumonia, deconditioning.
- We understand that vendors have little product available for loan and that manufacturers will be concerned about extended periods of non-payment. Access to loan/rental equipment is a real concern and there has been no coordinated pre-planning to explore options in this regard.
- Vendor payment expectations are reportedly variable at this time. Some are prepared to move forward to provide equipment with the patient paying only the 25% they would pay for an ADP approved device, but understandably, most vendors are not in a position to extend equipment without full payment in a situation where ADP support is not confirmed.
- Average costs of wheelchairs are in the range of \$3200 \$5000 and rollators to promote safe ambulation are in the range of \$332 - \$420. Many of the patients for whom these devices are appropriate do not have the means to support the full cost of equipment. **Without being able to pay, patient access to necessary mobility devices is restrained.**
- While we express most pressing concern for the present situation, ADP's closure creates a much longer impact on access to necessary assistive devices. Currently, it is not uncommon for patients to wait 3 – 7 months for funding approvals from ADP. The anticipated backlog resulting from this recent closure will create further future complications for health care.

While we understand and support the need to protect the safety of our Ministry workforce, the abrupt nature of this closure with no stakeholder consultation leaves the system, and more importantly, our patients, vulnerable. Ironically, this situation gives good evidence to the need to modernize the ADP system and to move to more digital solutions to support eligibility reviews and funding approvals. It is unclear why some elements of application review processes cannot proceed with safe practices of social distancing as in other areas of essential service.

Ontario occupational therapists continue to work to identify essential services that support the health and well-being of Ontarians. While it is likely that the demand for seating and mobility assessments may be reduced somewhat over the foreseeable future, we know that our members' role in helping the health system manage this pandemic will demand some attention to access to seating and mobility devices. We request an opportunity to work collaboratively with the Ministry and other stakeholders to address this issue for the immediate short term and the longer term as we anticipate the resulting backlog of applications will leave the system in arrears for a long time.

We write on behalf of our members and voice their concerns, but this voice is expressed in the interest of the Ontarians occupational therapists serve. We believe they deserve attention to alternate planning for access to ADP funding during this difficult time.

Sincerely,

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Christie Brenchley Executive Director

cc. David Schachow, Director, Drug Program Delivery Branch
Ian Lowe, Program Manager (Acting) Assistive Devices Program
Brian Pollard, Assistant Deputy Minister, Long-Term Care Operations Division
Amy Olmstead, Director, Home and Community Care Branch



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