

Executive Summary

- The burden of arthritis is increasing (the number of people with arthritis is expected to increase by 50% by 2020) and there are problems accessing timely, appropriate care; limited health human resources are exacerbating issues of access.
- Primary care physicians acknowledge limitations in their skill in managing arthritis and musculoskeletal disease; specialists such as orthopaedic surgeons see large numbers of people who require conservative management and who do not go on to have surgery.
- Health professionals, such as physiotherapists, occupational therapists and nurses with advanced skills and training, who work in advanced or extended practice within an interdisciplinary team, have the potential to facilitate timely and appropriate access to the right provider for people with arthritis and musculoskeletal conditions.
- In Ontario and Canada in general, models of care using advanced practitioners (AP) and extended role practitioners (ERP) have been developed and implemented for isolated aspects of care without considering the continuum of care. Future models need: 1) to reflect the continuum of care; 2) to include the patient as an active partner in their care with the health team; and, 3) supportive community and health system policies and resources to facilitate the desired good outcomes for patients (and the system).
- Components of the AP/ERP role include: facilitation of system navigation for the patient; assessment; screening; triage and referral; monitoring including ongoing management and follow-up; education of patients and health professionals; and, program evaluation. AP/ERPs need to function within a truly integrated health care system that allows immediate access to care for patients who are beyond the management domain of the AP/ERP.
- Utilization of AP/ERPs in primary care for patients with musculoskeletal complaints and throughout the continuum of care for people with all types and severity of arthritis has the potential to improve access to care by the right provider and ultimately improve patient and system level outcomes.
- Issues related to the implementation of advanced or extended practice roles will likely differ depending on the point of the continuum of care, context (e.g., community versus hospital setting; urban versus rural or remote etc.) and the stakeholder. Evidence from process and outcome evaluation is critical to understanding and supporting the successful implementation and evolution of practice roles and models of care.