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# Tech Is Changing Physical Therapy Treatment, but We Still Need a Human Touch

By combining in-home and virtual care, we can meet patients literally where they are. More importantly, we can improve outcomes, reduce costs and help patients get back to a normal life while giving therapists the flexibility and opportunity to provide more customized care for their patients.

By NADINE BOOYSEN

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Delivering care, helping patients change behaviors and managing a busy schedule has always been a challenge for Physical Therapists (PTs), leading to burnout and high turnover. Unfortunately, many of the safety restrictions during Covid-19 hindered the ability for practitioners to work directly with patients. This combination of challenges highlights some of the systemic issues with how treatment is delivered today. I believe we can learn from what were stop-gap approaches during the pandemic, and use that experience to improve patient outcomes and address staffing issues facing musculoskeletal (MSK) treatment today.

I know from my career researching in this field and working with PTs daily that our specialty has particular challenges that lead to burnout. [Compassion fatigue](#), overwhelming exhaustion and a lack of accomplishment can drive this sense of frustration, and it has long been recognized that [burnout disproportionately affects individuals](#) who spend greater amounts of time in direct patient care.

The problem is so bad post-pandemic that [WebPT's 2022](#) survey found that

“more than a third of the industry workforce reports employee burnout with high patient workloads and long work hours cited as the top reasons.” The survey also found that patient volume soared to 20 patients per therapist per day in some practice settings during the pandemic period and more than 2/3rds of the workforce is considering a career move.

To help address this issue, employees ranked the most important factors that would drive them to take a new job: improved work-life balance, company culture, and income stability were the top three factors. More control over work schedules was a core need – 28.7% of participants say “[I’d Like More Flexibility in My Work Schedule](#).” So how can we improve flexibility for care delivery?

## **Covid opens up telehealth**

When Covid-19 spread across the globe, our global health care system reacted quickly as hospitals and clinicians implemented new safety protocols and rushed to prepare for an influx of patients. Non-urgent surgeries and treatments were delayed, and routine healthcare interactions shifted to video-based appointments.

About [44% of therapy professionals](#) reported using videoconferencing or virtual meeting software for the first time in 2020, and about half of therapy organizations started offering telehealth services. Public health requirements demanded this change, but the increased flexibility brought new benefits.

When first meeting with a patient, physical therapy requires assessing, explaining, and demonstrating correct exercises as therapists evaluate and educate patients. Once the treatment plan is established and explained to the patient, the second half of the role entails answering questions, addressing patient challenges, charting progress and encouraging compliance. While the first half of this engagement can be very hands-on, many of the requirements for the second half of this role transfer effectively to a telehealth delivery scenario. Therapists are still able to assess and advance treatment over time, reviewing

range of motion progress, while patients are learning and practicing exercises in a familiar home environment.

In [Outcomes of Telehealth Physical Therapy Provided Using Real-Time, Videoconferencing for Patients With Chronic Low Back Pain](#), Julie M. Fritz, PT, PhD, et al. surveyed telehealth PT participants, and found they reported significant improvement in lower back pain-related disability, pain intensity, pain interference, physical function, and sleep disturbance at 10- and 26-week follow-ups. The longitudinal study found that 56% of patients agreed that telehealth PT is more convenient than in-person PT and 76% of patients were satisfied with teletherapy overall.

### **Combining virtual with hands-on**

While we see a tremendous opportunity to help patients with teletherapy options, I don't want to discount the importance of in-person care for PT. There are few fields where the "laying on of hands" is more important than in physical therapy. Helping patients learn how to move differently to improve their long-term health is a very complicated process, and every patient is unique.

Unfortunately, only [30% of patients](#) who begin physical therapy adhere to their full care plan.

A [British Journal of Sports Medicine](#) study by Ivan Lin, et al. identified 11 recommendations for MSK pain care. Chief among them are the needs to ensure care is patient centered, assess psychosocial factors, undertake a physical examination, and use manual therapy only as an adjunct to other treatments.

Unfortunately, if providers are seeing a patient every 15 minutes, it's very challenging to assess and implement all of these recommendations – a challenge across the healthcare system. That's why I think it's also crucial that physical therapy incorporate one on one visits that promote an evidence-based approach, in a clinic setting or the patient's own home.

In-person one to one care also gives therapists the time to incorporate

psychosocial care, which is often foregone in clinics. An in-home format enables functional training and self-management tailored to the patient's home – patients can learn exercises in the same location and setting where they plan to perform prescribed exercises. Once patients are shown what they need to do in person, a telehealth virtual option can be very effective in promoting movement-based therapy, which is important for long-term outcomes.

## **How we can learn and grow**

Removing the challenges that push PTs out of the industry will take time, but the issue is more urgent than ever before. The U.S. Surgeon General issued an [Advisory](#) last year sounding the alarm on the dangers of provider burnout. The Surgeon General noted, “Confronting the long-standing drivers of burnout among our health workers must be a top national priority. And if we fail to act, we will place our nation's health at risk.”

While helping patients bend, walk, or even run again can be truly rewarding, physical therapy is also one of the most demanding fields for caregivers. It takes an enormous amount of time with patients before a PT starts to see progress. Just giving someone a pill doesn't work with physical therapy. But asking physical therapists to see up to 20 patients a day with little flexibility in location or schedule just contributes to more burnout.

It doesn't have to be this way. We have the opportunity to use what we've learned from the pandemic to reinvent how physical therapy is delivered. We can address job burnout by making it easier for physical therapists to use digital solutions. This will open up new options for how and where PTs deliver care, and improve the impact PTs can have for their patients. By combining in-home and virtual care, we can meet patients literally where they are. More importantly, we can improve outcomes, reduce costs and help patients get back to a normal life while giving therapists the flexibility and opportunity to provide more customized care for their patients.

*Photo: Liubomyr Vorona, Getty Images*

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Dr. Nadine Booyesen is the Chief Clinical Officer at [Kins](#) and creator of the Hip and Lower Limb Movement Screen.

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