

Enhancing Scope of Chiropractic Care in Ontario: Laboratory and Diagnostic Imaging Tests

Red Tape is a Pain in the Back

Patients who need laboratory or imaging tests to rule out conditions should not experience delays in care. These delays impact patient care due to unnecessary red tape and drive increased costs to the health system.

Currently, if a chiropractic patient requires laboratory or imaging tests, the patient must first be directed to their physician to fulfill test orders. The patient must then wait for the test results to be sent back to their chiropractor; leading to delays in care, unnecessary and costly physician visits, and longer physician wait times. This red tape is avoidable.

Ontario's chiropractors are educated in ordering laboratory and imaging tests. Since 2009, the Ontario Chiropractic Association, the Canadian Memorial Chiropractic College and the College of Chiropractors of Ontario have recommended that the Ministry of Health and Long-Term Care (MOHLTC) consider the enhanced safety, efficacy and public interest by enabling chiropractors to order 29 laboratory tests and 27 indications for imaging tests, supported by the chiropractic scope of practice.

Cutting Red Tape

Enhancing the scope of chiropractic care in Ontario through access to select laboratory and diagnostic imaging tests would:

- Generate \$15.1- 23.7 million dollars in annual savings as a result of eliminating avoidable visits to family physicians
- End the delays chiropractic patients who need imaging or laboratory tests currently experience
- Improve access to X-rays for patients in 64 communities without Independent Health Facilities largely in rural and remote areas
- Reduce wait times for primary care by eliminating avoidable visits to family physicians

Authority to order lab tests and diagnostic ultrasound can be implemented at no cost to the MOHLTC if they are paid for privately, as chiropractic care is largely funded now.

These benefits could be realized quickly and with minimal changes to existing legislation and regulations while having lasting impacts that improves patient care and eliminates the red tape.

About Ontario's Chiropractors

Chiropractic is an evidence-based, non-invasive, hands-on health care discipline that focuses on musculoskeletal conditions like neck, back and shoulder pain. Nearly 2.7 million patients in Ontario rely on chiropractic care every year.

Chiropractors are integrated into the Ontario health care system, taking a prominent role in the MOHLTC's musculoskeletal strategy, including:

- Leadership roles in over half of the Interprofessional Spine Assessment and Education Clinics (ISAECs) Practice Lead and Advance Practice Clinician positions
- In six of the seven Primary Care Low Back Pain programs
- As practitioners of family health teams, nurse practitioner-led clinics, community health centres and aboriginal health access centres

In the ISAEC program, there has been a 95% reduction in surgical consults and diagnostic imaging orders and 98% patient satisfaction and substantial increase in provider satisfaction.

Recommendations

The Ontario Chiropractic Association/Canadian Memorial Chiropractic College/College of Chiropractors of Ontario recommendations can be implemented by:

- 1. Adding chiropractors to the list of regulated health professionals in the *Laboratory and Specimen Collection Centre Licensing Act, 1990* that can request examinations of human specimen, for which human specimen centres are able to keep records, and for which specimen collection centres are able to process requests to examine human specimen;
- 2. Amending section 4 of the *Chiropractic Act, 1991* to ensure chiropractors can request advanced imaging tests;
- 3. Exempting chiropractors from the limitations on forms of energy available to them under the Regulated Health Professions Act, 1991;
- 4. Including chiropractors in the list of regulated health professionals able to prescribe imaging tests in the *Healing Arts Radiation Protection Act, 1990*;
- 5. Amending the *Public Hospitals Act* to add chiropractors to the list of health professionals eligible to refer out-patients for X-rays in specific hospitals (hospitals in communities without Independent Health Facilities) and the *Health Insurance Act* for those specific hospitals to bill OHIP for the associated fees. Alternatively, an amendment could be made to the *Public Hospitals Act* to enable the Minister to designate a hospital to provide community diagnostic services (similar to community laboratory services amendment passed but not yet enforced).