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FACTORS INFLUENCING INTERPROFESSIONAL PRACTICES OF PHYSIOTHERAPISTS WORKING IN PRIVATE SETTINGS WITH PEOPLE WITH LOW BACK PAIN: A QUALITATIVE STUDY

Perreault K.^{1,2}, Dionne C.E.^{1,2,3}, Morin D.^{2,4,5}, Rossignol M.^{6,7,8}

¹Centre for Interdisciplinary Research in Rehabilitation and Social Integration (CIRRS), Institut de Réadaptation en Déficience Physique de Québec, Québec City, Canada, ²Université Laval, Québec City, Canada, ³Unité de Recherche en Santé des Populations, Centre de Recherche FRSQ du Centre Hospitalier Affilié Universitaire de Québec, Québec City, Canada, ⁴Vieillessement, Centre de Recherche FRSQ du Centre Hospitalier Affilié Universitaire de Québec, Québec City, Canada, ⁵Institut Universitaire de Formation et de Recherche en Soins, Université de Lausanne, Lausanne, Switzerland, ⁶McGill University, Department of Epidemiology, Biostatistics and Occupational Health, Montréal, Canada, ⁷Université de Montréal, Département de Médecine Sociale et Préventive, Montréal, Canada, ⁸Direction de la Santé Publique de Montréal, Montréal, Canada

Purpose: Collaboration and interprofessional practices are highly valued in health systems everywhere, partly based on the rationale that they improve outcomes of care for people with complex health problems, such as low back pain. Research in the area of low back pain also supports the involvement of different health professionals in the interventions for people who present this condition. The aim of this study was to identify factors influencing the interprofessional practices of physiotherapists working in private settings with people with low back pain.

Relevance: Physiotherapists, like other health professionals, are encouraged to engage in interprofessional practices in their daily work. However, to date, very little is known of their interprofessional practices, especially in private settings. Understanding physiotherapists' interprofessional practices and their influencing factors will notably advance knowledge relating to the organisation of physiotherapy services for people with low back pain.

Participants: Participants in this study were 13 physiotherapists including 10 women and 3 men, having between 3 and 22 years of professional experience, and working in one of 10 regions of the Province of Quebec (Canada). In order to obtain maximal variation in the perspectives, participants were selected using a recruitment matrix including three criteria: duration of professional experience, work location, and physical proximity with other professionals.

Methods: This was a descriptive qualitative study using face-to-face semi-structured interviews as the main method of data collection. An interview guide was developed based on an evidence-derived frame of reference. Each interview lasted between 55 and 95 minutes and was transcribed verbatim.

Analysis: Qualitative analyses took the form of content analysis, encompassing data coding and general thematic regrouping. NVivo version 8 was used to assist data organisation and analysis.

Results: Multiple factors influencing the interprofessional practices of physiotherapists were identified. The main factors include the consulting person's health condition, the extent of knowledge on health professionals' roles and fields of practice, the proximity and availability of professional resources, as well as daily work schedules.

Conclusions: Our findings highlight the influence of multiple factors on physiotherapists' interprofessional practices, including professional practice and organisational issues. However, further research on the interprofessional practices of physiotherapists is still required. Research priorities targeting the views of other health professionals, as well as those of services users, would enhance our comprehension of interprofessional practices of physiotherapists.

Implications: This study provides new insights that improve our understanding of the interprofessional practices of physiotherapists working in private settings with people with low back pain, more specifically on the factors influencing these practices. Based on our findings, implementing changes such as improving current and future health professionals' knowledge of the fields and roles of other health professionals through training may contribute to positively influencing interprofessional practices.

Key-words: 1. Interprofessional practices 2. Private practice 3. Low back pain

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