# INPLASY

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## Contribution of Physiotherapy to Value-Based Care in Health: A Systematic Review

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#### ADMINISTRATIVE INFORMATION

Support - No financial support.

Review Stage at time of this submission - Preliminary searches.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202480029

**Amendments** - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 06 August 2024 and was last updated on 06 August 2024.

### **INTRODUCTION**

eview question / Objective The objective of this systematic review is to understand how physiotherapy contributes to improving the value of healthcare. Specific Objectives: Identify value-based healthcare models that include physiotherapy. Determine the types of conditions where value-based healthcare models are being used. Understand the role of physiotherapy in the healthcare model. Identify the most valued outcomes in these models (associated with value-based healthcare). These objectives aim to answer the initial question: How can physiotherapy contribute to the delivery of value-based healthcare?

**Rationale** Under current conditions, healthcare systems face the challenge of balancing the supply of services with the growing demand from the population. The aging population puts increased pressure on healthcare resources, such as hospital beds, equipment, and healthcare professionals, making it necessary to find solutions to help

mitigate the high costs of healthcare. The adoption of the value-based healthcare concept can be one of the solutions.

Physical therapy plays a fundamental role as an enhancer of functionality in value-based healthcare. By improving functional capacity and promoting patient independence, physical therapy contributes to more effective outcomes, reducing patient dependency and promoting functionality and inclusion in active life, as well as reducing reliance on other healthcare services. This integrated, patient-centered, and functionalitybased approach positions physical therapy as a key component in promoting quality and sustainable healthcare.

Value-based healthcare aims to provide treatments and services that are effective, safe, and yield positive outcomes for patients (Annaswamy et al., 2018). This involves delivering the necessary care to meet people's health needs while avoiding unnecessary or ineffective procedures. It is important to note that value-based healthcare does not mean cutting costs at the expense of patient quality or safety. On the contrary, it involves optimizing available resources to provide the maximum possible benefit (Porter & Lee, 2013).

**Condition being studied** Physiotherapy interventions include in healthcare models that aim to provide value-based care will be studied.

Physiotherapy can be used in various pathologies and in various situations: prevention, isolated or team treatment, in the education of users, in the pre-surgical, post-surgical or late rehabilitation phases. The types of interventions that create value in the health care provided will be identified.

#### **METHODS**

**Search strategy** The Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) protocol will be followed.

The search will be performed with the combination of terms – "value-based \*care" and (physiotherapy OR "physical therapy" OR rehabilitation)– will be consider in the electronic databases - PubMed, Web of Science and Scopus:

PubMed: (value-based \*care ([Title/Abstract]) AND (physiotherapy OR physical therapy OR rehabilitation) [Title/Abstract])

Web of Science: [(value-based \*care (Topic) AND (physiotherapy OR "physical therapy" OR rehabilitation) (Topic) ]

S c o p u s : (t i t l e - a b s - k e y (value-based \*care) AND title-abs-key (physiotherapy OR "physical therapy" OR rehabilitation)).

Articles in Portuguese or English will be used with no time limit.

**Participant or population** All articles describing new value-based healthcare models that include physical therapy, either as a standalone service or as part of a multidisciplinary team, for any type of pathology, will be included in this systematic review.

**Intervention** This systematic review will include value-based healthcare models that incorporate physical therapy, either as a standalone service or as part of a multidisciplinary team.

**Comparator** Will be carried out comparison between two programs, comparison with the usual program or adoption of an innovative model without comparison.

**Study designs to be included** Studies describing value-based care models that include physical therapy at any stage of the process, with any population and that present results will be included. These can be RCTs or descriptive studies of an implemented of a new care model.

**Eligibility criteria** It will be included in this systematic review all articles that describe new value-based healthcare models that include physical therapy, either alone or as part of a multidisciplinary team, for any type of pathology.

Exclusion criteria: Articles that describe valuebased healthcare models that do not include physical therapy, Articles that analyse only the usual care model, Descriptive or review articles, Studies that describe care models that include physiotherapy, but do not present results.

**Information sources** Articles will be used that include models that include physiotherapy in value-based healthcare from databases PubMed/ MEDLINE, Web of Science, and Scopus.

Main outcome(s) All results regarding the creation of value in healthcare will be included, both in reducing costs (example: length of stay, complications, readmission) and improving value for the patient (example: pain, satisfaction, quality of life).

**Data management** After defining the inclusion and exclusion criteria, the title and abstract will be read to identify the topic. When the abstract is not clear, the article will be read in full. The identified articles will be evaluated considering the previously defined criteria. If any doubts arise an extern researcher will carry out an independent review to clarify the inclusion or exclusion of the article.

Quality assessment / Risk of bias analysis Due to the heterogeneity of the studies, the methodological quality will be evaluated using a checklist used by Fernandes et al. (2022). This checklist uses six criteria to evaluate studies based on the assessment of study objectives, context, method, instruments used, results and limitations.

**Strategy of data synthesis** To summarize the information, two tables will be created:

a) identification of included and excluded studies and the reason for exclusion among the defined criteria,

b) to collect study data (Author/year, Country, Pathology, Care models, Physiotherapy Intervention, Comparison, Assessment instruments, Results for the institution and results for the patient).

**Subgroup analysis** Studies will be grouped according to the health model used, if justified.

Sensitivity analysis To carry out a sensitivity analysis, a scenario analysis will be carried out to

verify how the results vary under different set of input variables scenarios.

**Language restriction** Articles in Portuguese or English will be used.

Country(ies) involved Portugal.

**Keywords** Physiotherapy, value-based care, rehabilitation, intervention models, multidisciplinary team.

**Dissemination plans** Presentation at congresses, conferences, workshops and seminars and/or publication.

**Contributions of each author** 

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