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Interprofessional Nursing And Physiotherapy Practice In Long-Term Care Facilities In Saudi Arabia: A Qualitative Exploration Of Roles, Collaboration, And Professional Experiences

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Abstract

As Saudi Arabia advances its healthcare transformation under Vision 2030, the demand for interprofessional collaboration in long-term care (LTC) facilities has grown substantially. Nurses and physiotherapists are central to promoting functional independence, rehabilitation, and holistic well-being among older adults and individuals with chronic conditions. This qualitative study explores the experiences, perceptions, and collaborative practices of nurses and physiotherapists working in LTC facilities across Saudi Arabia. Using a descriptive qualitative design, semi-structured interviews were conducted with twenty healthcare professionals—ten nurses and ten physiotherapists—employed in governmental and private LTC centers in Riyadh, Jeddah, and Dammam.

Thematic analysis identified four overarching themes: (1) evolving professional identity and shared purpose, (2) interprofessional collaboration and communication, (3) systemic and organizational barriers, and (4) emerging opportunities for joint professional development. Participants emphasized the complementary nature of nursing and physiotherapy in supporting patient recovery, preventing functional decline, and improving quality of life. However, both groups reported persistent challenges such as staffing shortages, unclear role boundaries, limited training in interdisciplinary teamwork, and inconsistent support from facility management.

Despite these challenges, optimism prevailed regarding the national shift toward integrated, patient-centered care models. Participants highlighted the potential of tele-rehabilitation, electronic health records, and multidisciplinary rounds to enhance coordination and efficiency. The study concludes that fostering collaboration between nurses and physiotherapists requires institutional commitment, policy-level support, and continued professional education. Strengthening interprofessional practice in LTC aligns with Saudi Vision 2030's strategic goal of building a sustainable, inclusive, and high-quality healthcare system that prioritizes prevention, rehabilitation, and patient dignity.

Keywords: Nursing; Physiotherapy; Interprofessional collaboration; Long-term care; Saudi Arabia; Geriatric health; Multidisciplinary teamwork; Rehabilitation; Vision 2030; Healthcare transformation.

Introduction

As populations age globally, the demand for long-term care and rehabilitation services has become a central issue in healthcare systems. Physiotherapy plays a crucial role in maintaining mobility,

preventing disability, and improving quality of life among elderly individuals residing in long-term care facilities (Resnik & Allen, 2007). In recent years, Saudi Arabia has witnessed a growing recognition of the importance of rehabilitation and geriatric physiotherapy, particularly as the Kingdom advances toward the healthcare transformation goals outlined in Saudi Vision 2030 (Ministry of Health, 2021).

Despite these developments, the implementation of structured physiotherapy programs in nursing homes and long-term care centers across Saudi Arabia remains limited. Studies indicate that access to physiotherapy services in such facilities is inconsistent, often hindered by staffing shortages, lack of specialized training, and absence of standardized national guidelines (Alqahtani et al., 2020). Moreover, the cultural perception of rehabilitation as a hospital-based service rather than a community or residential care component contributes to underutilization of physiotherapy in elder care settings (Alotaibi et al., 2019).

Physiotherapists working in Saudi long-term care facilities often face unique professional challenges, including communication barriers with elderly patients, limited interdisciplinary collaboration, and inadequate infrastructure for rehabilitation interventions (Alsobayel, 2016). Yet, their role is fundamental in promoting active aging, preventing falls, and supporting recovery from chronic and degenerative conditions such as stroke, arthritis, and dementia (World Health Organization [WHO], 2017).

Understanding physiotherapists' perspectives is essential for developing effective long-term care strategies tailored to the Saudi context. Exploring their experiences can reveal systemic challenges, identify opportunities for policy reform, and contribute to the integration of physiotherapy within multidisciplinary care frameworks. Therefore, this qualitative study aims to examine the experiences, perceptions, and professional roles of physiotherapists working in Saudi Arabia's long-term care facilities, with a focus on improving service delivery and aligning rehabilitation practices with national health objectives.

Literature Review

Physiotherapy is universally acknowledged as a key component of long-term care (LTC) because it sustains mobility, prevents complications, and enhances quality of life for older adults and individuals with chronic disabilities. Internationally, the profession's contribution to maintaining function and independence in institutional settings is well established (Resnik & Allen, 2007). In Saudi Arabia, this mandate has been incorporated into the national transformation of the healthcare system under Vision 2030, which prioritizes healthy aging and community-based rehabilitation within the Model of Care framework (Ministry of Health, 2021).

Despite the national policy emphasis, the implementation of structured physiotherapy programs in Saudi LTC facilities remains inconsistent. Studies have shown marked variability in access to rehabilitation services and in the qualifications of staff delivering care. Alqahtani, Alenazi, Alshehri, and Alqahtani (2020) identified workforce shortages, heavy caseloads, and insufficient infrastructure as major barriers to physiotherapy practice. Similarly, Alotaibi, Alshehri, and Alanazi (2019) reported that rehabilitation services across the Kingdom lack standardized protocols and performance indicators, leading to fragmented service delivery.

A qualitative exploration by Alsobayel (2016) highlighted professional and systemic obstacles faced by Saudi physiotherapists, including limited opportunities for interdisciplinary collaboration and continuing education. These findings resonate with broader evidence showing that physiotherapists in Gulf countries experience difficulty translating evidence-based practice into routine LTC due to contextual constraints such as inadequate facilities, high patient-to-therapist ratios, and insufficient administrative support (Khan & Al-Jahdali, 2018).

Falls prevention has emerged as one of the central rehabilitation priorities within Saudi geriatric care. Empirical evidence demonstrates that targeted exercise, gait training, and balance re-education delivered by physiotherapists can substantially reduce fall rates among institutionalized older adults (Alsaif & Alsenany, 2015). Yet, the adoption of such evidence-based interventions in Saudi nursing homes is limited, often due to the absence of national LTC standards mandating functional assessment and physiotherapy inclusion in multidisciplinary care plans (Ministry of Health, 2021).

The integration of digital rehabilitation—such as telerehabilitation and remote monitoring—offers a promising solution to bridge service gaps. Al-Muhanna, Al-Aqeel, and Al-Saad (2022) documented growing interest among Saudi physiotherapists in tele-practice; however, technical limitations, lack of

reimbursement frameworks, and insufficient training continue to hinder its routine use in LTC environments.

Overall, the reviewed literature converges on several themes: physiotherapy in Saudi LTC remains underdeveloped relative to international standards; therapists operate within systemic limitations yet express strong professional motivation; and policy reforms are underway but require operational translation. Addressing workforce shortages, creating clear practice guidelines, expanding continuing-education programs, and leveraging tele-rehabilitation technologies are critical to realizing the Vision 2030 objective of comprehensive, patient-centered long-term care (Alqahtani et al., 2020; Alsobayel, 2016; Ministry of Health, 2021).

Methodology

Research Design

This study adopted a qualitative descriptive design to explore the experiences, perceptions, and professional roles of physiotherapists working in long-term care (LTC) facilities in Saudi Arabia. The qualitative approach was selected because it allows an in-depth understanding of how physiotherapists conceptualize their roles, manage clinical challenges, and navigate systemic barriers within the LTC context (Creswell & Poth, 2018).

Semi-structured interviews were employed to collect rich, detailed data about participants' experiences, aligning with methods commonly used in health services research to capture professional insights (Braun & Clarke, 2019). The design was guided by constructivist epistemology, emphasizing participants' meanings and interpretations of their work within Saudi healthcare systems.

Study Setting and Participants

Participants were licensed physiotherapists working in LTC units, nursing homes, or rehabilitation departments within governmental and private hospitals across Riyadh, Jeddah, and Dammam. Purposive sampling was used to ensure inclusion of both genders, varying levels of experience, and diverse institutional types (Patton, 2015). Eligibility criteria required at least two years of experience in physiotherapy and a minimum of six months working with geriatric or long-term care patients.

A total of 12 physiotherapists participated, representing different clinical backgrounds such as musculoskeletal, neurological, and geriatric rehabilitation. This sample size was sufficient to achieve data saturation, where no new themes emerged in the final interviews (Guest et al., 2020).

Data Collection Procedures

Data were collected between May and September 2025 through one-on-one, semi-structured interviews conducted in English or Arabic, depending on participant preference. Each interview lasted approximately 45–60 minutes and was conducted either face-to-face or via secure video conferencing due to geographical and scheduling constraints.

An interview guide was developed based on previous literature (Alsobayel, 2016; Alqahtani et al., 2020) and included open-ended questions such as:

- "How would you describe your role as a physiotherapist in a long-term care facility?"
- "What are the main challenges you face when providing rehabilitation for elderly patients?"
- "How do you collaborate with other healthcare professionals within your facility?"

All interviews were audio-recorded with participant consent and transcribed verbatim for analysis. Notes were taken during and after each session to capture non-verbal cues and contextual details.

Data Analysis

Thematic analysis following the six-step framework of Braun and Clarke (2019) was used to identify, analyze, and interpret patterns within the data. Transcripts were read repeatedly to ensure familiarity, and initial codes were generated inductively. Codes were then grouped into broader themes representing recurring ideas about physiotherapists' experiences, such as "professional identity," "interdisciplinary collaboration," "systemic barriers," and "patient-centered care."

Data were managed and analyzed using NVivo 14 qualitative analysis software to organize codes and ensure transparency in the analytic process. To enhance trustworthiness, peer debriefing and member checking were conducted. Participants were invited to review their interview summaries to confirm accuracy and credibility of interpretation (Lincoln & Guba, 1985).

Ethical Considerations

Ethical approval was obtained from the Institutional Review Board (IRB) of the Saudi Ministry of Health (Approval No. MOH-2025-0123). Participants received an information sheet describing the study's purpose, procedures, and confidentiality measures. Written informed consent was obtained before participation. Data were anonymized using coded identifiers, and all recordings were stored securely on encrypted devices. Participation was voluntary, and respondents could withdraw at any time without penalty.

Researcher Reflexivity

As the principal investigator was a licensed physiotherapist with prior clinical experience in rehabilitation settings, reflexive journaling was maintained throughout the research to minimize bias and ensure awareness of personal assumptions. Reflexivity was also integrated into the analysis phase to enhance interpretative depth and maintain transparency in theme development.

Results

Thematic analysis of the twelve semi-structured interviews with physiotherapists working in Saudi Arabia's long-term care (LTC) facilities yielded four overarching themes: (1) professional identity and role perception, (2) interdisciplinary collaboration and communication, (3) systemic and organizational barriers, and (4) emerging opportunities for professional development. These themes capture the lived experiences, challenges, and evolving roles of physiotherapists in LTC practice.

1. Professional Identity and Role Perception

Participants consistently described physiotherapy as a vital yet under-recognized component of long-term care. They viewed their work as extending beyond mobility restoration to encompass education, prevention, and emotional support for elderly and chronically ill residents. One therapist stated, "In our facility, physiotherapy is not just about exercises—it's about giving patients dignity and independence." Several participants emphasized the shift from a purely curative model to one that promotes functional maintenance and quality of life. This aligns with previous Saudi studies noting that physiotherapists perceive themselves as advocates for patient autonomy and active aging (Alsobayel, 2016). However, many respondents reported that their roles are often misunderstood by administrators and families, who associate physiotherapy solely with post-surgical or orthopedic recovery. Such misconceptions limit recognition of physiotherapists as essential members of the LTC multidisciplinary team.

2. Interdisciplinary Collaboration and Communication

Most participants acknowledged the importance of teamwork in managing complex LTC cases involving nursing staff, physicians, occupational therapists, and caregivers. Nevertheless, collaboration was described as uneven and dependent on facility culture. In government LTC units, participants reported structured care plans and daily multidisciplinary meetings, while private centers often lacked such coordination.

Physiotherapists noted that poor communication sometimes led to inconsistent rehabilitation goals. As one respondent explained, "We have to remind other staff that physiotherapy is part of the treatment plan, not an optional service." Similar issues have been documented in international LTC research, where limited interdisciplinary coordination affects continuity of care and treatment outcomes (Resnik & Allen, 2007). Participants advocated for shared electronic documentation and standardized communication protocols to bridge professional gaps.

3. Systemic and Organizational Barriers

Organizational challenges emerged as a dominant theme. Physiotherapists cited staff shortages, heavy caseloads, inadequate equipment, and limited space for therapy as daily obstacles. These findings echo previous Saudi research identifying resource constraints as a critical barrier to quality rehabilitation services (Alqahtani et al., 2020; Alotaibi et al., 2019).

Additionally, many participants expressed frustration with the absence of LTC-specific national guidelines and a lack of continuing education opportunities in geriatric rehabilitation. One therapist remarked, "We don't have clear standards for physiotherapy in nursing homes—every facility follows its own way."

Administrative factors, such as the prioritization of acute hospital rehabilitation over long-term care, were also highlighted. Several respondents believed that physiotherapy in LTC settings receives insufficient institutional support and budget allocation, limiting innovation and staff retention. This mirrors policy reports from the Saudi Ministry of Health (2021), which identified the expansion of rehabilitation services as a strategic but underfunded area.

4. Emerging Opportunities for Professional Development

Despite systemic barriers, participants expressed optimism about the future of physiotherapy in LTC under Saudi Vision 2030. Younger practitioners noted growing public awareness of rehabilitation and the inclusion of physiotherapy in community health programs.

Some facilities had recently introduced tele-rehabilitation and caregiver training programs, enabling remote monitoring and family participation in therapy. These developments align with the growing digital-health transformation in Saudi Arabia (Al-Muhanna et al., 2022). Participants highlighted the need for national continuing-education programs and postgraduate specialization in geriatric physiotherapy to strengthen clinical competence and leadership roles.

Overall, participants envisioned a future model of care where physiotherapists are integrated into decision-making structures, contribute to policy design, and help redefine LTC as a preventive and rehabilitative rather than custodial service.

Summary of Themes

Theme	Core Description	Supporting Evidence
1. Professional Identity	Under-recognized yet central to patient dignity and independence.	Misconceptions among staff and families; advocacy for patient function.
2. Collaboration	Essential but inconsistent across settings.	Limited interdisciplinary meetings; calls for shared documentation.
3. Systemic Barriers	Resource and policy deficits hinder quality care.	Staffing shortages; lack of LTC guidelines; low funding.
4. Opportunities	Vision 2030, digital health, and education reforms are opening new pathways.	Tele-rehabilitation adoption; demand for specialized training.

Discussion

The findings of this qualitative study highlight both the progress and persistent gaps within physiotherapy practice in Saudi long-term care (LTC) facilities. Physiotherapists demonstrated a strong professional identity and commitment to improving patients' quality of life, yet they operate within systems that often undervalue rehabilitation and limit their scope of practice. These findings echo previous research across Saudi Arabia, where physiotherapy is recognized as an emerging but underutilized discipline in chronic and geriatric care (Alsobayel, 2016; Alotaibi et al., 2019).

A central theme was the lack of recognition of physiotherapists' roles within multidisciplinary LTC teams. Participants perceived that administrators, nurses, and even patients often misunderstood physiotherapy as limited to post-acute care or exercise-based interventions. Similar misconceptions have been observed internationally, where physiotherapists struggle to assert their autonomy within institutional hierarchies (Resnik & Allen, 2007). However, in the Saudi context, this issue is further shaped by cultural expectations of dependency among older adults and family caregivers, leading to a preference for passive rather than active rehabilitation approaches. Addressing these cultural barriers requires targeted health education and awareness programs highlighting the preventive and functional benefits of physiotherapy.

The results also underscore the importance of interdisciplinary collaboration in achieving effective long-term rehabilitation outcomes. While participants recognized teamwork as essential, collaboration was often inconsistent or informal. These findings align with global LTC literature emphasizing that successful rehabilitation depends on coordinated communication among all healthcare providers, including nurses, physicians, and therapists (World Health Organization [WHO], 2017). Integrating

structured team meetings, shared electronic records, and standardized care pathways could significantly enhance care continuity in Saudi LTC settings.

At the systemic level, participants reported organizational barriers that mirror those found in broader Saudi rehabilitation services—namely, shortages of specialized staff, inadequate equipment, and limited training opportunities (Alqahtani et al., 2020). The absence of national LTC physiotherapy standards was a recurring concern, suggesting an urgent need for regulatory development. The Ministry of Health's Health Sector Transformation Strategy (2021–2030) identifies rehabilitation as a key pillar of health reform, yet implementation at the LTC level remains inconsistent. Translating this strategic vision into operational guidelines—such as mandatory staffing ratios, functional assessment tools, and continuous professional development—would enhance accountability and service quality (Ministry of Health, 2021).

An encouraging finding of this study is the growing optimism among younger physiotherapists, who see emerging opportunities in tele-rehabilitation, home-care integration, and Vision 2030 initiatives. Telehealth technologies, already piloted in Saudi physiotherapy (Al-Muhanna et al., 2022), have the potential to expand access to specialized care for residents in remote facilities. However, to ensure equitable adoption, policies must address infrastructure readiness, reimbursement mechanisms, and data privacy concerns.

The findings also contribute to the theoretical understanding of professional identity formation among physiotherapists in evolving healthcare systems. Within Saudi LTC, identity construction appears to occur at the intersection of clinical autonomy, organizational culture, and interprofessional dynamics. The participants' reflections resonate with constructivist models of professional identity, which view expertise as socially negotiated through collaboration, recognition, and shared purpose (Trede, 2012). Hence, strengthening physiotherapists' leadership roles and including them in institutional decision-making could reinforce their visibility and professional legitimacy.

Finally, these findings have broader implications for health policy and education. The expansion of geriatric physiotherapy training programs, establishment of postgraduate specialization tracks, and incorporation of LTC competencies in undergraduate curricula would align the profession with global standards. National accreditation of LTC rehabilitation services could further ensure consistency and safety in practice.

Overall, this study reinforces that achieving sustainable, high-quality physiotherapy practice in Saudi LTC facilities requires a multidimensional approach—combining regulatory frameworks, workforce development, digital innovation, and cultural transformation. Physiotherapists, as both clinicians and advocates, are strategically positioned to drive this transformation and contribute meaningfully to Saudi Arabia's journey toward integrated, person-centered long-term care.

Conclusion and Recommendations

This qualitative study provides an in-depth understanding of physiotherapists' experiences in Saudi Arabia's long-term care (LTC) facilities, revealing their crucial yet under-recognized contribution to patient-centered rehabilitation. Physiotherapists play an essential role in promoting independence, preventing functional decline, and enhancing the quality of life of older adults and chronically ill residents. However, their professional identity and scope of practice remain constrained by systemic barriers, including limited staffing, inadequate infrastructure, insufficient interdisciplinary collaboration, and the absence of standardized LTC physiotherapy guidelines. These findings align with previous studies reporting similar challenges in the broader Saudi rehabilitation sector (Alsobayel, 2016; Alqahtani et al., 2020). Despite these obstacles, the profession stands at a pivotal point of transformation under Saudi Vision 2030, which emphasizes preventive, community-based, and integrated healthcare. To achieve this vision, physiotherapy must be more deeply embedded in policy, education, and clinical practice. National regulatory frameworks should establish clear practice standards, staffing requirements, and accreditation criteria for LTC facilities, ensuring quality and consistency of care across regions. Workforce development is equally vital—expanding postgraduate programs in geriatric and long-term care physiotherapy, fostering interdisciplinary training, and providing career advancement opportunities will help sustain a skilled and motivated rehabilitation workforce. Clinically, the adoption of evidence-based care models, routine use of standardized functional assessment tools, and integration of tele-rehabilitation technologies can enhance service reach and efficiency, particularly in remote areas (Al-Muhanna et al., 2022). Further investment in

research, data systems, and quality-improvement initiatives will strengthen the evidence base for LTC rehabilitation and inform future policy. Ultimately, the advancement of physiotherapy within Saudi LTC facilities requires a multidimensional strategy that unites governance, education, innovation, and cultural awareness. By empowering physiotherapists as leaders in long-term rehabilitation and integrating their expertise into national health reforms, Saudi Arabia can build a sustainable and inclusive healthcare system that supports healthy aging and aligns with the aspirations of Vision 2030.

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