

Communique

of Physical Therapists



Saskatchewan College

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2006

What's In This Issue

Note from the Editor.....	1	Registrar's Report.....	5
New Computer System for 21st Century.....	1	Continuing Competency Report.....	6
Renewal of Registration.....	2	Request for Volunteers.....	6
Alliance Examinations.....	2	Support Workers Committee Report.....	7
From Around the Country.....	3	Legislation Committee Report.....	7
Professional Practice and Liability on the Net.....	4	You Asked Us.....	8
President's Report.....	4	Being a Witness in Court.....	9
Professional Conduct Committee Report.....	5	Websites.....	10
Supervised Practice Committee Report.....	5	Current SCPT Council.....	11

Note from the Editor

Greetings from your new Communication's Committee chair! I am excited to be a part of the SCPT and look forward to serving as editor of the Communique and facilitating communication between the College and its members. The Communications Committee currently includes Nancy Thompson, Stacey Lovo Grona, and myself. Our committee has revised our terms of reference as of August 2006. In addition to proofreading and editing newsletter content, we are available to assist with proofreading other College and committee documents, developing promotional or other communication tools as requested by other committees, and distributing and reviewing articles of interest to the College through our review article subcommittee.

The Communique is one important avenue through which the College communicates with its members and it is a valuable tool for members to stay informed regarding issues of importance to our profession. If anyone has information they feel would be of interest to our membership please forward it via email to the College or to myself. We would also appreciate hearing any comments or suggestions you have to improve the Newsletter and facilitate communication between members.

Once again, I look forward to serving as editor of the Communique and communicating with you through future newsletters.

*Submitted by Sarah Puetz
Communications Chair*

New Computer System for the 21st Century

(This article is modified and reprinted with permission from the College of Physiotherapists of Manitoba Fall 2006 Newsletter article entitled "Alinity Database")

In 2004, the SCPT began to realize that the existing database software had limitations that would soon prevent the SCPT from meeting its human resource data collection capabilities. Since 2004, the SCPT database has needed to be expanded on a semi-annual basis in order to meet the growing demands for human resource data by government and the professions vested interest groups. As a result of the limitations of the actual software program (e.g. expanding the size of the data entry form), the

College from 2004 until 2006, undertook a continuous review of software database programs that are available on the market. In the fall of 2006, SCPT reached the limitations of the existing software program and was unable to expand the existing system any further and began to experience regular hiccups in the functioning of the existing database. SCPT was also unable to meet a request by Sask Health for health human resource data.

Data collection software for health profession regulators is a specialized area and there are not many providers available who cater to the needs of the regulator. When investigating the College's options, an Alberta company based out of Edmonton, stood out

Comments? Questions?

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Congratulations

On September 13, 2006, Peggy Proctor was presented a College of Medicine Excellence in Teaching Award. We all wish her well in her future endeavors and her continuing efforts to enhance the physiotherapy profession.

Goodbye and Welcome

The College's legal representative Dirk Silversides no longer is working with SCPT. Our new legal representative is Merrilee Rasmussen. We would like to take this time to thank Dirk for all of his work throughout the years and wish him the best of luck with his future endeavours. In addition, we welcome Merrilee to the College and look forward to working with her concerning issues of importance to the physiotherapy profession.

Submitted by D. Fracchia, Executive Director

Renewal of Registration

In January 2007, registrants will be receiving their 2007 renewal forms. While your registration with the SCPT will expire as of April 1, 2007, please ensure that your renewal form reaches the College office no later than February 28, 2007 to avoid late fees.

Also, you need to be aware that The Canadian Payments Association has revised cheque specifications. Standards for all cheques drawn on Canadian financial institutions have changed. To avoid any delay with processing your

license renewal application form, please ensure that your cheque for payment of license fees is in compliance with the revised standards.

Please advise the College of any changes in your home address so that your renewal form reaches you in a timely manner. If you do not receive your renewal form by February 1st, please contact the College immediately. The renewal form will also be available on the website.

Alliance Examinations

Challenge yourself – be an Examiner!

Have you ever thought about being an Examiner for the Physiotherapy Competency Exam? If you have, now is your chance to participate!

The Physiotherapy Competency Examination (PCE) is required for entry to practice in Saskatchewan. The Canadian Alliance of Physiotherapy Regulators (The Alliance) offers the Clinical Component of the exam at least once each year in Saskatchewan to provide a convenient site for the University of Saskatchewan graduates.

You may have questions about the exam – questions like:
They don't need me, do they?
Yes, we do! Last year it was difficult to organize the exam site in Saskatchewan because there were not enough examiners. If you are a registered physical therapist in Saskatchewan with at least one year's experience, we need you!

Why should I examine?

Examiners have many reasons for applying. Some of them are:

- * To assist future physical therapists of Saskatchewan in meeting their registration requirements
- * To give something back to the physiotherapy community – part of being a professional
- * To meet and interact with colleagues from other facilities

- * To learn more about the PCE and give feedback on the station you mark

But I don't know how!

That's okay – The Alliance has lots of information to help you

- * Every new examiner receives training before the exam
- * All examiners attend orientation the morning of the exam
- * There are guidelines and notes in the package you receive before the exam and on exam day
- * The Chief Examiner is on site all day to answer any questions about marking

Do I get paid?

- * Yes all examiners are paid for their time

How do I apply?

- * Complete the examiner application included with this mailing
- * If you need an application, contact The Alliance at examcoordinator@alliancept.org
- * Fax the completed application to the Saskatchewan College of Physical Therapists
- * SCPT will forward your application to The Alliance

Submitted by Allison Cooper, Canadian Alliance Staff

Updates on Issues From Around the Country

- * The College of Physiotherapists of Manitoba is in the process of developing a continuing competency program that will have a portfolio based Practice Enhancement Plan that will provide a framework for physiotherapists to track and document their efforts to maintain and enhance physiotherapy competencies.
- * The College of Physiotherapists of Ontario conducted a forum on Evolving Physiotherapy Practice in May 2006 with various vested interest groups of the profession. The results of this forum have culminated in a task force that will articulate a model of advanced practice within the profession and developing a business case to demonstrate the value added to patient care for PT advanced roles.
- * The College of Physical Therapists of Alberta has recently changed their registration processes. Until now, applicants were eligible for a temporary license in Alberta prior to completing the written component of the Physiotherapy Competency Exam. This changed as of October 15th, 2006. Applicants will now need to successfully complete the written component of the Physiotherapy Competency Exam and be registered for the next available clinical component of the PCE prior to registration in Alberta.
- * The College of Physical Therapists of British Columbia has recently developed new practice standards for the assignment of tasks to a physical therapist support worker and Electro-physical agents effective September 1, 2006.

A New Computer System... *from cover*

because of its work in providing appropriate software to the College of Physical Therapists of Alberta, the College of Physiotherapists of British Columbia as well as other professional colleges (e.g. nursing, dieticians and OT's) in other western provinces. The software is called Alinity and is unique to the Softworks Group. In December 2006, the SCPT College will be signing a contract with the Softworks Group for the license to use new database software called Alinity.

The Alinity program will allow the SCPT to provide database information to our provincial government, the Canadian Institute of Health Information (Federal government initiative) and others (physiotherapy researchers) who are seeking demographic and practice information on physiotherapists in Saskatchewan. The ability to improve the collection of practice information will enable Council to have a clearer picture of physical therapy practice in Saskatchewan so that they can better support our scope of practice as physical therapists move into inter-disciplinary models of practice. Because of the mandatory registration of any physical therapist who wishes to practice in the province, the College is the ideal source to collect demographic information on its registrants.

Demographic information provided to researchers or those seeking this type of information will be provided in a manner that preserves the confidentiality of College members. This information can be aggregated in a fashion that does not allow identification of an individual. Special codes, known only to office staff, will be used to convey the database information on registrants.

The database project will be conducted in two stages, tentatively over a two-year period of time. In phase one, work will begin in summer to convert the existing database information into the Alinity program. The SCPT Committees and professional conduct investigations will continue to be tracked on the old database for the time being. This is being done as a cost saving measure. The Alinity program does have the capability to expand to meet the SCPT needs in these areas but it will be at an additional cost. In stage two, SCPT's website will be hosted on the Alinity Server. This will allow the SCPT to host their website on a more secure site with better service and easier ways to update information.

The Alinity program has the potential to grow with the SCPT's future needs. It has the potential for additional modules to be purchased which will allow the database to become interactive. The

benefit of an interactive program to the registrants of the College will be that in the future, you will be able to register and renew your membership online and pay your fees by credit card. Renewal could be done at any time of the day online. This service is an improvement over having to come to the office to renew your registration during regular business hours, or worrying about your renewal being lost in the mail. In addition, it will allow a new license certificate to be generated each year and eliminate the need for the current renewal stickers. As online renewal and registration is a costly venture, the SCPT will be asking for your input on your desire for this membership service before this step is initiated.

As a technological advancement, Alinity will permit the College to be a leader in the field of data provision that is an important tool for evidence based practicing and funding decisions that impact the profession.

The purchase cost of this software will be taken out of the SCPT reserve funding. It should be noted that the SCPT did contact government agencies for funding for implementing this technology, to no avail.

Professional Practice and Liability on the Net

Bernard C. LeBlanc
Steinecke Maciura LeBlanc
Professional Regulation and Discipline
Vol 7, No 5 February 2006
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“But You Said It Was OK”: The Defence of Officially Induced Error

Most would agree that there seems to be more and more rules and regulations everywhere. This is as true for self-regulating professions as for any other field of endeavour. Practitioners therefore can't be blamed if they ask their regulator for advice from time to time, particularly about “tricky issues”.

Most regulators provide some practice-related advice to their members but they are careful to ensure that it cannot be considered “legal advice”. Accordingly, while many regulators will suggest that certain statutes, regulations, policies or other materials may be relevant to the person's inquiry, they will not provide more specific advice as to how the person should act in any given case.

Part of the reason that regulators do not provide specific advice is because their role is inconsistent with the role of advisor. Regulators, after all, regulate. They are not in the business of suggesting to their members, or anyone else, how to avoid liability or otherwise behave in specific cases.

Another concern is that a member may seek advice without necessarily (or intentionally) conveying all of the relevant facts to the regulator with the result that any advice will necessarily be incomplete and, perhaps, simply incorrect. Because the member may not provide enough information to the regulator and the advice that the member receives is therefore incomplete or based on insufficient information, the member may do something that the regulator thinks the member shouldn't have. Let's further say that the regulator brings discipline proceedings against the person and part of the defence is, “but you said it was OK”.

The Supreme Court of Canada recently held that there may in fact be

situations where a practitioner can rely on the defence of “officially induced error” and escape liability. However, the Court also held that before someone can rely on the defence, the person must meet a number of requirements:

- There must be in fact an error of law, or mixed law and fact.
- The practitioner must have considered the legal consequences of his or her actions.
- The advice was obtained from “an appropriate official”.
- The advice was reasonable although it was also incorrect, and,
- The practitioner relied on the advice in committing the act to their detriment.

Clearly, if regulators provide specific advice to their members in relation to specific issues or concerns, it is not difficult to foresee a practitioner claiming that they were only following the regulator's advice if they are later criticized (or disciplined). Therefore,

while regulators understandably provide general advice to their members, they should avoid providing specific advice as to what a practitioner should do in specific circumstances. And regardless of the sort of advice that may be provided, regulators should also ensure that their advice is adequately documented, particularly where the advice is more than completely generic.

[Professional Practice and Liability on the Net is a monthly Internet newsletter addressing issue of interest to a wide range of professionals. Please consult with a lawyer for specific legal advice. If you wish to be removed from the list of subscribers, please simply reply to this email. If you wish to reprint this article, please provide appropriate credit, and send a copy of the publication to, Steinecke Maciura LeBlanc, 393 University Avenue, Suite 2000, Toronto M5G 1E6. Or, call 599-2200, ext. 232, or email: bleblanc@sml-law.com. Visit our website at <http://www.sml-law.com>. Comments and suggestions are also welcome.]

President's Report

KEEPING YOURSELF INFORMED?

There has been an increase in meetings and teleconferences in the last couple months as groups and committees have resumed their activities from the summer break. Be sure to update yourself on what is happening by browsing through the Communique. The College has continued to make an effort to ensure we are represented at any external stakeholder activities that may have an impact on safety to the public and the integrity of the profession. The government is also moving ahead as Sask. Health has appointed Mr. Jim Ferguson to review the regulatory authority of all health care regulatory bodies in Saskatchewan. The provincial government has indicated they have been reviewing various legislative models including those in the UK, Australia and other provinces. This may be giving us a glimpse into the future of the profession.

Health Quality Council update.

The College was invited to attend The Health Quality Council (HQC) discussion forum on “Reporting the Quality of Health Care” on Oct. 30th

and 31st. I attended the evening and full day session and was impressed by the knowledge and experience that was represented by those in attendance. There was excellent representation from all health disciplines and other vested interest groups. The discussions addressing the release of information to the public, regional health authorities and to the individual professional were constructive and informative. Issues regarding the dispersal of information collected by the HQC, the amount, type, content, and format were addressed. One concern from attendees was what the role or responsibility of the HQC was if information they collected indicated poor health care provided by an individual practitioner. How would the information be handled? Would HQC be taking on a role similar to the regulatory body regarding investigation of conduct and discipline? I know all that were involved will be looking forward to the results of the forum and future initiatives of the HQC.

Submitted by Allisyn Camche, President

Professional Conduct Committee Report

The role of the Professional Conduct Committee is to safeguard the public interest by ensuring that physical therapists provide treatment in a safe and competent manner. Complaints brought forward to the College may be regarding the incompetence or misconduct of a licensed member. Incompetence is defined as the display by a member of a lack of knowledge, skill or judgment or a disregard for the welfare of a member of the public served by the profession. Professional misconduct is any act that is harmful to the best interest of the public or the College members, harms the standing of the profession, is a breach of the Act or bylaws, or is a failure to comply with an order of the professional conduct committee, the discipline committee, or the council. One of the requirements of the SCPT to maintain its status as a self-regulatory body, is to investigate all complaints brought forward to the professional conduct committee.

When a complaint is lodged against a College member, the College member

will be notified of the complaint by registered letter. A copy of the written complaint accompanies this letter. The College member is provided the opportunity to provide a written response to the complaint. The letter of response will become part of the investigation file and a copy will be forwarded to the complainant. In most instances this will be followed up with telephone interviews with a member of the professional conduct committee and the complainant and a member of the professional conduct committee and the College member. Any other individuals named as witnesses in the case may also be interviewed. A copy of the complainant's clinical record also becomes a very important part of the investigation file.

In a case where there is a discrepancy in the information provided by the complainant and the College member, and where the competence of a College member is questioned, the clinical record becomes the most valuable source of information in the professional conduct

committee investigation. The requirements of the clinical record are clearly outlined in the Standards of Practice which can be found in the members' section of the SCPT website. This clinical record is a legal document that is required to record the findings of assessment, provide an analysis of the findings, record the plan for treatment, the goals of treatment and to maintain a record of the treatment provided and the client response to treatment. If the information is not recorded in this document, the assumption must be made that it did not occur. A defense based on the College member's recollection of events that may have occurred more than a year before, in some instances, would be weak at best. The professional conduct committee relies on the written clinical record to provide evidence that the College member provided safe and competent treatment. Without that written record there is little evidence to support the professional conduct committee's finding that there was no evidence of incompetence or misconduct on the part of the college member. Therefore, it is in the best interest of the client and the College member to ensure that complete and accurate records are maintained.

Submitted by Shannon Sigfusson, Chair of the Professional Conduct Committee

The Supervised Practice Committee Report

Thank You...

I wanted to take this time to say thank you to all of the supervising therapists who have provided insight and support to our restricted-license registrants over the last number of years! We (the Supervised Practice Committee) recognize that it takes dedication and persistence to complete the supervision agreement and want you to know that it is reassuring to know that you are helping our restricted-license registrants to develop into excellent physical

therapists! If you become a supervising therapist over the next number of months, please be sure you sign the Supervision Agreement and if you have any questions, refer to the documents posted on the SCPT website at <http://www.scpt.org/home.html>. We hope that you enjoy your time as a supervising therapist!

Submitted by Melissa Cursons, Supervised Practice Committee Chair

Registrar's Report

Welcome our new registrants!

Protocol	First Name	Last Name	SCPT License No.	License Status	Work Company
Ms.	Terra	Nameth	1707	Restricted	St. Paul's Hospital
Ms.	Erin	Beattie	1708	Restricted	RUH
Ms.	Victoria	Kerr-Wilson	1709	Practicing	Regina General Hospital
Ms.	Tami	Ellis	1710	Practicing	Daniels Kimber PT Clinic



Continuing Competency Report

How do we address Continuing Competence?

In recent years, there has been a very strong trend for physical therapy regulators across North America to implement *Continuing Competency Programming*. Although we have not yet been mandated by the government to implement this type of program in Saskatchewan, the Saskatchewan College of Physical Therapists recognizes that it is important for physical therapists to be lifelong learners in order to maintain our competence and help to protect the public. "Medicine itself is continually advancing, and so an unchanging practitioner will inevitably be left behind. In addition, the maintenance of a high level of performance at highly complex and uncertain tasks requires feedback, the absence of which will inevitably lead to deterioration in performance" (1). The responsibility of registrants to protect the public ultimately requires us, as physical therapists, to continue learning to provide the most competent and effective treatments that we can. Before we can discuss how to maintain our competence, we need to start by defining it.

Professional competence is "the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values and reflection on daily practice for the benefit of the individual and community being served" (2). "Competence is dynamic. The profession's knowledge and skills change as new information is derived from research, technology assessment and outcome measures" (3). As most health care providers understand from clinical practice, it is essential to continue to pursue the most up-to-date information for our clients. So...how do we do this?

There are a number of ways to address Continuing Competency:

- A. Conferences
- B. Formal continuing education courses
- C. Workshops
- D. Seminars
- E. Teleconferences
- F. Interest group activities
- G. Medical rounds
- H. In-service educational courses of short duration (deemed necessary to maintain or improve job skills

and which are directly related to the active practice of physical therapy)

- I. Continuing Competency practice activities including self assessment (a review of areas of skill and areas that the registrant would like to address in his/her learning)
- J. Self study

As you can see, there are many ways to enhance the "lifetime learner" in you! We hope that registrants will take the opportunity when filling out their 2007 registration form to reflect on their successes, as well as those areas where you would like to focus some learning time. Over the next year, you will be updated regularly about continuing competency tools as they are developed. Our committee hopes that we can make it as easy as possible for you to set, monitor and achieve your learning goals!

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2. Epstein, R.M. and Hundert, E.M. (2002). Defining and assessing professional competence. *JAMA*, 287(2), 226-235.
3. Quality Management Framework ñ College of Physiotherapists of Ontario. (2003, October) from http://www.collegept.org/college/content/pdf/en/Quality_Management_Framework_English.pdf.

*Submitted by Melissa Cursons,
Co-Chair of the Continuing Competency
Committee*

Request for Volunteers

With the loss of a couple committee members and one councilor during this past year, the SCPT is looking for enthusiastic registrants who want to contribute to their profession. It is your responsibility, as the registrants of the College, to be sure that there is someone on the Council and committees to represent you in the interests of the public. It is an opportunity to see how the practice is regulated and to have your say in the process. These are exciting times as the profession moves to primary care but with it come more responsibility

to the public, and the increased need for transparency and better communication. Saskatchewan Health also informed Registrars that they will be undertaking a review of health care regulatory bodies' authorities. These are exciting changes that you can have a major impact upon. If you are interested, please contact a member of the Nominations Committee or the Executive Director. The possibilities are limited by your own imagination. Get involved!!

The Support Workers Committee Report

Among the key issues that have been brought to the Support Workers Committee are the questions regarding if, how and when SCPT should proceed with investigating options for regulating/rostering physiotherapy support workers in Saskatchewan.

Before this key issue can be addressed, the committee felt that the determination of the utilization (responsibilities assigned, staff resources used) of support workers within the practice of physiotherapy had to be known. Through the PAWG 2005 survey (Physiotherapy Advisory Working Group), SCPT was able to gather information from physiotherapists on the utilization of support workers. The preliminary results from that survey are as follows:

1. Are you familiar with the CPA Competency Profile of Support Workers?

93 Yes
58 Don't Know
0 No
2. Do you currently use Support Workers?

61 Yes
52 No
3. Do you differentiate between Group 1 and Group 11 Support Workers?

63 Yes
53 Don't know
45 No
4. Total number of Support Workers being directly supervised in the survey: 223
and total number of Support Workers being indirectly supervised: 7
5. How many are Group 1 Support Workers (formally trained)? 127
6. How many are Group 11 Support Workers (non formally trained)? 103

7. Does your organization have internal policies about the usage of Support Workers?

16 Yes
23 No
103 Don't know
8. Of the physiotherapists who participated in the survey:

31 stated a preference for hiring Group 1 Support Workers,
6 indicated they would prefer to hire Group II
125 indicated no preference.

There were very interesting comments. Some preferred Group II Support Workers as they felt they could train them on the job to do the specific tasks they needed for their department. Others stated they would only hire Group 1 Support Workers. These comments varied according to places of work.

One interesting question was, "How many support workers do you supervise that you directly are delegating physiotherapy tasks to?" The answers varied from one to nine. However, there was no way of telling from the survey whether there were several therapists in a large department supervising the nine support workers or whether it was one physical therapist. It is important to

remember the recommended number per full time equivalent according to the SCPT position statement is 2 support workers.

In general, the majority of support workers were hired by the Health Regions. The main areas of physical therapy practice that used support workers were general, followed by neurology, geriatrics, orthopedics, palliative care, pediatrics and with the mentally challenged. A few were employed by those working in the other areas of physiotherapy such as rheumatology, health promotion, respiratory, burns and administration/research.

Where do we go from here? Further research will be needed to clarify what tasks are being delegated to support workers. It is hoped this next survey will be sent out to ALL registered physical therapists and perhaps another survey may be sent to employers. Also, the Saskatchewan Association of Therapy Assistants (SATA) has been formed and the Support Worker Committee will be contacting them for their input on this subject.

Submitted by Barbara Naviaux, Support Worker Committee Chair

Legislation Committee Report

The Legislation Committee met by teleconference Oct. 23rd to review the issues being presented by the government and changes within the profession that may require some adjustments to the bylaws. Priority has been given to addressing the regulatory changes needed to allow members in management positions (non clinical practicing members) to remain on the roster of SCPT if they cannot meet the clinical practice hour requirements.

The Saskatchewan government has indicated they will be implementing

various omnibus template legislation at the time that any health care regulatory body Acts or regulations are changed. The goal of the legislation committee is to be proactive and begin bylaw or wording changes of the ACT and regulations so that when the government presents new legislation to SCPT, they are aware of any potential impact these changes may have upon the profession.

Submitted by Allisyn Camche, Legislation Chair

You Asked Us!

QUESTION *"I am inquiring about the timeline on the proposed continuing educational requirements for registration that was being piloted a year or so ago. I understand that it was a pilot project, evaluating current practice for physical therapists engaged in ongoing continuing professional development".*

ANSWER: The Continuing Competency Committee was piloting a "tool" in May 2005 that could be used by registrants to track their continuing competency (i.e. also commonly referred to as professional development). The tool will be used to assist SCPT registrants to develop their professional growth and competencies and assist them to document this growth through ALL methods of learning. It's development, evaluation and implementation is under the direction of the Continuing Competency Committee.

Continuing educational requirements are NOT the same thing as ongoing continuing competency/professional development. They are quite distinct. According to Lori de Pauw in the College of Physiotherapists of Manitoba Newsletter from fall 2006:

"Continuing education traditionally has involved voluntary or mandatory participation in structured work-related professional course. Over recent years there has been a gradual shift by licensing authorities of many professional health care organizations away from traditional continuing education programs to continuing competency programs. Continuing competence involves a systematic approach to learning that is continuous, self-directed, self-initiated and self-

evaluated. This differs from the traditional continuing education approach which may be arbitrary and fails to incorporate an evaluation process or address an identified career goal.

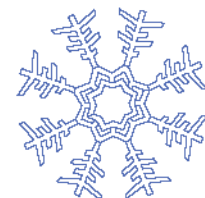
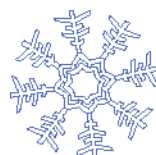
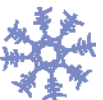
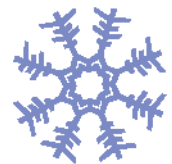
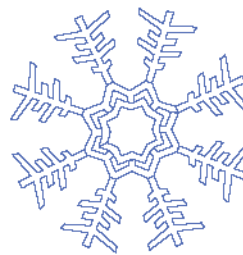
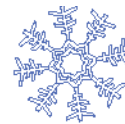
Continuing competency programs are inclusive of learning approaches beyond formal continuing education courses. Other learning methods beyond continuing education include but are not limited to health care conferences, critical incident analysis, in-service education/rounds, learning from patients, mentoring and supervising, original published work, personal experiences, professional contacts, or project work, reading/journal club, research and development, student supervision, teaching and teleconferences.

Most continuing competency programs involve a self-assessment process to identify learning needs, implementation of strategies to maintain or advance competency within the current or desired role and practice setting, and an evaluation process to ensure that learning objectives have been met" (page 4).

The Continuing Competency

Committee continues to evaluate the pilot project portfolio tool. The proposed implementation of the portfolio tool, once final revisions are made, is tentatively scheduled to be implemented on a voluntary basis in 2007 or 2008.

There were no recommendations from the Continuing Competency Committee at any time for mandatory proposed continuing educational requirements. The recommendation by the Continuing Competency Committee was that participation in continuing competency activities (which could include many of the learning methods stated above), eventually becomes a requirement for licensure.



Being a Witness in Court

Article published in CPTA College Callings August 2003
 By Audrey Lowe, CPTA and Katrina Haymond, Field Law
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The following article is provided for informational purposes only. Please consult with a lawyer for specific legal advice.

Witnesses can be of two types: “lay witnesses” or “expert witnesses”. When a physical therapist is subpoenaed to attend court, they must comply with the Court’s request.

Lay Witness

Lay witnesses can be subpoenaed by the court to testify on events that the witness has some knowledge about. Generally, a lay witness is called upon to testify regarding information which he or she became aware of in the ordinary course of his or her life. An example is that of a physical therapist, who, upon driving home from work one day, observes a motor vehicle accident and subsequently is subpoenaed to court to report her observations. Generally, lay witnesses do not provide the court with opinions.

In a civil action, lay witnesses are entitled to be paid a nominal amount of “conduct” money for their attendance in Court, including travel costs where applicable. The conduct money must be provided when the subpoena is served.

Expert Witness

Expert witnesses function to provide the court with information that is necessary to understand issues within the expert’s particular area of expertise and to provide an opinion to the Court regarding an issue which requires the application of a particular area of expertise to one or matters at issue in the litigation. In general, expert witnesses function to assist the “trier of fact” (judge/jury) in drawing inferences about matters that are beyond common knowledge.

- Expert witnesses must possess sufficient background, knowledge, and skill to share information and opinions

on matters that are common to their area of practice to assist the Court with its decisions. There is a process the court follows to qualify an individual to be considered an expert witness. Any physical therapist may be eligible to be an expert witness about physical therapy treatment because they possess unique knowledge and skills that can help the trier of fact understand information and make decisions.

- Testimony of the expert witness is considered admissible evidence when it meets the following criteria:
 - Legally relevant to a matter in issue;
 - Necessary to assist the trier of fact;
 - There is no exclusionary rule precluding its omission; and
 - The expert is properly qualified.

Qualifying as an Expert Witness

In order to be considered an expert witness, the witness must be “qualified” as an expert by the court. It is normal to have a “proposed expert” provide written curriculum vitae for filing with the court. Thereafter, there is a “voir dire” (trial within a trial) to decide whether the court will accept the witness as an “expert”. During the “voir dire”, the individual will testify as to their qualifications to offer an opinion on evidence within the scope of their expertise. Opposing counsel may cross-examine the proposed “expert” with respect to his or her qualifications. The Court will then determine whether the proposed expert will be qualified as an “expert”, determine the limits of the qualifications of that witness and appoint the individual as an “expert witness”.

Following the qualification and testimony of the expert witness, the court will assess the evidence provided and determine the weight of the expert’s

opinion. The following factors may be considered:

- Manner of presenting evidence and response to cross-examination, and general attitude on the stand.
- Qualifications including skill, knowledge, training, experience, powers of observation and the degree of attention given to the matter.
- Whether the witness appears biased, favouring one party.
- Whether the witness strays from the requested area of expertise.

Situations where Physical Therapists become Expert Witnesses

Physical therapists can become expert witnesses in two ways.

Physical Therapist as Treatment Provider
 In this situation, the physical therapist is subpoenaed to attend court to testify in a matter involving a patient he or she treated. The physical therapist’s role in this case is to provide evidence regarding his or her role in treating the patient. Such evidence may include: the patient’s reported history, the nature and purpose of the treatment provided, and the patient’s response to treatment. Physical therapists who are subpoenaed to provide evidence as a treatment provider have a duty to testify.

Physical Therapist as “Independent” Expert

In some situations, a physical therapist may be retained by one of the parties involved in litigation to provide an “independent assessment”. In this situation, the physical therapist functions to interpret the facts of the case, and to offer an alternative opinion with respect to some of the matters that may be at issue. The physical therapist may be called upon to assess the care provided

Being a Witness... from page 9

by another physical therapist, or the feasibility of another physical therapist's methods of treatment or conclusions/outcomes with respect to a patient's condition or progress.

In this case, the physical therapist is not subpoenaed, but instead voluntarily agrees to act as an expert witness and is usually retained by a lawyer. The physical therapist has no obligation to act in this capacity.

Physical therapists who act as experts, in the capacity of treatment provider or "independent" expert are entitled to charge a fee for the service provided. The fees charged should be reasonable,

and should be agreed upon between the physical therapist and the person retaining the physical therapist in advance of any services being provided.

What to do When You Are Asked to be an Expert Witness

Contact the lawyer to discuss your involvement:

- ensure that a consent to release of information is signed by the patient and that consent indicates the lawyer seeking information is entitled to it;
- find out what is involved when you are asked to testify (i.e. how your qualifications will be presented, the manner in which you will be cross-examined);

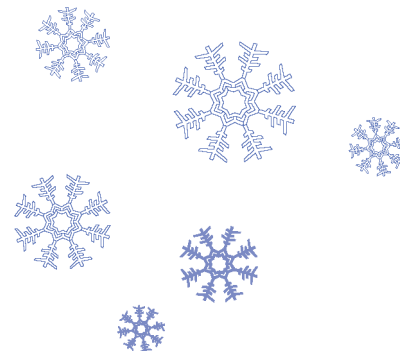
- ask the lawyer to explain the purpose for which your evidence will be required, and discuss the nature of the evidence you will be presenting well in advance of the trial date;
- outline areas that you feel comfortable providing testimony or opinions;
- discuss the likelihood of the case settling out of court;
- discuss the fees for preparing a written report, preparing for attendance in Court, testifying in court and whether fees will be charged if the trial is adjourned or the case is settled out of court;
- on the day of the trial have the original records and other information (e.g. articles) with you.

Websites

Your renewal forms will soon be on the website after January 15th, 2007. If you don't receive your renewal form by the end of January, you will be able to download the renewal forms on the web site. With the proposed new database,

eventually, SCPT will be able to offer registrants the choice of whether they want to register on-line or not!

Submitted by D. Fracchia, Executive Director/Registrar



Change of Address, Name or Workplace

It is your responsibility to notify the College of these changes.

Please indicate changes below:

Name _____

Address _____

City _____ Prov./State _____ Country _____ Postal/Zip Code _____

Home Phone _____ Work Phone _____ Fax _____

E-mail Address _____ Place of Employment _____

New Work Address _____

Effective Change of Date ____ / ____ / ____

It's Easy...Contact us by mail, email (contactus@scpt.org) or fax (306) 931-7333

Current SCPT Committees

Canadian Alliance

Representative: Lesley Stamatinos

Canadian Alliance

Official Marks Committee: Lesley Stamatinos

Canadian Alliance Continuing

Competency Committee: Melissa Cursons

Canadian Alliance

Support Worker Group: Barb Naviaux

Continuing Competency
Committee:

Melissa Cursons - Chair
Ken Dornstauder
Peggy Bacon
Leslie Beck
Barb Denny
Allisyn Camche - Ex-Officio
Kate Fast- CPTe Liaison
Signe Holstein - Consultant
Donna Fracchia -
Administrative Staff
Erin Beattie

Communications Committee: Sarah Puetz - Chair
Nancy Thompson
Stacey Lovo Grona
Donna Fracchia -
Administrative Staff

Discipline Committee: Shane Kachur - Council Liaison
Carey Jones
Jacqueline Holzmann
Ian Orosz
John Moore - Public Rep
Beverley LeBruno
Daniel Lundell
Linda McConnell

Finance Committee: Vanina Dal Bello-Haas-Chair
Donna Fracchia - Admin. Staff
Beverly Wilson
Tamara Greenbank

Legislation Committee: Allisyn Camche - Chair
Ian DeBack
Regan Coulter
Beverly Wilson
John Moore - Public Rep
Beckie Macza

Nominations Committee: Lisa Evans - Chair
Allisyn Camche
Loretta Duerksen
Linda McConnell

Registration Committee:

Deborah Gunther-Hansen -
Chair
Gail Tennant
Cathy Watts
Donna Fracchia-Administrative
Staff

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Committee:

Shannon Sigfusson - Chair
June De Jong - Public Rep
Sherri Wagenhoffer
Susan Bear
Andrea Schick
Julie Schick

Professional Standards
of Practice Committee:

Shane Kachur - Chair
Ruby Naujok - Public Rep
Darcie Sahar
Thomas Langer

Supervised Practice Hours
Committee:

Melissa Walcer - Chair
Donna Fracchia - Admin. Staff
Tamara Greenbank
Doria Michalishen
Shane Kachur

Support Worker Committee:

Barb Naviaux - Chair
Heather Appleby
Ken Dornstauder
Elaine Wirtz



Season's Greetings

