

COUNCIL MINUTES



SCPT Council Meeting via Teleconference, on January 9, 2016.

Present: S. Sarauer; J. Yathon; B. Green; C. Pederson; R. Porter; T. Descottes; C. Cuddington; S. Lovo Grona; H. Burrridge; E. Rackow; J. Grant

In attendance: L. Kuffner (Executive Director)

Absent: T. Descottes;

NOTE: C. Pederson left meeting at approximately 09:45. C. Cuddington left meeting at 10:28. Due to the order that items were discussed, sequential recording of members' departure from meeting not recorded in body of minutes.

1. **Call to Order** - The meeting was called to order by S. Sarauer, President, and meeting Chair, at 09:03.
2. **Opening Remarks of Chair** – vote will be taken as voiced opposition due to teleconference format
3. **Agenda & Declaration of COI**
 - 3.1. **Approval of Agenda**

Motion: That the agenda be approved as circulated.

Moved by: E. Rackow

Seconded by: C. Cuddington

CARRIED: MOTION: 16.001

Changes: We will discuss the agenda numbers 6.10 and 6.11 after ED report due to member C. Cuddington having to leave the teleconference early.
 - 3.2. **Declaration of COI** – S. Lovo Grona declared for item 5.3; B. Green for 6.13; L. Kuffner for 6.5
 - 3.3. **Minutes of previous Council meetings**
 - 3.3.1. **November 14th Council meeting minutes**

Motion: to approve the November 14th and November 30th meeting minutes as circulated

Moved by: R. Porter

Seconded by: C. Pederson

CARRIED: Motion: 16.002

3.3.2. November 30th Teleconference Council meeting minutes - Voted on in 3.3.1

3.4. Consent Agenda

Motion: that the consent agenda be approved as circulated

Moved by: E. Rackow

Seconded by: J. Grant

CARRIED: Motion: 16.003

4. Additional Reports

4.1. Executive Director and Registrar's Report

Motion: to accept the Executive Director and Registrars' report as presented

Moved by: E. Rackow

Seconded by: B. Green

CARRIED: Motion: 16.004

4.2. Labour Mobility – for information only

4.2.1. Final LMCG Checklist

- Standards in place to ensure labour mobility across Canada
- Provides guidelines for utilizing "good character" as a standard for candidate consideration.
- Discussed licensing process and lack of jurisprudence questioning for new members. Candidates are still applying in person/paper format so no access to online jurisprudence question format. Options to send questions in paper format. C. Pederson expressed concerns that new members are not being held to same standard as existing members. S. Lovo Grona expressed concern re: the jurisprudence questions being circulated on paper. Discussed option to direct applying members to website (with a given password) for completion of jurisprudence questions as a requirement of application. Would have to contact Alinity re: this step.

ACTION:

4.1 ED and Executive to review current new member application to include jurisprudence and/or consider a declaration for member to sign as an alternative

4.1 ED and Executive to put information together re: Alinity and requirements for changing member application and send to Registration committee

4.3. Office Space – for information only

- Renovations: washroom, second office, storage closet,
- Possession date April 1/16
- Cost of renovations is covered by lease agreement
- May need to close the office for 1-2 days for the move – need to remain on top of late renewals as it is at the end of late renewal period.
- ED to ensure notice is given to Habitat Building once other lease is finalized

4.4. Professional Corporations – for information only

- Several corporations with names not in compliance with Act – will send letter outlining changes required and consider withholding incorporation renewal until changes made.
- Some business names were approved by incorporations branch but not SCPT; some are using protected title without incorporation.
- S. Sarauer and L. Kuffner have followed up with incorporations office via letter/email and new process moving forward will ensure that no incorporation is approved unless it passes the requirements of the SCPT prior to incorporation permit being issued.

4.5. Snow Removal – for information only

- Budgeting 6 snow removals until April (@ \$75/hour rate)

4.6. AGM 2017 - SPA proposing AGM 2017 date Friday April 22, 2017

Motion: to approve April 23/17 for SCPT AGM (in Saskatoon)

Moved by: R. Porter

Seconded by: H. Burrridge

CARRIED: Motion: 16.005

5. Old Business

5.1. Previous Council Meeting Action Plan Review

5.1.1. November 14th Action Plan Table

Discussion:

- 5.11 S. Lovo Grona – was completed (not stated in presented table)
- Ongoing Actions:
 - 5.7 (November 2015) Finance committee will create policy with clear guidelines on appropriate usage and prioritization for courses and bring back to January 2016 teleconference.
 - 5.7 (November 2015) Nominations committee to review and make changes to policy on \$1000 education bursary and bring back to January 2016 teleconference (H. Burrridge to send to K. Becker)

- 5.11 (November 2015) S. Lovo Grona to take back to CCC committee the expectation that jurisprudence questions are reviewed annually.
- 5.11 (November 2015) L. Kuffner and S. Lovo Grona to develop a procedure outlining jurisprudence question management
- 5.13 (November 2015) Registration committee to follow up with recommendations from Council.
- 5.13 (November 2015) Registration committee to harmonize all supervisory materials for January 2016 council meeting

5.2. IFD Budget for Approval

5.2.1. IFD Budget options for Lease Increase

Suggested Motion: none - included in budget presentation

5.2.2. Final Budget 2015-17

Motion to approve the budget as presented

Moved by: B. Green

Seconded by: R. Porter

Discussion: currently projecting a small profit for 2015 year.

CARRIED: MOTION: 15.006

5.3. CPTE Pre-AGM Educational Event

5.3.1. Correspondence re: CPTE Pre-AGM Educational Event

Motion: to provide an educational grant to the CPTE in the amount of \$500 dollars for the pre AGM educational event.

Moved by: B. Green

Seconded by: E. Rackow

CARRIED: MOTION: 15.007

Discussion:

- this educational event focuses on regulatory framework, which does fit within the guidelines of SCPTs sponsorship. May be able to fund this through AGM expenses or through the Sponsorship budget line – annual budget of \$500 for sponsorship.
- Discussed possible topics to submit to CPTE: include electronic documentation, privacy/confidentiality requirements, definition of “scope of practice”. Scope of practice is a large topic that we may not be able to prepare adequate information in the short timeframe leading up to AGM. May be a topic for 2017. Supervised practice (including obligations of the supervisor) may also be an appropriate topic.

ACTION:

5.3 S. Sarauer will follow up with Monique Marshall re: CPTE funding and educational topics.

5.3 L. Kuffner/S. Sarauer to follow up with CPTe re: payment for educational sponsorship

5.3.2. SCPT Summary Table since 2006 – for information only

6. New Business

6.1. Discipline Committee Terms of Reference

6.1.1. Discipline Committee Draft Terms of Reference

Discussion:

- Previous Terms of Reference were brief
- Changes: detail for process, quorum, provision for videoconferencing (hearing and/or witness testimony)
- Feedback from Council:
 - Honorariums: not sure there is a specific policy? There is a guideline on the website currently but does not apply to expenses. May need to develop one. For now should reference SCPT Honorarium Guidelines.
 - Quorum: states one half of the committee. Proposed change to state “majority of committee members” as is stated in other committee terms of reference.
 - “Committee shall govern its own process” – may need some further clarification
 - Terms of Reference doesn’t necessarily need to show specific processes but will then need an additional “Procedural document” to outline specific processes.
 - Hearing section: # of jurors – is there a minimum? Must be 3/5. Needs to be included in the document. Can be as large as 5 (or entire committee) if no conflicts are present.
 - Teleconference hearing: need consent of both complainant and member; need wording that complainant (or other members of public) is informed of date and time of hearing, should he/she wish to attend (observe only, not participate).
 - Hearings are mandated to be public – anyone can attend. Teleconference format may limit or interfere with making it public. Option for public to contact SCPT and get information on attending teleconference
 - Need revision dates to ensure timely review and update.

ACTION:

6.1 L. Kuffner to ensure that the procedure for PCC reports that have been determined to require “no further action” be included in SCPT Office flow charts and monitor PCC/DC

6.1 J. Grant to take Council recommendations on terms of reference to DC and bring back new edited version to March Council meeting if possible.

6.2 S. Sarauer and L. Kuffner to standardize review period for terms of references for all committees

6.2. AGM Planning

Discussion:

Items to present (list not complete):

- DC terms of reference (part of DC Chair report) – R. Bourassa
- Ongoing work on Complaints process (PCC – DC for office) – L. Kuffner
- Alliance Report/Update – B. Green
- Committee reports (will select based on committee activity over the previous year)
- Awards – TBD
 - education door prize – need to find sponsor; Lymphedema Association of Saskatchewan is unable to donate this year.
- Brag n Steal
- National core code of ethics
- Annual report

ACTION:

6.2 L. Kuffner and T. MacSymetz to send out information re: brag and steal session in e-blast – timeline January 2016.

6.2 H. Burrigde and J. Yathon volunteer to review applications with L. Kuffner/T. MacSymetz and logistics as needed.

6.3. AGM Motions from the Floor Strategy

6.3.1. AGM Motions from the Floor Submission Process Document

Motion: to approve the AGM Motions from the Floor Submissions Process document as presented

Moved by: E. Rackow

Seconded by: R. Porter

TABLED: will review by e-mail/e-vote prior to next meeting

Discussion:

- Need more clarifications on benefit to membership and reason for implementation
- Need motion to be seconded before submission to office
- S. Sarauer will make necessary inclusions and send for e-vote

ACTION:

6.3 S. Sarauer to make necessary changes and send out for e-vote

6.3 L. Kuffner and S. Sarauer to ensure inclusion of motion from the floor article and document in an email update 30 days prior to the March meeting.

6.4. Telerehabilitation and Remote Consultation

6.4.1. Telehealth MOU Draft

Motion: to refer Telehealth and Remote Consultation to Legislation committee to develop SCPT specific guidelines and bring back to Council by pre AGM meeting.

Moved by: E. Rackow

Seconded by: H. Burrridge

CARRIED: Motion: 16.007

Discussion:

- MOU was drafted by several provinces but SCPT decision was to wait on national Registrar's recommendation/document on same.
- May be beneficial to start legwork on legislation prior to national guidelines as MOU will likely not change significantly
- Legislation committee may be most appropriate to review this
- May need to explore guidelines from Alberta and Manitoba as jurisdictions that signed the MOU

ACTION:

6.4 E. Rackow to invite ad hoc committee members (including S. Lovo Grona) Legislation committee meeting in creating guidelines for Telerehabilitation

6.5. Office Manager and ED End of Probationary Period Review

Motion: that the Executive (with input from Council Members) develop a performance review document to be reviewed with Office Manager and Executive Director at end of probationary period and then on an annual basis.

Moved by: B. Green

Seconded by: J. Grant

CARRIED: MOTION: 16.008

Discussion:

- Valuable to send survey to council members for input/comments

ACTION:

6.5 S. Lovo Grona and B. Green will send sample for performance reviews to S. Sarauer. Other council members invited to do so as well.

6.5 Executive to move forward with performance review process.

6.6. Office Manager Pay Scale

Motion: to increase Office Manager wage to 25 dollars per hour starting February 17th, 2016

Moved by: B. Green

Seconded by: R.Porter

CARRIED: MOTION: 16.009

Discussion:

- T. MacSymetz has informed S. Sarauer that she had received job offers at higher pay rate. Wage expectation of 25.00/hour received by T. MacSymetz as this was offer received.
- Similar wages of similar designations in the city is at upper level of our current scale.
- Proposed raise was put into 2016 budget in anticipation of possible raise.
- Council and ED are very pleased with performance of T. MacSymetz.
- Need to set up annual review of performance and wages so it is connected to performance.
- February of each year would be the performance review from this point forward and further wage increases would be considered at those dates.

6.7. Clinical Specialist CPA Designation

6.7.1. Letter from Member

6.7.2. Letter of Support from Canadian Physiotherapy Association

Motion: to approve the use of the term “clinical specialist” by physical therapists in Saskatchewan who have received this designation from the Canadian Physiotherapy Association

Moved by: S. Lovo Grona

Seconded by: B. Green

CARRIED: Motion: 16.010

Discussion:

- Legal counsel opinion – currently nothing in the Act protecting this title. Amendments should be made to the Regulatory Bylaws to ensure appropriate use of Specialist title. Bylaw is preferable to a practice guideline as it is prosecutable in case of inappropriate use of the term.
- Clinical specialist designation is the highest level of designation a PT can receive. Based on intense peer review, scrutiny and much experience and education.
- Currently, SCPT does not have anything in the Act protecting this title. Concern that there is nothing stopping other members from use of this title.
- Alliance has been exploring other Specialist designations to
- Options to create a practice guideline while waiting for the Bylaw Amendment to be approved at Ministry level.
- No language in SCPT bylaws or PT Act to allow it to “govern or approve” use of term – member has right to use title through completion of program through CPA

ACTION:

6.7 PSOP to create clinical practice guideline for Clinical specialist designation

6.7 B. Green will forward Alliance information on Specialist designation to S. Sarauer

6.7 S. Sarauer to follow up with C. Epp re: use of clinical specialist designation

6.7.3. Discipline Summary Website Posting Process

Discipline Summary Website Posting Process Document

Motion: to amend the website posting process to remove the phrase “reviewed by the PCC” and replace with “received by the PCC”

Moved by: E. Rackow

Seconded by: R. Porter

CARRIED: Motion: 16.011

Discussion: changes made to reflect the actual process of document sharing between committees.

ACTION:

6.8 T. MacSymetz will post the updated DC website posting process document to the website

6.8 S. Sarauer to forward PCC website posting process document to T. MacSymetz to post in same area of website as DC website posting document (S. Sarauer to work with T. MacSymetz to determine appropriate placement)

6.8. Policy for Educational Requests to the SCPT

Motion: That Council adopt the following policy: “The purpose of the SCPT is to protect the public through licensing and regulation. The SCPT values education and its importance to our membership, as well as the importance to maintenance of competency which is vital to patient safety. In order to ensure consistent management of educational information in the province, All educational requests or opportunities submitted to the SCPT will be sent to both the Saskatchewan Physiotherapy Association (SPA) and Continued Physical Therapy Education (CPTE) division of the University of Saskatchewan and links to both bodies will be made available through the SCPT website.”

Moved by: H. Burrridge

Seconded by: J. Grant

Amendment: change “sent to” to “all individuals submitting education requests or opportunities to SCPT will be referred to...”

Moved by: H. Burrridge

Seconded by: B. Green

CARRIED: Motion: 16.012

Amended motion: That Council adopt the following policy: The purpose of the SCPT is to protect the public through licensing and regulation. The SCPT values education and its importance to our membership, as well as the importance to maintenance of competency

which is vital to patient safety. In order to ensure consistent management of educational information in the province, All educational requests or opportunities submitted to the SCPT will be referred to both the Saskatchewan Physiotherapy Association (SPA) and Continued Physical Therapy Education (CPTE) division of the University of Saskatchewan and links to both bodies will be made available through the SCPT website.

CARRIED: MOTION: 16.013

ACTION:

6.9 L. Kuffner to Creation of an office procedure that all educational requests received by the SCPT office are referred to the SPA and CPTE for their advertisement

6.9 T. MacSymetz/ L. Kuffner to add Links to the SPA and CPTE be added to the website- under the Continued and Essential Competencies tab in Members Area (unsure if this is the correct location on the website)

6.9 T. Descottes to work with T. MacSymetz/L. Kuffner to determine appropriate area of website to post this policy/information

6.9. Restricted License Information

Motion: To adopt changes to the Restricted License Guidelines document as circulated

Moved by: E. Rackow

Seconded by: J. Grant

CARRIED: Motion: 16.014

Discussion:

ACTION:

6.10 Registration committee to consider completing an environmental scan of supervision agreement and guidelines

6.10 C. Cuddington to send T. MacSymetz completed restricted license documents to post on website

6.10 C. Cuddington to work with T. MacSymetz to clean up the restricted members area of website

6.10. Monitoring Tools and Supervision Agreement

6.10.1. Monitoring tools

Motion: To adopt changes to the Monitoring Tools as circulated

Moved by: C. Cuddington

Seconded by: E. Rackow

Amendment: remove monitoring tool #3 but approve 1, 2, and sample supervision plan

Moved by: E. Rackow

Seconded by: C. Cuddington

CARRIED: Motion: 16.015

Amended motion: to approve Monitoring Tools as amended.

CARRIED: Motion: 16.016

Discussion:

- Need to clarify process – who keeps the monitoring tool?
- After completion of restricted licensure period, member retains possession of ACP;
- Monitoring tool #3 (client survey) – not used, except for PCC/DC use. Conditional licences used by PCC/DC. Tool may be more appropriate for PCC/DC use only.

ACTION: 6.11.1 L. Kuffner/S. Sarauer to send Tool #3 to PCC/DC for review and possible inclusion in their guidelines.

6.10.2. Supervision agreement

Motion: to remove “ for a minimum of 3 months” from Part 2 (c) of supervision agreement

Moved by: H. Burrige

Seconded by: E. Rackow

CARRIED: Motion: 16.017

Motion: to approve the Supervision Agreement as amended

Moved by: B. Green

Seconded by: C. Cuddington

CARRIED: Motion: 16.018

Discussion:

- Change in evaluation tool from CPI (Clinical Performance Instrument) to ACP (Assessment of Clinical Performance)
- Direct supervision—some discussion on what direct supervision entails. Decision was made to follow definition of direct supervision as laid out in amended supervision agreement.
- Remove 3 month window for direct supervision – timeline appears to have been set arbitrarily

6.11. College Investment Strategy

6.11.1. Bank Investment Information

Motion: to approve the proposed investment policy and allow the treasurer to purchase investments in the proposed manner.

Moved by: B. Green

Seconded by: E. Rackow

- 6.2 H. Burrridge and J. Yathon volunteer to review applications with L. Kuffner/T. MacSymetz and logistics as needed
- 6.4 E. Rackow to invite ad hoc committee members (including S. Lovo Grona) Legislation committee meeting in creating guidelines for Telerehabilitation
- 6.5 S. Lovo Grona and B. Green will send sample for performance reviews to S. Sarauer. Other council members invited to do so as well.
- 6.5 Executive to move forward with performance review process.
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- 6.7 PSOP to create clinical practice guideline for Clinical specialist designation
- 6.7 B. Green will forward Alliance information on Specialist designation to S. Sarauer
- 6.8 T. MacSymetz will post the updated DC process document to the website
- 6.9 L. Kuffner to Creation of an office procedure that all educational requests received by the SCPT office are referred to the SPA and CPTe for their advertisement
- 6.9 T. MacSymetz/ L. Kuffner to add Links to the SPA and CPTe be added to the website- under the Continued and Essential Competencies tab in Members Area (unsure if this is the correct location on the website)
- 6.10 Registration committee to consider completing an environmental scan of supervision agreement and guidelines
- 6.10 C. Cuddington to send T. MacSymetz completed restricted license documents to website
- 6.10 C. Cuddington to work with T. MacSymetz to clean up the restricted members area of website
- 6.11.1 L. Kuffner/S. Sarauer to send Tool #3 to PCC/DC for review and possible inclusion in their guidelines.
- 6.12 B. Green to contact RBC regarding investment plan.
- 6.13 B. Green to inform Alliance of SCPT Alliance Rep nomination.
- Ongoing Actions:
 - 5.7 (November 2015) Finance committee will create policy with clear guidelines on appropriate usage and prioritization for courses and bring back to January 2016 teleconference.
 - 5.7 (November 2015) Nominations committee to review and make changes to policy on \$1000 education bursary and bring back to January 2016 teleconference (H. Burrridge to send to K. Becker)
 - 5.11 (November 2015) S. Lovo Grona to take back to CCC committee the expectation that jurisprudence questions are reviewed annually.

- 5.11 (November 2015) L. Kuffner and S. Lovo Grona to develop a procedure outlining jurisprudence question management
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- 5.13 (November 2015) Registration committee to harmonize all supervisory materials for January 2016 council meeting

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7.2. Momentum and website

- advertising bylaws article
- restricted license information
- renewal notice reminder
- nominations information
- AGM information – may need to include Brag n Steal reminder
- Motions from the floor article/policy circulation
- Website cleanup for restricted members area, members news area, and website posting process

7.3. In camera – none planned

7.4. Other Business

8. Adjournment: S. Sarauer adjourned meeting at 12:59.

Next Meeting: March 12th, 2016 in Saskatoon

Signature S. Sarauer. (President) March 12/16 (Date)

Signature [Signature] (Secretary) March 12/16 (Date)

Item for: Council	Date: January 9, 2016	Agenda Item 4 . 1.
Topic: Executive Director's Report Est. Time Req: 5 (min)		
This item is for: <input type="checkbox"/> Decision <input type="checkbox"/> Discussion X <input type="checkbox"/> Information		
<p>Overview:</p> <p>The Issue:</p> <p>Suggested Action:</p> <p>Submitted by: Lynn Kuffner</p> <p>Attachments:</p>		

Discipline Summary Website Posting Process

NOTE: This process has been developed and approved by the Professional Conduct Committee and the Discipline Committee. It has been shared with Council and has been approved as proper procedure for Website and Momentum Posting/Publishing of Discipline Committee and ADR Findings

1. Alternate Dispute Resolution:

- Professional Conduct Committee (with legal counsel input) drafts a Discipline Summary
- This summary is reviewed and approved by the Members of the PCC
- The summary is then forwarded to the Discipline Committee for review and approval
- The approved summary is then forwarded to the Executive Director who:
 - Distributes the ADR Summary to Council Members for their information
 - Posts the ADR Summary to the Discipline area of the website
 - Publishes the summary in the next scheduled edition of the Momentum

2. Discipline Hearing Guilty Finding:

- Discipline Committee (with legal counsel input) drafts a Discipline Summary
- This summary is reviewed and approved by the Members of the Discipline Committee who were involved with the case.
- The summary is then forwarded to the PCC Chair for their information
- The summary is forwarded to the Executive Director who forwards to the PCC Chair for the PCC's information
- The Executive Director also (after the 30 day appeal to council window has passed) completes the following:
 - distributes the Discipline Summary to Council Members for their information
 - Posts the information to the Discipline area of the website
 - Publishes the information in the next scheduled edition of the Momentum

***Note:** In rare and very specific cases it may be a recommendation of the DC and PCC that an ADR or Discipline Hearing Summary not be posted publicly. In these cases the summaries would be forwarded to Council Members for their information but the 2nd and 3rd steps of posting to the website and publishing in the Momentum would not occur

SASKATCHEWAN COLLEGE OF PHYSICAL THERAPISTS

Restricted License Guidelines

Before reading this document, please obtain the following documents required for further information:

1. Physical Therapist Supervision Agreement
2. Monitoring Tools
 - a. Standardized Chart Audit (Monitoring Tool 1)
 - b. Assessment of Clinical Performance (Monitoring Tool 2)
 - c. Supervision Plan (This will be developed between Employer, Supervising Therapist and Restricted License Registrant)

A. Restricted License Description

1. A Restricted License may be granted to individuals to practice physical therapy under well-defined conditions or limitations imposed by Council. (see Physical Therapy Act, 1998, Section 19 (2) for more details).
2. Restricted licenses may be issued to those persons who have successfully passed the written but not yet the clinical component of a physical therapy competency examination that is recognized by Council (currently the Physiotherapy Competency Examination) and who:
 - a. Have registered and fulfill the prerequisites for licensure; AND
 - b. Are engaged in a re-entry to practice process; OR
 - c. Have successfully received an undergraduate or master's degree in Physical Therapy from a University in any province in Canada within four years immediately preceding date of application; OR
 - d. Have graduated from a university, college or school in any other country and are registered pursuant to SCPT Regulatory Bylaw Section 5.
3. A Restricted License shall be issued for up to 18 months, during which time the person must successfully complete the clinical component of a physical therapy competency examination that is recognized by Council (currently the Physiotherapy Competency Examination).
4. The Executive Director of the SCPT may issue a Restricted License.
5. The Restricted License are subject to restrictions imposed on the practice by SCPT Regulatory Bylaw, Section 14.

B. Supervision Model

A supervision model for the Restricted License Registrant will include:

1. A signed copy of the Physical Therapist Supervision Agreement that has been sent to SCPT (including the signatures of the Restricted License Registrant, the Supervisor(s) and the Employer/Department Manager).
2. On-site supervision and/or consultation in a preceptor/intern model.
3. The Restricted License Registrant must sign all documents with professional designation followed by the letters "RES" (resident) to indicate the member's license status.
4. The following monitoring tools are to be used as outlined in the "Restricted License Supporting Documents"
 - a. **Standard Chart Audit** (Monitoring Tool 1)
 - b. **Assessment of Clinical Performance** (Monitoring Tool 2).

C. Restricted License Supporting Documents

1. Responsibilities of Restricted License Holders

This applies to Physical Therapists who are awaiting completion of a physical therapy competency exam recognized by SCPT.

- a. A Restricted License Registrant must comply with specific supervision requirements.
- b. The Restricted License Registrant will:
 - i. Be issued a registration number
 - ii. Be able to perform controlled acts
 - iii. Bill for physical therapy services
 - iv. Complete patient/client records
 - v. Be accountable to the SCPT for his/her actions
- c. It is the responsibility of the Restricted License Registrant to identify and inform the College of the Supervising Practicing Licensed Physical Therapist by submitting the Physical Therapist Supervision Agreement to SCPT.
The Physical Therapist Supervision Agreement is a legally binding agreement.
- d. A Restricted License Registrant can only practice physical therapy within the jurisdiction in which he/she holds the employment, and where the supervision will occur.
The Restricted License expires at the conclusion of that employment.
- e. Both the Restricted License Registrant and the Supervising Therapist (s) share the responsibility to ensure that the supervision requirement and the terms, conditions and limitations placed on the license are met.
- f. It is the responsibility of the Restricted License Registrant to inform the SCPT any changes to the Physical Therapist Supervision Agreement.
- g. It is the responsibility of the Restricted License Registrant to inform the supervisor (s) upon receipt of examination results notification.
- h. It is the responsibility of the Restricted License Holder to inform the SCPT if employment is discontinued for any reason.

2. Responsibilities of the Supervisors

- a. Both the Restricted License Registrant and the Supervisor share the responsibility to ensure that the Supervision Agreement requirement and the terms, conditions and limitations placed on the license are met.
- b. The key responsibilities include:
 - i. Completion of the Physical Therapist Supervision Agreement. This is a form that the Applicant, Supervisor(s) and Employer sign. It must be submitted with the original application form for licensure with SCPT. The Physical Therapist Supervision Agreement is a legally binding agreement.
 - ii. Ensuring that the Restricted License Registrant signs documents with the professional designation followed by the letters "RES" (resident) to indicate the Restricted License Holders' status.
 - iii. Providing a combination of direct and indirect supervision until full licensure is achieved:
Direct supervision – the supervisor is onsite and available to observe the registrant.
Indirect supervision – the supervisor is available by telephone, fax or email.
The Supervisor must provide 20% direct supervision until all indicators in the Monitoring tools are evaluated at "entry level". At that time, supervision may become indirect.

- iv. The following monitoring tools will be used (in addition to the 20% direct supervision) to evaluate the Restricted License Registrant's clinical performance:

Standard Chart Audit (Monitoring Tool 1)

Complete 2 chart audits per week for the first 4 weeks.

If there are no concerns during that time this monitoring will decrease to 2 chart audits every two weeks for the next 8 weeks or until the Restricted License Registrant becomes fully licensed.

Assessment of Clinical Performance (ACP) (Monitoring Tool 2)

The Assessment of Clinical Performance will be completed at the 6 week period. If all areas are designated as "entry level" then no repeat is required. If any areas were not at "entry level" the tool will be utilized again at 6 week intervals until the Registrant becomes fully licensed or meets the designated "entry" level.

- v. The Supervisor has an obligation to inform the SCPT of any act of professional misconduct or incompetence by the Restricted License Registrant.

NOTE: The College recognizes that monitoring will vary with the nature of the employment setting, the job description, available resources and delivery models. The College believes that these factors influence the rigor with which a supervisor must provide supervision and evaluate the minimum competence of the Restricted License Registrant. The ultimate goal of monitoring must be to ensure that the delivery of physical therapy services is done a manner which is safe and effective, to ensure that there is no undue risk of harm to the public.

3. Responsibilities of the Employer

- a. Completion of the Physical Therapist Supervision Agreement.
This is a form that the Restricted License Applicant, Supervisor(s) and the Employer/Department Manager sign. It must be submitted with the original application form for licensure with SCPT.
The Physical Therapist Supervision Agreement is a legally binding agreement.
- b. Remain informed of the Restricted License Registrant's performance.

4. Physical Therapist Supervision Agreement and Plan

- a. The Physical Therapist Supervision Agreement is an integral component of the application form and acts as a legally binding agreement between the Restricted License Applicant, Supervisor(s), Employer and the Saskatchewan College of Physical Therapists.
- b. The Physical Therapist Supervision Agreement must be completed, signed by the Restricted License Registrant, the Supervisor(s) and the Employer/Department Manager, dated and forwarded to the College with the Application form.
- c. The Physical Therapist Supervision Agreement is a condition under which the Restricted License is granted.
- d. Both the Restricted License Registrant and the Supervisor(s) share the responsibility to ensure that the supervision requirement and the terms, conditions and limitations placed on the license are met.
- e. It is acceptable for more than one licensed Physical Therapist to participate in meeting the supervision requirements. **All supervisors MUST sign the agreement.**
- f. A written supervision plan must be developed and should be kept in the employment file of the Restricted License Registrant. This plan must address:
 - i. Mechanism of supervision
 - ii. Mechanism of monitoring applicant performance
 - iii. Mechanism to be used to provide intervention.

- g. The SCPT does not require a copy of the supervision plan; however, the plan must be available to be provided to the SCPT on request (see Appendix 5 for a Sample Supervision Plan).
- h. The College will provide the Primary Supervisor with the following monitoring tools for recording the performance of the Restricted License Registrant:
 - i. Standard Chart Audit (Monitoring Tool 1)
 - ii. Assessment of Clinical Performance (ACP) (Monitoring Tool 2).

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APPENDIX 2

Monitoring Tool #1 – Standardized Chart Audit

	YES	NO
1) Medical legal standards:		
a) Client name, DOB, date		
b) Signed entries		
2) Assessment		
a) Consent received for assessment (written or verbal noted)		
b) Subjective complete (client concerns, pertinent medical history, mechanism of injury)		
c) Objective tests presented and charted (safety tests, red flags)		
d) Analysis (diagnosis, goals)		
e) Plan (prescribed treatment techniques, education, appropriate referrals initiated, treatment frequency and duration)		
3) Treatment		
a) Evidence of patient knowledge of treatment technique		
b) Evidence of verbal or implied consent to treatment session		
c) Evidence of ongoing assessment		
d) Treatment techniques are documented in specific detail (location, type or name of technique)		
e) Modalities and devices used in treatment are documented in significant detail		
f) Patient response to treatment noted		
g) Treatment altered if desired response not obtained		
4) Generalized Review		
a) The chart shows continued knowledge of consent		
b) Treatment is progressed/altered according to goals and treatment response		
c) Treatments applied are within the scope of physiotherapy		
d) Frequency of charting is appropriate to condition or facility guideline		

Please provide comment for any items answered NO

Additional Comments _____

Date _____ Registrants Name _____

Evaluator (printed) _____ Signature _____

GUIDELINES FOR USING MONITORING TOOL #1

When used for restricted licensees and conditional licenses as a result of shortage of hours:

Monitoring Tool 1-the Standardized Chart Audit will be used for a minimum of 3 months or until the registrant becomes fully licensed. The tool should be done a minimum of 2 times per week for the first four weeks, followed by 2 times every two weeks for the next 8 weeks if no concerns are identified in the initial 4 week period.

When used for conditional licensees as a result of disciplinary action:

In using this Monitoring Tool 1, there may be some questions that would be more heavily weighted according to the complaint or the infraction.

Some things to consider when using the chart audit include:

1. Sample Size: Depending on the clinical setting there may be a more rapid turn over of clients, or clients may be attending treatment for a longer period (e.g. musculoskeletal vs neurological).
2. Length of time in the Practice Setting: If the clinician has not been practicing in a particular area for a long time, a longer sample time may be considered (e.g. every three months for 18 months vs. every two months for 12 months).
3. Type of infraction: If the infraction in question was specific then the audit should target the client population (e.g. consent for spinal manipulation).
4. Timing you may choose to audit charts both before and after the infraction.
5. This monitoring tool must be kept confidential until such time as the individual becomes fully licensed, at which time this becomes the property of the fully licensed therapist.

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APPENDIX 3

Monitoring Tool #2 – Assessment of Clinical Performance (ACP)

The *Assessment of Clinical Performance* is the recommended evaluation tool for therapists undertaking the re-entry process and/or awaiting successful completion of the Physiotherapy Competency Exam (PCE). Copies of this monitoring tool are made available to supervising employers/therapists through the SCPT office.

This monitoring tool must be kept confidential until such time as the individual becomes fully licensed, at which time this becomes the property of the fully licensed therapist.

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APPENDIX 4

Monitoring Tool #3 – Client Survey

General Information

All information is to be read aloud by the interviewer, with the exception of the information provided in brackets. Information in brackets may be provided if the respondent has questions about Saskatchewan College of Physical Therapists. All responses may be recorded on the questionnaire by circling the appropriate answer. The respondent may opt to answer a survey by mail if they wish not to participate in the telephone survey.

Introduction to Client

Hello, this is _____ calling from the Saskatchewan College of Physical Therapists.

We are currently surveying people who have had physiotherapy. We want to make sure physiotherapists are giving safe and effective service. Can I ask you a few questions regarding these treatments? It will take less than five minutes.

(If they ask for more information: SCPT grants licenses to physiotherapists in the province of Saskatchewan. The purpose of the college is to protect the public through licensing, regulation, and discipline of physiotherapists. We are conducting standardized phone polls of clients, like you, who have recently undergone treatment. Any information disclosed will be kept in strict confidence with your name removed.)

Introductory Questions

1. What is your name (or the name of the person who had physical therapy)?

2. What is the name of your physical therapist?

3. Where did you receive PT services?

a) In hospital

b) At home

c) In a clinic

d) At work

e) Other (specify) _____

4. How many times did you have PT treatments?

a) 1 visit

b) 2-5 visits

c) Over 5 visits

5) Why did you see a physical therapist?

Statement Responses

The following questions may be answered with a simple yes or no response (other responses may be recorded in the space below).

1. Did the therapist inform you of any costs involved with treatment?
YES NO _____
2. Did the therapist ask if it was okay to do an assessment?
YES NO _____
3. Did the therapist tell you what they thought was wrong with you?
YES NO _____
4. Did the therapist explain this before doing the treatment?
YES NO _____
5. If the therapist discussed any information about you with other people, did he/she ask for your permission first?
YES NO _____
6. Did the therapist speak with other health care professionals if it was necessary?
YES NO _____
7. Did you feel confident that the therapist knew what he/she was doing?
YES NO _____
8. Did the therapist explain why they were doing the treatment?
YES NO _____
9. Was the therapist willing to discuss the goals of the treatments with you?
YES NO _____
10. Did the therapy treatment seem safe?
YES NO _____
11. Did the therapist ask if you were comfortable to continue with the treatment session?
YES NO _____
12. Did the therapist follow through with their treatment plans?
YES NO _____
- If 12. is answered NO, "Did the therapist tell you why they changed them?" YES NO _____
13. Did the therapist discuss your progress with you?
YES NO _____
14. Was the therapist respectful and professional at all times?
YES NO _____
15. Did the therapist explain things to you in a manner in which you could understand?
YES NO _____
16. Did the therapist give you a chance to ask questions?
YES NO _____
17. Did the therapist try to make sure you understood everything throughout the treatments?
YES NO _____
18. Would you like to tell us anything else regarding your therapist or the treatments?
YES NO _____

Thank you for your time. We will continue to strive to protect the public and encourage our members to safe, effective practice. If you have any further questions, you may contact the SCPT at 306-931-6661.

GUIDELINES FOR USING MONITORING TOOL #3

Monitoring Tool 3: Telephone survey. This would only be used with conditional licensees as a result of disciplinary action. It should be done approximately every two months, or 6 times per year. For a full-time practitioner with a large case load a sample 5 telephone surveys every 2 months is a guideline. When using the Monitoring Tool 3-the Telephone survey, a few factors must be kept in mind. As this tool has not been tested for reliability or validity, there is no pass/fail score. In using this tool, there may be some questions that would be more heavily weighted according to the complaint or the infraction.

Some things to consider when using the client survey include:

1. Sample size: Depending on the clinical setting there may be a more rapid turn over of clients, or clients may be on treatment for a longer period (e.g. musculoskeletal vs neurological).
2. Length of time in the Practice Setting: If the clinician has not been practicing in a particular area for a long time, a longer sample time may be considered (e.g. every three months for 18 months vs. every two months for 12 months).
3. Type of infraction: If the infraction in question was specific then the survey should target the client population (e.g. consent for spinal manipulation).
4. Timing of survey: You may choose to survey before and after the infraction.
5. Excessive Negative Responses: With the telephone survey, by answering negatively, the client's response may be to make a point (e.g. secondary gain issues, personality conflict in the clinic or the hospital with other practitioners, other conflict that may call for an early discharge). Therefore, excessive negative comments may negate the credibility of the survey with regard to the targeted questions.
6. Excessive Positive Responses: With the telephone survey, excessive positive responses may also be indicative of bias, and may not be an accurate reflection of the treatment process. There may be a bias towards "liking" an individual or they may wish to avoid conflict or future retribution.

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APPENDIX 5

SAMPLE SUPERVISION PLAN

SUPERVISION

A) Direct Supervision (20%) will be provided by _____
(Name of physical therapist)

Through the following means:

Daily observation _____
(E.g. 1.6 hrs of observation in a 8 hr work day)

OR

Weekly visits _____
(E.g. 1- 7.5 hr day in a 37.5 hr week)

OR

Combination of above _____
(E.g. 2 –4 hr mornings/ week)

B) Indirect Supervision (30 to 50%) will be provided by _____
(Name of physical therapist (s))

Through the following means:

Working in the same facility _____
(Name facility)

AND/OR
By phone/fax _____

AND/OR
By e-mail _____
(Identify numbers)

By e-mail _____
(Identify address)

CHART AUDITS

Chart audits (Tool 1) will be performed at identified intervals of (2 per week for first 4 weeks; followed by 2 per week for the next 8 weeks) by:

(Name of physical therapist(s))

EVALUATION

Assessment of Clinical Performance (ACP) (Tool 2) will be completed by _____
(Name of physical therapist) and presented to the
Registrant on _____ (date at six week). If all standards are not at
entry level, and the Registrant has not completed the PCE, it will be repeated on
_____ (date 12 weeks).

Physical Therapist Supervision Agreement

Part 1

I, _____ (Name of Restricted License Applicant)

- Agree to comply with the terms, conditions, limitations associated with a Restricted License to Practice.
- Agree that I shall only practice as a member of the SCPT holding a Restricted Practice License while under the supervision of the person(s) named in this agreement under the jurisdiction of the employer named in my application. I am aware that I will continue to work under a Restricted License until I show the SCPT proof of my successful completion of both the written and clinical components of the Physiotherapy Competency Exam (PCE).
- Agree to notify the SCPT of any changes to my Supervision Agreement AND to notify the Registrar immediately of any changes in my home or workplace address, any changes in employment or any intention to not renew the license. I am aware that **failure to notify the SCPT** of the above can result in **immediate revocation** of my license.
- Agree to inform my supervisor of my examination results immediately upon receipt of result notification.
- Understand the terms, conditions and limitations imposed on my certificate and acknowledge the same under which I am to practice.

Part 2

I, _____ (Name of Primary Supervisor) _____ (SCPT Registration #)
 _____ (Name of Alternative Supervisor #1) _____ (SCPT Registration #)
 _____ (Name of Alternative Supervisor #2) _____ (SCPT Registration #)

- Agree to provide supervision for the above named applicant in accordance with the SCPT Restricted Licence Guidelines.
- Agree to continue supervision until the Restricted License Applicant is eligible for full licensure.
- Agree that in conjunction with the applicant, I will develop and comply with a written supervision plan that will include but not be limited to:
 - ☐ Monitoring of the applicant's clinical practice
 - ☐ Providing personal intervention OR complying with alternate intervention arrangements as outlined in the Restricted Licence Guidelines
 - ☐ Direct supervision until the supervising therapist is satisfied that the applicant meets all charting and clinical requirements at entry level performance as defined in the Assessment of Clinical Performance (ACP) tool, at which time indirect supervision may occur.
 - ☐ Supervision is to be carried out by a full practicing physical therapist.
- Agree to immediately report to the Registrar in the event that the applicant performs an act of professional misconduct or incompetence.
- Agree to notify the Registrar immediately if I am no longer able or willing to continue to fulfill my responsibility as a supervisor.

Part 3

I, _____ (Name of Employer/Department Manager) _____ (SCPT Registration #,
 if applicable) agree to remain informed of the Restricted License Applicant's performance.

NOTE: The supervision agreement (this form) **must** be submitted to SCPT **AND** all physical therapists who are supervising the licensee **must** sign this agreement. The supervision plan does not need to be submitted to the SCPT.

Applicant Signature _____

Date _____

(W) Phone # _____

Primary Supervisor Signature Date (W) Phone #

Alternative Supervisor #1 Signature Date (W) Phone #

Alternative Supervisor #2 Signature Date (W) Phone #

Employer/Department Manager Signature Date (W) Phone #

Location of Practice (Address and Department / Unit if applicable)