

COUNCIL
MINUTES



SCPT Council Meeting held at the Travelodge Hotel, Regina SK, on March 4, 2017.

Present: S. Sarauer; C. Pederson; T. Descottes; H. Burrige E. Rackow; J. Grant; J. Hunchak; R. Porter; K. Horvey; C. Cuddington

In attendance: L. Kuffner (Executive Director)

Absent: J. Yathon; B. Green; S. Lovo Grona

1. **Call to Order** - The meeting was called to order by S. Sarauer, President, and meeting Chair, at 8:30. T. Descottes will take minutes for this meeting.
2. **Opening Remarks of Chair**
3. **Agenda & Declaration of COI**
 - 3.1. **Approval of Agenda**

Motion: That the agenda be approved as circulated.

Moved by: C. Pederson

Seconded by: H. Burrige

CARRIED: MOTION: 17.016

Changes: 5.7 IFD Discipline Terms of Reference will be pulled from the agenda and will be deferred to Pre-AGM meeting
 - 3.2. **Declaration of COI** – Lynn for 5.10
 - 3.3. **Minutes of previous Council meetings**
 - 3.3.1. **January 14th Council Meeting Minutes**

Motion: to approve the November 5 meeting minutes as circulated

Moved by: J. Grant

Seconded by: R. Porter

CARRIED: Motion:17.017

3.4. Consent Agenda

Motion: that the consent agenda be approved as circulated

Moved by: E. Rackow

Seconded by: K. Horvey

Discussion: 3.5 RMS Committee Update will be pulled from the consent agenda and will be item 5.20

CARRIED: Motion: 17.018

3.5. Records Management Committee Update

3.5.1. RMS Minutes-Jan 30, 2017

3.5.2. RMS Action Plan Summary

3.5.3. RMS Project Map

3.6. SPT Project Map

3.6.1. Academic Affairs Approved School of PT CRC

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: H. Burrige

CARRIED: MOTION: 17.019

Discussion: expecting different numbers for restricted licenses now that exam results are in; still 15 outstanding members that have not renewed license yet; having some trouble with Alinity- renewal did not open on time and was got shut down early;

4.2. Insurance

Motion: increase coverage for sewage peril (cost \$83.70) and electronic data processing equipment (cost \$27.00)

Moved by: R. Porter

Seconded by: C. Pederson

CARRIED: MOTION: 17.020

Discussion: question what about the spread of fire and what would be the coverage for us-tenant liability. Is everyone covered in the building? Recommendation from Judy to check Cooperators on next renewal since they have extremely competitive rates in the non profit/community sector.

4.2 ACTION: L. Kuffner to follow up re: Tenant Liability Insurance

5. Old Business

5.1. January Meeting Action Plan Review

5.1. Action: (if any)

-
-
-

5.2. 2017 Budget

5.2.1. Working Budget

Motion: to approve 2017 budget as presented with increased NIRO budget to \$800 and decreased budget to EI Expense \$1170 and CPP Expense to \$5144

Moved by: H. Burrige

Seconded by: R. Porter

CARRIED: MOTION: 17.021

Discussion:

Investments: The current 2016 surplus is \$96,000 however; this amount will be adjusted as The Actual 2016 of \$96,000 isn't what is actual will be: money will be put into unrestricted reserve, designated funds, amortization will be added once the Thorp audit is completed and 2016 rent utilities has not come in yet- so actual will be approx. \$2000-3000 by AGM. Creation of unrestricted reserve to allow for the process of going paperless in the budget- \$20,000 number decided on as Lynn did brief environmental scan and found cost of \$15,000 and costs of teleconferences/consultation; if further costs incurred with paperless process could be pulled from other areas. ; awaiting bill for utilities for our rental property; Thorp currently doing our audit; haven't had as much DCC and PCC costs have been lower than expected for 2016 or PCC costs for 2016; our short- term investments are coming close to \$100,000 and we are unable to keep the account higher than \$100,000 as we are a non-profit organization and new account will need to be opened;

Income- less practicing members but higher restricted members- budgeted more conservatively for 2017 for membership numbers and conservatively budgeted for corporations;

Committee Expenses- NIRO increase budget to \$800 as there is a spring meeting and possibility of a fall meeting

Support & Website- 2017 budget is much higher than 2016 for computer support as we are trying to go paperless and we may s we may need to update Alinity until we have a new Records Management System

Credit Card Fees- the cost of what we have to pay so that our membership can pay by credit card on the website for membership renewal- finance committee to note for next year's budget to determine how much per credit card charge transaction and make a more accurate budget line for next year's budget

Office Supplies- increased budget to office supplies as for the new registrant packages that are being sent out

Registration and Renewal- increased to allow for reimbursement of CRC for audited members

Legal Fees- increased actual 2016 is a result of work with incorporations. This is expected to be a one time expense for incorporations

Rent- is increased for 2017 as it will include the utilities bill and a full year in the new space (which is a higher rent than the previous location)

Telephone- Lynn's cell phone bill is going into Office supply expense currently and not into telephone; Heather recommends keeping cell phone off of telephone line at present

EI Expense- the rate has decreased so budget item could actually be decreased to \$1170. Also, Lynn does not contribute to as she is over 65 years of age.

CPP Expense- the rate has decreased so budget item could be decreased to \$5144

5.2 ACTION: H. Burrridge to investigate budget item 5420 EI expense for 2016

5.3. 2017 Honorariums

5.3.1. Current Honorariums

5.3.1.Discussion: will maintain honorariums at current level as they are consistent with other organizations. No motion required. For discussion purposes only

Motion: That no increases or decreases be made to current SCPT honorariums

Moved by: No motion- just for discussion

Seconded by:

Discussion:

•

5.3 ACTION: H. Burrridge to have Finance committee re-evaluate honorarium rates when finance committee makes next year's budget

5.4. 2017 Honorariums signing authority

Motion: to approve \$150 honorarium for the member with signing authority

Moved by: E. Rackow

Seconded by: R. Porter

Discussion: None

CARRIED: Motion: 17.022

5.5. Practice Guideline # 21 – Revised

5.5.1. Practice Guideline #21

Motion: that Council approve the amended attached Practice Guideline #21.

Moved by: E. Rackow

Seconded by: J. Grant

Discussion: Council is in agreement with the revised guideline and thanks the legislation committee and content experts for their extensive work in this area none

CARRIED: Motion: 17.023

5.5 ACTION: T. MacSymetz to update website with Practice Guideline #21

5.5 ACTION: E. Rackow to follow up with ask content experts if need for recommendation regarding need for an article in Momentum regarding Clinical Practice Guideline #21

5.6. Strategic Planning Mini Session

Discussion:

- The bullets are taken from e-vote and from the members survey
- **Continuing Competency**
 - Continue to submit to the ministry for opening of the Act to address continuing competency (for development for Continuing Competency Profile)
 - Raise member awareness of CCP requirements
 - Ensure member compliance
 - Advances practice- what can we do to navigate the way for advanced practice- SCPT is not the “driver” of leading practice; we would help to have the legislation to support what happens with changing practice but SPA/School are the advocates for the profession
 - Liaise with SPA and SPT to remain aware of advanced practice
 - CCC to investigate best way to achieve this- different program
- **Communications**
 - 3rd bullet can be removed as it is posted, etc and will be met
 - Communications planning document to be created- Communications with EDR and Office Manager to develop and to bring back to Council to decide NOVEMBER
 - Perhaps highlight clinical practice guidelines in the Momentum- in future editions
 - Articles in the Momentum could be linked to the clinical practice guidelines on the website
 - Website Consistency/updating- Communications Committee and Office Manager
- **Succession Plan**
 - Mentoring for executive positions and committee chairs

- Possibility for past president position on council- would increase the time commitment for president position- four year (president elect, president, and past president)
- Refine nominations processes- to be done by Communications committee and Office Manager
- Explore a student representative on the committee- nonvoting member- Legislation committee to look at and bring back to Council
- **Risk Evaluation and Mitigation**
 - To do a workshop for Council to educate on Risk and Mitigation for better understanding of the topic- to be done by the end of the year (need to talk to Brandy about it)
 - At June meeting with the Ministry- should ask if there are roles/risks that we are not aware of that we need to be doing?
- **Policies and Procedures**
 - Prioritize development of policies and procedures
- **What to be shared at AGM?**
 - Draft of strategic plan following this meeting will be shared with council and then included with AGM materials for member information
 -

5.6 ACTION: B. Green to share high level 5 key areas and new mission statement at AGM

5.6 ACTION: L. Kuffner to share revised copies of strategic plan to Council

5.6 ACTION: B. Green to investigate risk seminar

5.7. Discipline Committee Terms of Reference-TBA

5.7.1. Discipline Committee Terms of Reference-TBA

Motion: to Approve the Discipline Committee Terms of Reference, as circulated

Moved by:

Seconded by:

Discussion:

●

CARRIED: MOTION:

5.7 ACTION: To be deferred to next meeting Pre-AGM

5.8. Sharing members response with complainant

5.8.1. National/Provincial info re: sharing members response with complainant

Motion: Motion that it be that SCPT policy not to share the member's initial written response to complaint with complainant

Moved by: C. Pederson

Seconded by: E. Rackow

Discussion: from the environmental scan- the answer of “no” sharingposting were as a default as in they had not thought of the question of whether or not to sharepost; the PCC has a responsibility to discover if there is a disparity between the complainant and the member; sharing the member response may cause increased inflamed relationship/situation and may hinder the PCC investigation; if the member knew that their response would be shared at some point their response would likely be quite different;

Discussion after motion: sharing of the response would further inflame the situation; our Legislation does not permit us to mediate this situation at present unless the Act is opened; mediation has to be reached prior to the complaint being forwarded to the meeting the PPCC

CARRIED: MOTION: 17.024

5.8 ACTION: L. Kuffner to update complaints process document and liase with PCC chair to ensure PCC materials reflect this decision

5.9. Posting Notice of Discipline Hearing to Website

5.9.1. Notice of Hearing

Motion: Motion that a notice of Discipline Hearing be posted to the discipline area of the SCPT website once notice of hearing has been sent to all parties involved. This notice will outline the name of the member and the date and time of the hearing.

Moved by: H. Burridgeeather

Seconded by: J. Grant

CARRIED: MOTION: 17.025udy

Discussion: if there are concerns that are criminal concerns that the PCC could make decision that license could be suspended until the decision/hearing made in public safety issues (refer to Act for further details); don't have firm timelines as it depends on how quickly legal counsels can meet to agree on agreed upon facts and then set a hearing; will not guilty discipline hearings be posted to the website-require clarification from the DC for this item

Motion: That notice of discipline hearing be removed from the website immediately following the completion of the hearing

Moved by: H. Burridge

Seconded by: E. Rackow

CARRIED: MOTION: 17.026

5.9 ACTION: L. Kuffner to update the process document to reflect posting of hearing

5.9 ACTION- L. Kuffner to determinefollow up with Justin that if something is removed from the website, is does it remain searchable

5.9ACTION: J. Grant to take back to DC to review the sharing of not guilty findings from discipline hearings

5.10. Council and EDR Education Funding Requests

5.10.1. EDR Education Funding Submission- L. Kuffner excused at 11:43

Motion: To approve EDR attendance at CNAR Conference in October 2017

Moved by: H. Burrige

Seconded by: E. Rackow

Discussion: None

CARRIED: MOTION: 17.027

Motion: To approved EDR attendance at Clear International Congress November 2017

Moved By: R. Porter

Seconded by: E. Rackow

Discussion: Is the agenda known for this conference- if it's too international that it might not be too applicable for our EDR? What happens if there is something offered occurs more locally that is more applicable to the SCPT and the budget is already used? It may be difficult to justify to the membership the cost of EDR education and the cost of the courses/conferences; we may need to set a parameter for EDR education; at previous CNAR conference other EDR's were receivinggetting education on how to respond to media inquiries/the public/etc- possibility of receiving education for same; what about the possibility of cost sharing- ie council only pays for the registration portion or airfare.

DEFEATED:

Motion: To decrease EDR education budget to \$5000 for 2017 budget

Moved by: R. Porter

Seconded by: C. Pederson

CARRIED: Motion: 17.028

5.10 ACTION: S. Saraurer to discuss with L. Kuffner

5.11. AGM Remote Access Option

5.11.1. Remote access voting-Legal advice

Motion: to allow SCPT Members to access the 2017 AGM via remote web ex access provided they preregister for the event at least 7 days in advance

Moved by: E. Rackow

Seconded by: S. Lovo Grona

CARRIED: Motion: 17.029

Discussion: S. Lovo Grona tacey to prepare a document with a disclaimer about the unpredictability of wifi. Was Cathy suggested to have hat having two large centres- Saskatoon and Regina to have sites. HeatherQuestions asked re: asked about feasibility of having to rent a second space to have a second. SCPT didn't receive any motions from the floor. Was Sarah suggested s that it might be a good idea that as it is a trial year without voting it is a good opportunity to trial , having people log in to access from all areas. If it's successful- we can look at voting option for another year. S. Lovo Grona tacey- would prefer if people would preregister so that we can send out invitations ahead of time to allow for problem solving ahead of time.

HeatherTreasurer encourages S. Lovo Grona tacey to provide SCPT invoice for her services. S. Lovo Grona tacey will keep a log of hours/processes.

5.11 ACTION: S. Saraurer to communicate to members that questions can be asked and comments made via the chat function and/or their video web cam throughout the AGM following meeting rules (SCPT administrative bylaws) and let members know they cannot vote remotely

5.11 ACTION S. Lovo Grona- to help find someassist with facilitating additional more Brag N' Steal submissions sessions for the AGM

5.12. CRC Audit Procedure Update 2

5.12.1. CRC Environmental Scan

Motion: The SCPT perform a random audit of criminal record check with 2% of membership annually with cost reimbursed by the SCPT.

Moved by: C. Cuddington

Seconded by: K. Horvey

CARRIED: MOTION: 17.030

Discussion: Electronic signature to declaration that they don't have a criminal record check- if they lied it is fraud and there is action against that; what are the costs going to be incurred if we do an audit; we will need to have a process in place if we are going to have audit; why are we picking CRC as the audited area; The \$35 is just for a regular criminal record check- we can't ask for a vulnerable criminal record check (legally); don't think that the cost is the same across the province; once the cost is established we will work it into the budget; regulatory bylaw states will provide a satisfactory criminal record check- the Ministry/Registration committee said declaration is sufficient ; Jackie feels that all new applicants should have to provide a criminal record check on initial application

5.12 ACTION: L. Kuffner will share information with share with CCC regarding audit procedure

5.12 ACTION: L. Kuffner and CCC will create policy for CRC auditing of membership

5.13. Support Worker Committee Update

5.13 ACTION: C. Pederson to take back to Support Worker Committee to request review of the Competency profile for PTA's, practice guideline 15 and Regulatory Bylaws 24

Discussion: Competency profile has been in existence for a while but committee hasn't met in approx. 2 years. After the review by the committee- it may be deemed that the support worker committee is unnecessary. It's a good area to revisit as it is a liability area.

5.13 ACTION: C. Pederson to take back to Support Worker Committee to request review of the Competency profile for PTA's practice guideline 15 and Regulatory Bylaws 24

5.14. Sask Physio Magazine Recommendation

Discussion: SCPT doesn't have jurisdiction over publications- we have protection of title but not protection of practice termsover publications. A member has to ensure compliance with bylaws. In the environmental scan- the 4 provinces that responded stated that it was the members' responsibility to ensure compliance with bylaws.

5.14 ACTION: T. Descottes to consider a future article in Momentum on protection of title and protection of practice terms- summer or fall

5.14 ACTION: S. Saraurer to communicate with Chris at SPASPA President regarding about SCPT rRecommendation on publications

5.15. CAMPT Update- no update

5.16. IFD Core Standards of Practice

5.16.1. Core Standards Document-ATTACH

5.16.2. Core Standards of Practice Summary Document

Motion: that Council adopt the Core Standards Document in its entirety as a complimentary document to SCPT's current legislation to be used for educational purposes for Members.

Moved by: E. Rackow

Seconded by: R. Porter

CARRIED: Motion: 17.031

Discussion: As a council we can adopt the document. Do we need to table the discussion so it can be fully thought about by Council as it's such a large document? Legislation committee has been working with the document for the last 6-7 months. Summary document was a great overview done by Legislation committee. Possibility of including this in our own Regulatory bylaws as a reference

5.16 ACTION: Ta. MacSymetz to update the website with this information in the area with our current practice guidelines

5.16 ACTION: S. Saraurer to send the review summary to the PSOP committee to address the gaps that are from the Core Standards Document

5.16 ACTION: E. Rackow to provide communication to the members to provide education on what the document means and how it affects practice

5.16 ACTION: L. Kuffner to let the School of Physical Therapy know about the adoption of the Core Standards Document

5.17. SPA/SCPT Joint Meeting

Motion: to Hold joint meeting with SPA June 3, 2017

Moved by: E. Rackow

Seconded by: J. Grant

CARRIED: Motion: 17.032

Discussion: None

5.17 ACTION: B. Green to work with SPA president to develop make a firm agenda for the meeting on June 3/17

5.18. IFD Cross Border Physiotherapy

5.18.1. MOU Cross Border Physiotherapy

Motion: that Council adopt the MOU for Cross Border Physiotherapy as presented by the Registrar's Committee for implementation in Saskatchewan.

Moved by: E. Rackow

Seconded by: J. Hunchak

CARRIED: Motion: 17.033

Discussion: MOU was mentioned at the CNAR conference at November 2016. Cindi comments to 3f- speaks to offering a reduced rate of renewal/registration fee. If adopted would have to make amendments to regulatory bylaws. Could be disciplinable in each jurisdiction that practice of MOU.

Opposed: 1

- 5.18 ACTION: S. Sarauer to refer to PSOP for development of practice guidelines**
- 5.18 ACTION: C. Cuddington to refer to registration committee for development of MOU registration category**
- 5.18 ACTION: E. Rackow to refer to legislation committee to develop bylaw amendments**

5.19. Code of Ethical Conduct

5.19.1. Harmonized Code of Ethical Conduct

5.19.2. Code of Ethical Conduct Discussion Paper

Motion: that Council adopt the national Code of Ethical Conduct as submitted by the Registrars Committee in principle.

Moved by: E. Rackow

Seconded by: C. Pederson

CARRIED: Motion: 17.034

Discussion: Council approves in principle. Will require regulatory bylaw amendments to include in legislation as code of ethics is a part of regulatory bylaws. **None**

5.19 ACTION: E. Rackow to take back to Legislation committee to investigate inclusion of national COE in future regulatory bylaw amendments

5.19 ACTION: T. Descottes to take to Communications committee future article in Momentum regarding national COE document (fall)

5.19 ACTION: T. MacSymetz to update website with disclaimer written by E. Rackow and national document

5.19 ACTION: L. Kuffner to forward disclaimer and national COE to School of Physical Therapy

5.20 Records Management Committee Update (item 3.5 pulled from consent agenda)

5.20.1 RMS Minutes- Jan 30,2017

5.20.2 RMS Action Plan Summary

5.20.3 RMS Project Map

Discussion: Meeting with consultant has occurred and now Saurav have a partial document with a gap analysis started. Lynn did environmental scan about use of consultants- question asked what can a consultant provide that we cannot in house? Answer was provided the IT Much can be done in house but we do need IT expertise to meet our needs expertise to meet our needs..

Lynn is keeping a list of prospective vendors. Consultant would allow identification of gaps in knowledge. Security concerns brought up by Council.

6. New Business

6.1. AGM 2017 Planning Session

Motion:

Moved by:

Seconded by:

Discussion: Does Council need to be present in the room? Can Council participate remotely?

Answer was yes

Motion: none required. For discussion purposes only.

6.1 ACTION: T. Descottes to get public representative report

6.1 ACTION: S. Sarauer to finish agenda and post to website

6.1 ACTION: S. Sarauer/L. Kuffner to include remote access information on poster

6.2. PCC Terms of Reference

6.2.1. PCC Terms of Reference

Motion: Approve PCC TOR document so it may be posted to the website

Moved by: E. Rackow

Seconded by: J. Hunchak

CARRIED: MOTION: 17.035

Discussion: Jacquie- question regarding the line of TOR that states may be periodically be amended with majority vote of committee. Council cannot be involved in PCC operations. Council in agreement with terms of reference as submitted

6.2 ACTION: T. MacSymetz to update website with PCC TOR

6.3. Practice Hours Log Proposal

Motion as amended:Discussion: CCC has proposed development of a practice hours log document. Council supports work by the CCC to develop a practice hours log document as part of development of continuing competency programs. Will need associated audit procedures document

6.3 ACTION: L.Kuffner/S. Sarauer to refer back to CCC to develop practice hour log and audit process and bring back to Council

6.4 Approval for cost of recorders for PCC investigations

Motion: approve the purchase of up to 3 video voice recorders of the cost of \$60-80 by PCC

Moved by: H. Burrige

Seconded by: E. Rackow

CARRIED: Motion: 17.037

Discussion: These recorders will be used for recording interviews with complainants, members, etc. This is a recommendation that came out of the PCC investigations training that PCC members recently attended.

6.4 ACTION: S. Sarauer to follow up with P. Beharry indicating approval let P. Beharry know

7. Other Business

7.1. Action Plan Review (place all actions from highlighted actions above – include agenda item with each action to keep track of them)

- **4.2 ACTION:** L. Kuffner to follow up re: Tenant Liability Insurance
- **5.2 ACTION:** H. Burrige to investigate budget item 5420 EI expense for 2016
- **5.3 ACTION:** H. Burrige to have Finance committee reevaluate honorarium rates when finance committee makes next year's budget
- **5.5 ACTION:** T. MacSymetz to update website with Practice Guideline #21
- **5.5 ACTION:** E. Rackow to ask content experts if need an article in Momentum regarding follow up with content experts for recommendation regarding need for an article in Momentum regarding Clinical Practice Guideline #21
- **5.6 ACTION:** B. Green to share high level 5 key areas and new mission statement at AGM
- **5.6 ACTION:** L. Kuffner to share revised copies of strategic plan to Council
- **5.6 ACTION:** B. Green to investigate risk seminar
- **5.7 ACTION:** To be deferred to next meeting Pre-AGM
- **5.8 ACTION:** L. Kuffner to update complaints process document and liase with PCC chair to ensure PCC materials reflect this decision
- **5.9 ACTION:** L. Kuffner to update the process document to reflect posting of hearing
- **5.9 ACTION-** L. Kuffner to determine with Justin that if something is removed from the website, is it searchable follow up with Justin to determine if something is removed from the website, does it remain searchable
- **5.9 ACTION:** J. Grant to take back to DC to review the sharing of not guilty findings from discipline hearings
- **5.10 ACTION:** S. Saraurer to discuss with L. Kuffner
- **5.11 ACTION:** S. Saraurer to communicate to members that questions can be asked and comments made via the chat function and/or their video web cam throughout the

AGM following meeting rules (SCPT administrative bylaws) and let members know they cannot vote remotely

- 5.11 ACTION S. Lovo Girona- to assist with facilitating additional help find some more Brag N' Steal submissions sessions for the AGM
- 5.12 ACTION: L. Kuffner will share information with share with CCC regarding audit procedure
- 5.12 ACTION: L. Kuffner and CCC will create policy for CRC auditing of membership
- 5.13 ACTION: C. Pederson to take back to Support Worker Committee to request review of the Competency profile for PTA's, practice guideline 15 and Regulatory Bylaws 24
- 5.14 ACTION: T. Descottes to consider a future article in Momentum on protection of title and protection of practice terms- summer or fall
- 5.14 ACTION: S. Saraurer to communicate with Chris at SPA SPA President about regarding SCPT Recommendation on publications
- 5.16 ACTION: Ta. MacSymetz to update the website with this information in the area with our current practice guidelines
- 5.16 ACTION: S. Saraurer to send the review summary to the PSOP committee to address the gaps that are from the Core Standards Document
- 5.16 ACTION: E. Rackow to provide communication to the members to provide education on what the document means and how it affects practice
- 5.16 ACTION: L. Kuffner to let the School of Physical Therapy know about the adoption of the Core Standards Document
- 5.17 ACTION: B. Green to work with SPA president to make a firm agenda for the meeting on June 3/17 to develop a firm agenda for the meeting on June 3/17
- 5.18 ACTION: S. Saraurer to refer to PSOP for development of practice guidelines
- 5.18 ACTION: C. Cuddington to refer to registration committee for development of MOU registration category
- 5.18 ACTION: E. Rackow to refer to legislation committee to develop bylaw amendments
- 5.19 ACTION: E. Rackow to take back to Legislation committee to investigate inclusion of national COE in future regulatory bylaw amendments
- 5.19 ACTION: T. Descottes to take to Communications committee future article in Momentum regarding national COE document (fall)
- 5.19 ACTION: T. MacSymetz to update website with disclaimer written by E. Rackow and national document
- 5.19 ACTION: L. Kuffner to forward disclaimer and national COE to School of Physical Therapy

- 6.1 ACTION: T. Descottes to get public representative report
- 6.1 ACTION: S. Sarauer to finish agenda and post to website
- 6.1 ACTION: S. Sarauer/L. Kuffner to include remote access information on poster
- 6.2 ACTION: T. MacSymetz to update website with PCC TOR
- 6.3 ACTION: L. Kuffner /S. Sarauer to refer back to CCC to develop practice hour log and audit process and bring back to Council
- 6.4 ACTION: S. Sarauer to let P. Beharry know follow up with P. Beharry indicating approval
-

7.2. Momentum and website

- New Committee/Council listings
- Council profiles
- Core Standards of Practice- Liz education of membership

7.3. In camera – none required planned

8. Adjournment: S. Sarauer adjourned meeting at 2:24pm

Next Meeting: April 21, 2017 @12:00

Signature  (President) April 21/17 (Date)

Signature  (Secretary) April 21/17 (Date)

Item for: Council Meeting	Date: March 4, 2017	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 <input checked="" type="checkbox"/> Information		
Overview: The Issue: Suggested Action: Submitted by: Lynn Kuffner Attachments:		

Please add correct information and forward to admin@scpt.org

Registrar's Report

Practicing:	752
Restricted:	25
Non-practicing:	29
Academic	<u>1</u>
Total	807

Permitted Professional Corporations: 37

Professional Conduct Committee Report

New cases (since last report):	1
Open cases:	1
Referred to discipline for:	
Recommend Dismissal	0
ADR	0
Hearing	0

Discipline Committee Report

Referrals received from PCC (since last report):	0
Cases in process:	0
Cases closed: Dismissed	0
ADR	0
Hearing Concluded	0

SCPT Practice Guideline # 21 – Spinal Manipulation

Background

Section 2 of the SCPT Regulatory Bylaws defines “Specialized physical therapy procedure” to include “manipulation”. Subsection 18(1) states: *“No member shall perform a specialized physical therapy procedure unless he or she has completed an educational program described in this section and recognized by the council.”*

Section 18 (6) states: *“To be recognized by the council, a course in spinal manipulation must:*

(a) be included in a recognized educational program:

(b) be provided by a member organization and meet the standards of the International Federation of Orthopedic Manipulative Physical Therapists; or

(c) provide education to the same level as a course described in clause (a) or (b).”

Recognized Educational Programs

- Council recognizes the courses included in a recognized educational program provided by Canadian Universities as providing the education and training necessary to perform spinal manipulation as taught in those programs.
- Council recognizes education programs that meet the standards of the International Federation of Orthopedic Manipulative Physical Therapists (IFOMPT) provided by institutions in Canada and in other countries as providing the education and training necessary to perform spinal manipulative techniques in taught in those courses and programs. (please refer to www.ifompt.com for details).

Practice Guidelines

1. A physical therapist may perform spinal manipulation to the competencies for which they have been educated and trained in their recognized educational program and courses or other course recognized by council.
2. Physical therapists practicing spinal manipulation are expected to use professional judgement and act within their individual level of competence.
3. Physical therapists must practice only those manipulative techniques for which they have been trained in and must have completed any and all requirements for that course/level.

MEMORANDUM OF UNDERSTANDING (“MOU”)

CROSS BORDER PHYSIOTHERAPY

This MOU is approved in principle as of October 30, 2016 and made effective regulators signing the MOU.

BETWEEN: Physiotherapy Regulatory Colleges in Canada Outlined on the Signature Page 5

OVERVIEW:

This MOU intends to use existing physiotherapy regulatory frameworks in Canada to enable cross border physiotherapy using tele-rehabilitation or in person services where that is geographically possible or when services are not otherwise available. Cross border refers to services performed across a provincial border for the purpose of transferring expertise or physiotherapy knowledge, improving individual choice and enabling greater efficiencies in providing physiotherapy through cross border regulatory co-operation. This MOU does not consider reimbursement issues which are not regulatory matters but it does consider all matters of regulatory importance.

DEFINITION:

Telerehabilitation refers to the provision of physiotherapy services which involves communication with a patient who is remotely located from the primary physiotherapist providing service. It can include mediums such as videoconferencing, email, apps, web-based communication, wearable technology. Personnel may or may not be present with the patient. All of the professional behaviours involved in the exchange of information are the same as if the patient is in direct contact with the Physical Therapist.

Telerehabilitation is a modality that can be used to serve the public interest by delivering services not otherwise available without compromising quality of care or regulatory accountability. Services should always be provided in accordance with standards of practice or any applicable guidelines.

In person services are those physiotherapy services provided by a physiotherapist in direct face to face contact with a person.

PRINCIPLES:

- A) Physiotherapists whose primary practice is in one province (the “primary jurisdiction”) may deliver physiotherapy services to patients who are physically situated in another province as patient interest demands (“cross-border services”)
- B) This MOU applies to services provided for the purpose of continuing to provide patient care for patients whose physiotherapy began in the primary jurisdiction and who would benefit from continued and time-limited service in the secondary jurisdiction (the “services”) or where services are not otherwise available and the patient would benefit from such services.
- C) These services may be delivered using information and communication technologies or in person; (hereinafter referred to as “Cross-border Services”)
- D) Whether the services are provided as cross-border or in person, they are intended to provide follow-up care to existing patients only and must not be provided where the best interests of the patient would be to find in-person care in the patient’s own jurisdiction;

- E) Physiotherapy regulators require clarity with respect to the regulatory requirements that apply to physiotherapists who are providing the services referred to in this agreement;
- F) Physiotherapists who are providing these services require clarity with respect to the regulatory requirements that apply when they are providing care to patients in another jurisdiction (the “secondary jurisdiction”);
- G) The parties to this MOU (the “Parties”) recognize the value in having a common understanding regarding the regulatory requirements that exist for the effective regulation of practitioners providing cross-border services;
- H) The Parties wish to adopt regulatory requirements that remove unnecessary barriers that could discourage practitioners from providing cross-border services, while ensuring that the public are adequately protected; and
- I) The MOU is intended to establish how Parties will address key regulatory requirements (registration, continuing competence, insurance and discipline) for practitioners providing cross-border services in another province or territory which is a Party to this MOU.

REGISTRATION IN ALL JURISDICTIONS WHERE PATIENTS ARE PHYSICALLY SITUATED:

- 1) A Practitioner must be registered as a member of the physiotherapy regulatory body in the jurisdiction where the physiotherapist resides and where the majority of their patients are physically situated (“Primary Jurisdiction”).
- 2) A Practitioner who intends to provide cross-border services must be registered as a member of the physiotherapy regulatory body in all other jurisdictions where the patients who are receiving physiotherapy services directly from the physiotherapist are physically located (“Secondary Jurisdiction”).

REGISTRATION IN SECONDARY JURISDICTION:

- 3) Each of the Parties will endeavor to implement fair, transparent and consistent registration and renewal processes for Practitioners engaging in cross-border services by:
 - a) Creating policies or guidelines outlining the registration requirements for Practitioners who intend to provide cross-border services and who are seeking registration in a Secondary Jurisdiction;
 - b) Establishing that Cross-border Practitioners may be registered in the Secondary Jurisdiction for the purpose of providing Cross-border Services by providing proof of registration, good standing and any other requisite information from the Primary Jurisdiction;
 - c) Establishing that:
 - i) Cross-border Practitioners may renew their registration in the Secondary Jurisdiction annually by providing evidence to the Secondary Jurisdiction confirming that the Practitioner continues to be a member in good standing in the Primary Jurisdiction; and
 - ii) Cross-border Practitioners are not required to fulfill other requirements that may exist in the Secondary Jurisdiction that do not apply in the Primary Jurisdiction such as

specific continuing competence program requirements that may differ between jurisdictions.

- d) Creating or using an existing appropriate category or register for Cross-border Practitioners who are only seeking registration in the Secondary Jurisdiction for the purpose of providing Cross-border Services;
- e) Determining whether to place a limitation or condition on the Cross-border Practitioner's annual practice permit restricting practice in the Secondary Jurisdiction to the provision of Cross-border Services;
- f) Charging a reduced registration or renewal fee that reflects the limitations on practice in the Secondary Jurisdiction; and
- g) Seeking legislative amendments if such amendments are necessary in order grant registration in the Secondary Jurisdiction on the basis set out above.

CONTINUING COMPETENCE:

- 4) The Parties recognize that continuing competence requirements and programs may differ between jurisdictions. The Parties agree that:
 - a) physiotherapists must comply with continuing competence requirements in their Primary Jurisdiction; and
 - b) if the continuing competence requirements between the Primary and Secondary Jurisdictions differ, compliance with the competence requirements in the Primary Jurisdiction will be sufficient for the purposes of renewing registration in the Secondary Jurisdiction.

INSURANCE:

- 5) Cross-border practitioners must hold personal liability insurance in an amount that meets the minimum requirements of both jurisdictions when engaged in cross-border physiotherapy. Where there is a difference in minimum requirements, the practitioner must be insured to meet the higher requirements.

DISCIPLINE:

- 6) The Parties recognize and acknowledge that:
 - a) Cross-border Practitioners must adhere to legislation including the Scope of Practice, Codes of Ethics and Standards of Practice that exist in both the Primary and Secondary Jurisdictions;
 - b) The Complainant has the right to choose where the complaint is launched. This jurisdiction will become the Primary Complaint Jurisdiction and the other the Secondary Complaint Jurisdiction.
 - c) Cross-border Practitioners may be subject to complaints and discipline about their conduct in both the Primary and Secondary Jurisdictions; and

- d) The Parties have jurisdiction regarding complaints received about Cross-border Practitioners regardless of the fact that the alleged unprofessional conduct may have occurred in a different province or territory.
- 7) The Primary Complaint Jurisdiction will make inquiries to determine whether a complaint has also been made in the other jurisdiction in which the Cross-border Practitioner is registered.
- 8) The Primary Complaint Jurisdiction will inform the Secondary Complaint Jurisdiction:
 - a) that a complaint has been received; and
 - b) of the outcome of the complaint.
- 9) Once the complaint has been considered and a decision about it is reached by the Primary Complaint Jurisdiction, the Secondary Complaint Jurisdiction will determine what, if any, further steps are required in accordance with its own governing legislation.
- 10) The Parties recognize that they must only disclose information to one another in compliance with applicable legislation. If the legislation does not permit the Parties to disclose information to one another without obtaining consent from the appropriate persons, the Parties will endeavor to obtain consent from the appropriate persons prior to disclosing information to one another.

LEGISLATIVE AMENDMENTS:

- 11) The Parties recognize that there are different legislative requirements in each province or territory and that the above can only be implemented if it is not contrary to the governing legislation.
- 12) The Parties agree to:
 - a) Determine whether the framework referenced above is contrary to current governing legislation; and
 - b) Seek legislative amendments necessary to implement the foregoing if required.

STANDARDS OF PRACTICE/GUIDELINE:

- 13) The Parties agree to develop a standard of practice or guideline setting out expectations of practitioners involved in Cross-border services that may include explicit expectations about client consent or other aspects of Cross-border services that differ from practice in the primary or secondary jurisdiction.

Date _____	COLLEGE OF PHYSICAL THERAPISTS OF BRITISH COLUMBIA Per: _____ Brenda Hudson
Date _____	PHYSIOTHERAPY ALBERTA Per: _____ Dianne Millette
Date _____	COLLEGE OF PHYSICAL THERAPISTS OF SASATCHEWAN Per: _____ Lynn Kuffner
Date _____	COLLEGE OF PHYSICAL THERAPISTS OF MANITOBA Per: _____ Brenda McKechnie
Date _____	COLLEGE OF PHYSIOTHERAPISTS OF ONTARIO Per: _____ Shenda Tanchak
Date _____	ORDRE PROFESSIONNEL DE LA PHYSIOTHÉRAPIE DU QUÉBEC Per: _____ Denis Pelletier
Date _____	COLLEGE OF PHYSIOTHERAPISTS OF NEW BRUNSWICK Per: _____ Rebecca Bourdage
Date _____	THE NOVA SCOTIA COLLEGE OF PHYSIOTHERAPISTS Per: _____ Joan Ross
Date _____	NEWFOUNDLAND AND LABRADOR COLLEGE OF PHYSIOTHERAPISTS Per: _____ Josephine Crossan
Date _____ _____	PRINCE EDWARD ISLAND COLLEGE OF PHYSIOTHERAPISTS Per: _____ Sonia Chaudhary

SASKATCHEWAN COLLEGE OF PHYSICAL THERAPISTS
STATUTORY COMMITTEE

TERMS OF REFERENCE

Professional Conduct Committee (the “PCC”)

STRUCTURE

The PCC is a statutory committee established pursuant to *The Physical Therapists Act, 1998* (the “Act”) and any applicable bylaws (the “Bylaws”) governing the Saskatchewan College of Physical Therapists (the “SCPT”).

PURPOSE

The PCC will review and investigate any and all complaints, against any member of the SCPT, when any such complaint is brought forward to the PCC via the Executive Director of the SCPT in accordance with the SCPT Complaints Management Process.

In accordance with the Act 25(2):

“On completion of its investigation, the PCC shall make a written report to the discipline committee recommending:

(a) that the discipline committee hear and determine the formal complaint set out in the written report; or

(b) that no further action be taken with respect to the matter under investigation because:

(i) the matter has been resolved with the (mutual) consent of the complainant and the member who is the subject of the complaint; or

(ii) no further action is warranted on the facts of the case”.

SELECTION

Members of the PCC shall be appointed by Council of the SCPT pursuant to the Nominations Committee Recruitment and Vacancy Policy.

TERM

Members of the PCC will be appointed for a two year renewable term. Any vacancies will be filled by Council pursuant to the Nominations Policy. Council will appoint one of the members of the PCC as the chairperson (the "Chair") of the PCC pursuant to the Nominations Policy.

HONORARIUMS AND EXPENSES

Members of the PCC shall be entitled to honorariums and reimbursement of expenses pursuant to Council policy.

ORGANIZATION

Accountability and Reporting Relationship

The Chair is directly responsible to Council. With respect to administrative matters, the Chair will take direction from the PCC members by way of a majority vote.

Composition and Representation

The PCC shall consist of 3-5 SCPT members appointed by Council, the majority of whom must be practicing members.

Council appointed Legal Counsel will be available to provide advice of a legal nature only.

It is recommended, although not required, that members of the PCC shall not be members of Council. (Council may be required to review any subsequent findings of a Discipline Committee as outlined in Section 34 of the Act and this would avoid any perceived conflict of interest at such a review.)

No sitting member of the Discipline Committee shall also be a sitting member of the PCC.

Resignations from the PCC shall be made in writing to the Chair who will forward any such resignation to Council via the Executive Director of SCPT.

Meetings

The Chair shall schedule meetings at least every 4-6 weeks whenever there are open complaints, new complaints or other matters referred by Council to be addressed.

Quorum shall be at least fifty per cent of the members of the PCC. A majority vote of quorum is required to pass all administrative motions.

In conjunction with the Executive Director, the Chair shall ensure that all materials and information are distributed prior to a meeting.

All members of the PCC shall have an equal vote, including the Chair, but not including Legal Counsel.

The Chair shall take notes during each meeting in order to prepare minutes of the meeting. Meeting minutes will be circulated to PCC members after each meeting. The PCC shall not provide to the Executive Director or Council any meeting minutes containing details of the investigation of any complaint in case Council may at a later date be required to review any subsequent findings of the discipline committee.

The Chair shall submit a written annual report at SCPT's Annual General Meeting and provide updates of an administrative nature to Council at such other times as may be requested by the President.

Investigations

Reference can be made to the SCPT Complaints Management Process document for information on the Complaints Process in its entirety.

When a complaint is received by the Chair from the ED of SCPT a meeting of the PCC will be scheduled. At the first discussion of any new complaint the PCC members will be provided with the names of any and all SCPT members and complainants involved, and any PCC member shall declare any conflict of interests that they have with any of the named persons, and any PCC member with a confirmed conflict of interest with any named person in a complaint shall recuse themselves from any and all discussion and decision making of that particular complaint. After this time a complaint shall be referred to by its case number only.

One PCC member shall be appointed as lead investigator of each complaint.

The lead investigator shall conduct the investigation of the complaint, which shall include but may not be limited to:

- Acquiring all necessary documents from the complainant(s) and/or the member(s) to properly investigate the matter of the complaint
- Interviewing both the complainant(s) and the member(s) involved in the case. This may be done in person or by telephone.
- Reporting back to the PCC all details of the investigation.
- All decisions regarding the complaint shall be made by majority vote of the PCC.
- At the conclusion of the complaint the lead investigator shall prepare the written report to the DC. This report shall be approved by the PCC and then forwarded by the Chair.

These Terms of Reference may be amended from time to time by way of a majority vote of quorum of the PCC.

The Terms of Reference shall be reviewed every 2 years.

Revised January 15, 2017