AGM Minutes



SCPT AGM October 2, 2021 via WebEx

Present: J. Richards, C. Cuddington, J. Vogelsang, B. Green, L. Harradence, L. McLellan, D.Pitura, J. Rice, J. Marshall, C. Flaherty, L. Nairn-Pederson, K. Neill (student), J. McBride, D. Drury, L. White, P. Proctor, M. Debnam, B. Bath, S. Speranza, T. Descottes, A. Smedig (student), J. Shannon, J. Aberhart, J. Grant (public rep), J. Hunchuk (public rep), A. Stene, A. Crow, K. Earle, K. Mueller, K. Large (student), C. Maher, D. Michalishen, M. Elliot, C. Falaye, M. Lautner, S. Hesselberg, W. Chukwu, K. Horvey, K. Harrison (student), J. Nazarali, D. Shuya, S. Gunderson, O. Turgeon, E. Harrison, R. Bourassa, B. Anderson, J. Jacob, R. Smith, S. Butcher, M. Croshaw, T. Friesen, I. Johnston, A. Graham, K. Collins, L. Thies (student), M. Deneiko, B. Pachal, S. Kim, J. Gaucher, R. Shishkin, B. Nadhl, K. Beaulieu, J. Apshkrum, G. Oberg, M. Stoll, D. Lightwala, A. Awdhan, H. Lashta, S. Kiefer, J. Stan, S. Ferwerda, C. Fontaine

D. Pitura acknowledges members are gathered on Treaty 2, 4, 5, 6, 8, 10 and homeland of the Metis. He acknowledges yesterday's Day of Truth and Reconciliation. Acknowledgement is important to help close the gap between Indigenous and non-Indigenous community members.

- 1. Call to Order: 9: 00am D. Pitura
- Outlining of meeting procedures
- Use of Polling
- Outline of Polling
- No items for discussion; no motions accepted from the floor
- 2. Introduction of Council, Executive, and SCPT staff
- Special introduction of the new EDR Jason Vogelsang.
- J. Vogelsang elaborated on his employment history (as presented previously in Momentum)
- D. Pitura welcomes J. Vogelsang to our team.
- D. Pitura welcomes members from SPA, the University of Saskatchewan to AGM.
- 3. Voting Information

Motion: to appoint Brandy Green and Lauren McLellan as scrutineers for 2021 SCPT AGM

Moved: D. Shuya

Seconder: L. White



CARRIED: MOTION: 21.045

4. Agenda

4.1 Approval of Agenda and Consent Agenda

Motion: to approve the agenda as circulated

Mover: C. Cuddington

Seconder: K. Horvey

CARRIED: MOTION: 21.046

4.2 Approval of Previous AGM Minutes

4.2.1 AGM Sept 2020 Meeting Minutes

Motion: to approve the minutes for September 2020 AGM as circulated

Mover: L. McLellan

Seconder: C. Cuddington

Abstain: 5 votes

CARRIED: MOTION: 21.047

5. Leadership Reports

5.1. President's Report

Introduction of new EDR: Jason Vogelsang

- D. Pitura commenting the challenging year navigated by D. Shuya as President. Thanks
 D. Shuya for the time she has given to the Council. Also thanking the Council for all that is done.
- Appreciates the time all Council members. Presidents Report has outlined what has occurred over this past year.
- 5.2. Executive Director and Registrar's Report
- Pre-circulated report
- Thanks D. Shuya for all the work.
- Focus had been the pandemic and clinical exam issues. Significant time has been put towards this.
- A lot of strategic goals have been completed.
- Huge change is having Professional Advisor- Jody Rice This role has already started responding to members questions and working on strategic goals for the coming years.
- We now have our two Governance manuals completed. We have a new HR manual. One for EDR one for other employees.
- o Completed risk management framework and risk management reporting.
- o B. Green happy for new EDR to join our team.



- o Thanks to everyone for the opportunity to lead this organization over the year.
- D. Pitura states members can always email President or EDR for questions.
 - 6. Financial Report
 - 6.1. June 2020-May 2021 Financial Results
 - O Spreadsheets have been published in Annual report.
 - o C. Cuddington will review financials today as our fiduciary duty.
 - o Auditor passed our financials. SCPT's duty includes to seriously monitor financials
 - o Reviewed assets and liabilities. We are very risk adverse in our investments.
 - Last year we proposed a \$94 000 deficient. We ended up with a \$21 000 surplus. Our revenue was greater than expected. Increased membership and increased interest.
 Committee expenses and fees were higher due to COVID, one discipline case, the number of PCC cases. Due to COVID, no travel for meetings. Practice Advisor was hired a bit later than expected.
 - Our liquidity risk is low and we are in a healthy position.
 - 6.1.1 September 2021 Auditors Report

Motion: to accept the June 1 to May 31, 2021 Financial Results as circulated in the Auditor Report

Mover: C. Cuddington

Seconder: K. Horvey

Abstain: 1

CARRIED: MOTION: 21.048

6.2. June 2021-May 2022 Budget

6.2.1 2021-2022 Budget Document

- Provided all documents in package.
- Not a real deficit, transferring from the unrestricted reserves to cover projects planned for 2021-2022 (based on operations and strategic plan). These include (no exclusively) the same membership fees, one discipline hearing at least next year, Council continues with virtual meetings, and credit card fees are a cost of doing business. Continue with strategic objectives, continuing competency program, Citizen Advisory Group with NIRO, public education on our role and member engagement.
- 6.3. Appointment of the Auditor
 - C. Cuddington commented SCPT is pleased with the experience of new EDR and pleased to see appropriate salary for the role.

Question: Please comment on the EDR wage change over the last 4 years.



Answer: C. Cuddington explained it used to be a .6 role. Council did a market review and this has impacted the budget and overall salary.

Motion: to appoint Grant Thornton as auditor for June 1, 2021 to May 31, 2022 year end audit

Mover: C. Cuddington

Seconder: M. Stoll

Abstain: 1

CARRIED: MOTION: 21.049

C. Cuddington would like to thank Tammy MacSymetz, the Operations Manager. She worked hard and we owe a lot of thanks for her being a stable force and for the excellent work completed in the office.

7. Bylaw Amendments

- 7.1. Regulatory Bylaw Amendments
 - 7.1.1. Bylaw (4) Amendment- Practising Membership
 - Already approved by MOH. At this time is it up to the membership to either uphold by ratifying this or vote down this bylaw amendment.
 - To differentiate the requirement of having a written and practical component, and the reason we did this is the differentiation between restricted license and a full license by our current bylaws.
 - 4.1 the wording was changed at the request by Government to include 'objective 3rd party' assessment.

Question: Will the wording of this bylaw make it more difficult for us to make changes in the future to the clinical exam requirement?

Answer: This will not make it harder for us to make changes. As the Government may be less willing to take way a declared clinical exam requirement with the original wording, the exam requirements are bigger. For changing anything involving an exam requirement it would be more challenging to attempt to change The Act. Any change involving the exam would require more regulatory bylaw changes. Legal opinion was that we needed to word this bylaw this way and it wouldn't impact our ability to make changes in the future.

Question: Around term 'available for at least one year'. Further clarify if the PCE has been made available but then repealed. Is it when the exam was last offered or last offered but repealed?

Answer: The bylaw was intentionally worded vaguely. The College is interpreting it to mean 'if you haven't been able to access the exam in a year'. This includes people who have been waiting for an actual sitting. If it was offered and the exam failed to be provided it was not accessible.

Question: When will it be in effect and what does the College have in mind for an alternative assessment?

Answer: It is in effect now. If not approved today we have to go back to Government. Answers about alternative assessment will be addressed later in meeting.



Question: How if medical doctors are no longer required to do practical testing during times of a pandemic is physio deemed more dangerous than medicine and surgery? Why aren't emergent bylaws being looked at? This seems to be a long-term solution and not a short-term solution?

Answer: This is a short-term solution. Long-term requires changing the Act and would take years. This is the most short-term option at this time.

Question: What about new grads? Do they have to wait a year if CAPR doesn't offer the exam to have this amendment applied?

Answer: Will address later.

Question: Does "third party" impact us being a self-regulating profession?

Answer: It doesn't impact us. Third party would mean outside of Council, not outside of the membership.

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Question: It doesn't have to be an exam?

Answer: Correct, it has to be an assessment.

Question: In the end would not the credentialed school graduates in Canada be the equivalent of the external exam?

Answer: Because of the wording of our current bylaw that requires 'exams' we rely on another assessment since they have to already graduated from a credited school. Long term we may consider changing but under our current bylaws they need to be doing another assessment (in both restricted license, full license wording and in act). Because its delineated we need another assessment at this point.

Motion: to approve the Regulatory Bylaw Amendments to section (4) as presented:

Mover: L. Rackow

Seconder: K. Horvey

Abstain: 1
Opposed: 1

CARRIED: MOTION: 21.050

7.1.2. Regulatory Bylaw (4.1) Amendment- Extended Access Membership

• The change is to extended access membership. It will allow for tele rehab between jurisdictions but previously had to pay a fee and had to be licensed. This update would mean an out of province therapist would need to register as a member and but not be licensed in Saskatchewan. They would need an application for membership with no cost. They would need to be licensed in their primary Canadian provincial jurisdiction. This also works in reverse for our Sask. members working outside of Sask.

Motion: to approve the Regulatory Bylaw Amendments to section 4.1 as presented:



Mover: L. Rackow

Seconder: T. Descottes

Question: Does this carry for courses out of province or just telehealth?

Answer: It would be just for telehealth. Courses are in person and would not apply. If you are doing a web-based course you wouldn't require a license.

Question: If I am doing care here, the patient leaves on vacation or on leave for one month to another jurisdiction. Do I need to do anything different according t this? Could I treat that patient as a continuum of care?

Answer: Currently, you would need to be registered in the jurisdiction that they are in to provide care, regardless of their residency. Hopefully all provinces would sign on to this MOU. Some provinces have different rules around registration. This hopefully will make it easier.

Question: Is this applicable only in Canada or international as well?

Answer: PT has to be licensed in provincial jurisdiction and it would only be applicable to the other jurisdictions that have signed on the MOU. It would not apply to a foreign license. If you were licensed in Canada and were away in the USA you can provide tele rehab to a Canadian resident. You could not apply to do this if you were licensed in Canada and your patient was in the USA. You would need to contact the state they were in to decide what you need to do.

Question: How will the membership know who has this agreement in place?

Answer: Once it is signed by other provinces, we will share on our website and provide instruction.

Abstain: 1
Opposed: 1

CARRIED: MOTION: 21.051

7.1.3. Regulatory Bylaw (12) Amendment-Insurance

This bylaw will require your insurance to cover leave of absence or cessation of
practice. Questions we have received in the past are about how long does that need to
be? The answer is challenging. You can have complaints up to two years after
cessation, however, it changes if it is about a minor getting care and if it's a criminal
offence without a statute of limitations.

Motion: to approve the Regulatory Bylaw Amendments to section 12 as presented:

Mover: L. Rackow

Seconder: D. Shuya

Question: Does anyone know if BMS has this clause in retirement?



Answer: SCPT consulted with BMS. This is available but you need it for at least two years before cessation of practice. If less than two years, it only covers for 10 years. SPA hosted an educational webinar about this last week and its on the website.

Abstain: 1
Opposed: 1

CARRIED: MOTION: 21.052

- 7.1.4. Regulatory Bylaw (13) Amendment- Full Practicing License
- 7.1.5. Regulatory Bylaw (13.1) Amendment- Extended Access License Repeal
- 7.1.6. Regulatory Bylaw (15) Amendment- Academic Practicing License
 - All together as they are for the same purpose.
 - They are the addition of the continuing competency requirements as part of the licensure requirement. You will be required to have submitted your documents when you do the renewal. Audits will be done after the renewal process. Restricted licenses, nonpracticing and inactive licenses will not be required to submit these requirements.

Motion: to approve the Regulatory Bylaw Amendments to section 13 and 15 as presented:

Mover: L. Rackow

Seconder: L. White

CARRIED: MOTION: 21.053

- 7.1.7. Regulatory Bylaw (18) Amendment- Specialized Procedures
 - 7.1.1.1 Side by Side Proposed Amendments
 - This was not circulated in the bylaw survey but was in the AGM package. Currently our specialized procedure is itemized out. It would group all specialized procedures together.

Motion: to approve the Regulatory Bylaw Amendments to section 18 as presented:

Mover: L. Rackow

Seconder: H. Lashta

Question: For those already performing specialize procedures, do we need to have it re assessed?

Answer: No but this creates a mandatory rostering. Part of the renewal this year is you will need to include the education documentation of completion. If they were submitted in the past they may already be on file.

Question: Is rostering for U of S grads who have basic spinal manipulation included a part of their MPT program?

Answer: They won't need additional certification for entry to practice education.



Question: For IEPT that have done specialised training in other countries, if they aren't recognized by the College, how does this work?

Answer: Any courses that have not been previously approved, you can submit an application for approval. (as per previous)

Question: Given the current virtual programming options what sort of 'clinical component' is required?

Answer: All specialised skills would require a hands on portion.

Question: How does the spinal manipulation taught in the U of S curriculum impact scope of practice with regards to labour mobility? Not all programs offer this. Is there a case for mobility exception because of this?

Answer: You would need to speak to the regulator of the jurisdiction you are going to. You may not have direct ability for spinal manipulation but it depends on the jurisdiction.

Abstain: 2

CARRIED: MOTION: 21.054

D. Pitura asked if people want separate bylaw votes or one bulk vote and to input feedback into the chat. 22 for separate and 1 for together in chat.

- 8. Presentations
 - 8.1. Outgoing Council Members
 - 8.1.1. Daysha Shuya
 - 8.1.2. Debbie Poncsak
 - 8.1.3. Kathyrn Harrison
 - D. Pitura wants to thank the Council members for their time Huge time commitment and passion commitment
- 9. Election Results (By Acclamation)
- Amanda Crow, Dale Pitura, Lee Hall, William Chukwu
- 10. PCE Review Recommendations Update
- We are breaking this into two parts. The long-term portion regarding the PCE report recommendations. The second portion of this is with respect with the current situation with the PCE and COVID related cancellations.
- Part of the challenges of making change requires possible changes to the Act and/or regulatory bylaws. Changing the Act takes a very long time and other professions can also suggest other changes through the MOH. Changing regulatory bylaws is simpler. Council has discussed the recommendations from the PCE report. We believe we need to be a leader nationally in continuing with changes and membership input is very important. Our mandate is the safety of the public but without support of the membership we cannot do this. Our plan right now is to pursue the PCE report recommendations. We need feedback from all of membership. This includes other stakeholders including employers/supervisors, IEPTs in our provinces (those recently licensed and current restricted members). We will outsource this engagement to



ensure we get full and appropriate feedback. In parallel we are going to reach out to the other national regulators and get their feedback on how will this effect labor and mobility and how those jurisdictions will view our membership. We do not want to make it more difficult for labour and mobility and it is also required by the Government. We have tried to reach out in early September and with the timing of the Sept virtual PCE the feedback was not helpful so we will reach out.

- From the feedback we will have to make a proposal (could be a hybrid or the report recommendations) and will have to come back to membership. It would likely be at AGM 2022. Once it is through the membership it goes to Government. They have 90 days to provide feedback, revisions etc. We are hoping to continue with Government discussions while we are going through this process. Once Government approves it would come in to force. Timelines likely in years, not months.
- Regarding current licensure update, at Council our recent bylaw amendment indicated if its not available for one year an alternative exam process can be used for licensure. The recent cancellation with the indefinite CAPR timeline will give us the opportunity to utilize it. We have been considering many options. These initially included an alternative clinical exam. We had discussed with Alberta but when CAPR indefinitely canceled and with the spike in COVID this was no longer a viable option. We discussed with CERS about a Sask exam and again there was too much risk with COVID and length of time to get things organized. We have decided to move to a practiced-based assessment. This will allow us to license these members in the quickest amount of time. We have a strong opinion that will incorporate using the information for restricted licensee supervisors/employers. Council met yesterday and we are sending back to our Registration Committee to confirm criteria. We have requested the Committee to do it in a timely fashion. We are hoping we will have a plan in the next 2-4 weeks. It needs to be a third-party evaluation. We will need to recruit a group to do this. We do not want this to drag on. We have agreed to review the Registration Committee recommendations when provided. We will hear the details over the next weeks/months and proceed with the process.

Question: For the current cohort graduating, will this take them into account?

Answer: No. The timeframe hasn't been expanded to include students. Once they are licensed as restricted, we will see what the PCE options are available at that time.

Question: How does practice based assessment work vs PCE practice would be in one clinical and PCE exams whole entry to practice?

Answer: Council considered this. The conclusion is along with other regulators that we no longer have the PCE clinical as an option. As we move forward and looking to the future this is something we will more fully consider. Many skills are required in all areas of practice. The written exam still requires assessment of all areas.

Question: When can restricted licensees expect to have their applications reviewed by this newly formed committee? Will be it within 2021?



Answer: We will work out the details with the Registration Committee and these details are planned to be completed in one month. Once this step is completed it will assist in developing a timeline. Restricted licensees should have the details in one month time.

Question: How will labour mobility be affected with the practice-based assessment?

Answer: A lot of hoops to jump through to ensure our candidates have labor and mobility options. At this time and the indefinite situation with regards to the next PCE clinical exam, most registrars we have spoken with are understanding. Regulators have tried to find a consistent process. Most seem willing to accept this option for labour mobility.

Question: Will the restricted licence viability extension again for the next two years? How will SCPT hold the CAPR accountable for their incompetence?

Answer: Yes, we will reach out to confirm licences to be extended to ensure you have an option for a future clinical exam or alternative assessment.

Question: Would previous exam failure have any impact on this new assessment?

Answer: No, Registration Committee is recommending all candidates have the same ability to access this.

Question: Will there be consideration given to how long candidates have been waiting? Prioritized based on time waiting?

Answer: Yes.

Question: If CAPR decided to run an exam before we are offered full registration are we still on this pathway or would need to re-adjust and take the CAPR exam?

Answer: Once you are in this pathway you will be able to use alternate assessment.

Question: Can third-party be defined as representative committee of members?

Answer: Yes. Third party will be outside of Council. We will consider a committee that is recruited and paid for by the College but arms length. This committee would provide their recommendations to Council.

Question: Are we expecting a failure rate similar to PCE?

Answer: No idea.

Question: If protecting the public is the Colleges mandate how is increasing waiting times for patients and subsequent burnout best protecting the public?

Answer: We are moving as quick as we can. Lots of restricted licensees are working and trying to move forward as quick as we can.

Question: Is it the employer or a different third party person that provided the recommendation or evaluation of the resident?

Answer: Details to be worked out.



Question: For those working two jobs will there be a plan on the how we will decide or Council will decide who does the assessment?

Answer: Details to be worked out. Good point. EDR will pass this question on to Registration Committee to ensure recommendations account for this.

D. Pitura thanks our membership and providing options to us and sharing their experiences. Membership engagement is much appreciated and necessary.

SCPT to reach out to the four candidates who completed the virtual exam in September.

11. Question and Answer Period.

Question: no additional questions.

12. Adjournment: 10:56 am.



Signing approval of AGM Meeting Minutes for AGM Meeting held:

October 2, 2021

President	Date <u>October 22, 2022</u>
Secretary and Mchella	Date