# SCPT WOLVENSON



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# **Ask the Practice Advisor**

The role of the practice advisor (PA) is to guide members to information that will assist in making practical decisions respecting professional legislation, guidelines, standards of practice and ethical considerations.

The PA is also responsible to assist the members with completion of the requirements for the new Continuing Competency Program (CCP).

Each Momentum will have a sample member question with a response from the Practice Advisor Jody Rice.

The Continuing Competency Program and Re-deployment:

"I have been re-deployed working in COVID contact tracing and at testing sites in our area. As I am not performing my regular PT duties, do I still need to complete the Continuing Competency Program? If so, how will I ever meet the essential competency requirements for the mandatory domain Collaboration, when I am not providing my regular PT service to clients?"

### Practice Advisor Response:

As a practicing PT, I do honestly appreciate the extra challenges all our members have recently faced with the added stress of COVID. This however does not change the need for our members to prove their commitment to providing outstanding care to Saskatchewan residents, maintain their competence and meet the requirements of the SCPT Continuing Competency Program (CCP).

The SCPT's Continuing Competency Program is based on the National Practice Advisory Groups (NPAG) competency profile. The NPAG profile describes 7 Competency Domains each with a list of associated Essential Competencies that apply to Physical Therapists throughout their career span. An Essential Competency is an ability that a Physical Therapist must possess to practice safely and effectively.

The 7 Competency Domains are:

- Physical Therapy Expertise
- Communication
- Collaboration
- Management
- Leadership
- Scholarship
- Professionalism

I would suggest your re-deployment would fit well within this year's mandatory domain:

Collaboration

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As collaborators, physiotherapists work effectively with others to provide inter- and intra-professional care.

### **Essential Competencies:**

- 3.1 Promote an integrated approach to client services.
- 3.2 Facilitate collaborative relationships.
- 3.3 Contribute to effective teamwork.
- *3.4 Contribute to conflict resolution.*

Your participation easily meets at least 2 of the 4 essential competencies. Just consider the hours of working with others during your redeployment. I am sure you will be able to think of ways you have met these competencies as part of this team.

If you choose to use your COVID experience to complete the requirements for the Mandatory Domain Collaboration you must choose and complete a Task.

- Letter from professional organization or from a health care team member indicating participation in a collaborative setting.
- Performance Review

- Case Study
- Participation in or delivery of a course, lecture, workshop, seminar, or similar activity
- Evidence of supervising PT students
- Participation on a committee
- Positive Self Reflection

Possibly having a team member provide a short letter confirming your collaborative participation as a member of the COVID team would be appropriate.

In these challenging times, consider Positive Self Reflection. Looking back on the struggles you faced moving forward in the COVID world may assist you in recognizing the important role you have had in meeting the unexpected needs of Saskatchewan residents, engaging with new team members, and collaborating with other professionals to provide effective care.

As you reflect, consider how redeployment has enhanced your future PT practice. You have demonstrated that the foundation of knowledge and skills a PT possesses will

evolve to meet the needs of our clients and the general population. You have used your knowledge and skills to meet client's needs, advance our scope and further garner respect for our profession.

Possibly you will translate your new experiences into your future practice by fostering teamwork in a stressful situation, successfully meeting another personally challenging change in your work life and being more aware of opportunities to advance the PT scope of practice into areas previously not evident.

Thank you for your excellent question. If you have further questions or would like help completing the requirements of the CCP, email the practiceadvisor@scpt.org.

For a sample of documents using this COVID redeployment example for meeting the mandatory Domain Collaboration, see the <u>SCPT website</u> under the Continuing Competency Program tab.

### AGM 2021 Announcement

SCPT AGM is planned for <u>October 2, 2021</u>. If COVID restrictions allow, this will be an in person event in Saskatoon with a virtual option as well. If restrictions are in place, this will be a strictly virtual session.

### Now is the Best Time to Get Started on the Continuing Competency Program Requirements for Your Renewal in 2022

The SCPT will be hosting webinars in the Fall to educate members on the requirements of the new Continuing Competency Program (CCP), as well as provide information on how to submit documentation through your member portal. SCPT will be sending an email invite to all members for these webinars, as well as posting access information on the website.

The webinar held in June has been recorded and viewing is available on the SCPT website under the Continuing Competency Program Tab. You will also find written guidelines and instructions for completing and uploading the required documentation.

Members may begin to upload the required documentation at any time. The CCP submissions must be uploaded by February 28<sup>th</sup>, prior to renewal. If your documentation is not complete, you will not be able to renew your license for 2022.

If you have questions regarding the CCP, Contact Jody Rice, Practice Advisor by telephone at (306) 931-7344 or practiceadvisor@scpt.org



As our physiotherapy evidence base expands conventional practices continually evolve to meet the needs of our clients. As more people gain health knowledge many are seeking alternative forms of care. As Physical Therapists we are responding to the demands of the public and are gaining knowledge in a wide variety of what may previously have been considered alternative forms of practice.

As professionals we are aware of the need for accountability, to demonstrate that we have the requisite training and competence to provide a service and that is evidence based. We are also aware that certification is required for invasive techniques and the service we provide under our PT designation, must meet specific requirements to be called physiotherapy.

How do we as competent clinicians recognize and differentiate between Alternative Practices and PT Scope of Practice? How do we determine if the intervention provided truly fits within the guidelines for PT scope of practice in Saskatchewan or if alternative therapy guidelines would need to be considered?

An Alternative Therapy is a distinct and specialized body of knowledge requiring skills that may be performed by a physical therapist, but which falls outside the recognized parameters of physical therapy practice in Saskatchewan.

**Is it Physiotherapy?** Is a tool developed to guide evolving and emerging scope of practice. The tool was sourced from the Canadian Alliance of Physiotherapy Regulators- Registrars Committee February 2017. The tool is available on the SCPT Website - <u>Is It Physiotherapy.pdf (scpt.org)</u>.

The primary assumptions of this tool are that public protection is top priority and that regulatory bodies support evolving quality practice.

The tool leads the practitioner through 5 considerations with 3 possible outcomes:

1. The service is not considered to be physiotherapy.

- The service falls within the definition of physiotherapy and is congruent with the history, evolution, knowledge, skills, and judgement of the profession and is an emerging field with limited evidence.
- The service falls within the definition of physiotherapy and is congruent with and well supported by evidence although there may continue to be concerns as new literature emerges.

The  $\mathbf{1}^{\text{st}}$  outcome indicates the service is not considered physiotherapy, but alternative therapy, and the following regulatory bylaws would need to be met.

### The SCPT Regulatory Bylaw #14 Alternative/Dual Practice:

(1) Members who engage in the practice of physical therapy and who also provide other services to clients shall ensure that they do not hold themselves out as a physical therapist when providing those other services or refer to the provision of those other services as physical therapy treatment.

(2) A member shall ensure that clients and third-party payers, if involved, are fully informed of which service provided to them is a physical therapy service and which is not, and shall keep clear and separate records, including billings, of physical therapy services and alternative therapy services provided.

(3) For the purposes of this section, "practice of physical therapy" means the use by a physical therapist of their specific knowledge, skills, and professional judgment to improve individuals' functional independence and physical performance, manage physical impairments, disabilities, and handicaps, and promote health and fitness.

Other important considerations when providing alternative therapies:

1. If a client comes to a physical therapist for physical therapy, then the physical therapist should use all efforts to treat the client with forms of

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### physical therapy first.

- 2. In order to keep physical therapy and alternative therapies distinct and separate to clients, physical therapists should obtain a signed client consent form for the alternative therapy that incorporates the understanding that the alternative therapy is not a form of physical therapy and therefore falls outside the jurisdiction of the College.
- 3. Physical therapists should retain separate and distinct charts and accounts when utilizing their skills as a physical therapist and when utilizing skills of an alternative therapy.
- 4. When the treatment plan involves both physical therapy and an alternative therapy, the physical therapist should ensure that the client is informed of the following: a) the differences between the act of physical therapy and the alternative therapy; b) that the alternative therapy may not be regulated; and c) that the client has the right to refuse any or all parts of an assessment or treatment regardless of the therapy.
- 5. The physical therapist should ensure that they report to the College on their annual licence renewal only those clinical practice hours accumulated in the provision of physical therapy services; hours spent in practice of an alternative therapy do not qualify for licensure requirements.
- 6. The physical therapist should ensure that his or her professional judgment and integrity are not compromised by motives of profit and should make it clear to the client which discipline is responsible for incurred costs, and whether the physical therapist has a vested interest in any products being sold (regardless of discipline).
- 7. The physical therapist should not bill for alternative therapy services under the title of "Physical Therapy".
- 8. Advertising and marketing of physical therapy services and an alternative therapy in the same advertisement, must, in addition to complying with any bylaws relating to advertising by members, be clear with respect to which services are physical therapy and which are not.

The 2<sup>nd</sup> and 3<sup>rd</sup> outcomes of the tool may indicate the practice being considered is evolving towards mainstream PT practice, but further research is required to meet the rigorous guidelines of true PT scope of practice.

A couple of evolving practices moving quickly to mainstream would be Yoga and Mindfulness Meditation. Many people are aware these practices have strong links to good literature to support their use in chronic pain – which certainly falls under the scope of Physiotherapy.

As the evidence continues to evolve, and Yoga and Mindfulness Meditation become more defined, consideration must continue to be given to how these valuable forms of practice are included in our everyday PT clinics.

### The SCPT recommends:

- 5. A full PT assessment would be completed.
- 6. The analysis of the assessment findings would indicate the use of these techniques would be appropriate based on the PT diagnosis.
- 7. As with all PT treatment any one service would typically not be used in isolation and there would be **other components of the treatment** program to benefit the client as well.
- 8. The PT assessment and all intervention provided for the specific PT diagnosis would be considered PT billable time.

The SCPT supports evolution of practice and provision of safe, effective care. The member must be confident the service they are providing meets the regulations set out in our Provincial Guidelines while respecting the evolving scope of practice we and our clients favor.

Use of the tool Is it Physiotherapy? will assist clinicians to determine if the service being considered classifies as alternative, emerging PT or within the scope of PT.

In the event that a practice issue concern is brought before the SCPT, the clinician must be confident in providing strong support for their decisions around scope of practice.

If you require assistance with use of the tool **Is it Physiotherapy?** or have questions regarding scope of practice please contact practiceadvisor@scpt.org.

# **SCPT Practice Hours Guidelines**

During renewals this year SCPT received many inquiries regarding eligible practice hours for licensure. There are three categories of hours that can be submitted as part of your annual renewals:

### **Paid Worked Hours**

- Physical Therapy Practice Hours shall be defined as hours spent in the provision of physical therapy services:
  - A) in clinical settings of direct care provision, performing patient assessment, treatment, and follow-up, including instruction to family
    and other care givers in which skills are taught specifically to an individual patient; and/or
  - B) in non-clinical settings working in administration, research/academia/authorship, education/teaching, physiotherapy related sales or as a consultant in a position where the skills and training of a physical therapist are utilized and constitute the basis for the job responsibilities. (Therefore, the therapist maintains current physical therapy concepts and methods of practice).
- Due to the COVID pandemic, many physical therapists were redeployed to atypical positions. SCPT was consulted on the redeployment of
  physical therapists to meet the needs of public health during the pandemic and <u>does</u> consider all redeployment hours as physical therapy
  practice hours. As such, all of these hours can be submitted as part of your renewal process.

### **Unpaid Worked Hours (Volunteer hours)**

- Unpaid volunteer hours may be counted towards the hours required to maintain a Full Practice Licence. For clarification purposes, activities
  that result in the physical therapist receiving honorariums, gifts in kind, stipends outside of regular paid employment are acceptable as
  verified unpaid hours if the hours are done while performing:
  - a) Research or authorship that is directly related to the practice of physical therapy
  - b) Educational (teaching/lectures) or consultation activities outside of regular paid employment
  - c) Physical therapy activities with sporting teams or at events outside of regular paid employment
  - d) Any unpaid physical therapy related activity/service hours where an individual is compensated for expenses incurred (e.g. meal, travel, etc.) but not for time spent in the activity/service itself that require the skill and/or qualifications of a physical therapist
  - e) Meetings, activities and events associated with the physiotherapy professional association or the college (i.e. SCPT, SPA, Alliance, and CPA).
    - In a 5- year period, no more than 300 hours in this category of the total required 1200 hour requirement for licensure will be accepted.

### **Unpaid Education Hours**

- Education worked hours may be counted towards the hours required to maintain a Practice Licence:
  - a) Conferences, formal continuing education courses, workshops, seminars, teleconferences, interest group activities, medical rounds, inservice educational courses of short duration deemed necessary to maintain or improve job skills and which are directly related to the active practice of physical therapy
    - b) Continuing Competency practice activities including self-assessment within reasonable limits
    - c) Self Study within reasonable limits
- o In a 5- year period, no more than 300 hours in this category of the total required 1200 hour requirement for licensure will be accepted

For further details regarding practice hours, please refer to the SCPT Practice Hours Guidelines and the Practice Hours section of the SCPT website. Please also keep in mind that it is the responsibility of the individual physical therapist to keep a log and record of all activities and sufficient documentation for verification of the practice hours information. The SCPT does annual practice hour audits and those members who are randomly selected are required submit verification of the hours they have submitted on their renewals.

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