

# MOMENTUM



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# PRESIDENT'S MESSAGE

As I enter the role of President of the SCPT, I am honoured and humbled by the trust that is placed in me and will do my best to fulfill expectations. I take self-regulation of our profession seriously as a privilege granted by the government and the people of the province. By setting standards, ethical conduct, determination of competency (at entry level and throughout career) we have stature as trusted professionals, and I will work to keep it so.

I hope I can measure up to the high standards of Past Presidents, most recently Dale Pitura. He is a remarkable leader! He is a wonderful collaborator, patient listener and problem solver; plus, his sense of humour kept the meetings enjoyable. I strongly believe our great profession is better thanks to his leadership of SCPT and many other local, provincial, and national organizations over many years. He remains President of the Canadian Alliance of Physiotherapy Regulators (CAPR) and is still on a few SCPT committees, so we will continue to benefit from his skills.

Thank you also to departing SCPT student Council member Kelsey Neill. Her participation was wise and

much appreciated. Best to you as you enter your career, Kelsey!

I am so pleased to welcome new Council members Marilyn Debnam and student Cameron Bird. You will see in their bios how lucky we are to have their experience and perspectives on Council.

We have had some rocky times as a profession in the past few years. This largely stemmed from the pandemic and its ripple effects that led to the discontinuation of the national clinical exam which, in turn, led to a "reset" in how to assess competence in the regulatory setting. Saskatchewan found an innovative way to satisfy legal requirements through the Practice Based Assessment. That is, until such a time as a new national assessment is developed, reviewed, and implemented.

Recently released via CAPR, are new principles and guidelines on how to ensure / examine competency of physiotherapists. The actual process is yet to come, but I am buoyed by collaborative efforts that are occurring among physical therapy regulatory bodies, our professional association, university programs, and other partners. This will also

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require discussions with government agencies. It is a complicated but exciting time. We are getting there!

A beacon of excellence that is helping us through is the Competency Profile for Physiotherapists in Canada. As a profession we are united in what is required at entry to profession and throughout our careers. In this document, COLLABORATION is one of my favorites on the list of competencies. Much of the current SCPT work follows this theme.

- I am proud that strengthening stakeholder relationships is an SCPT strategic initiative.
- We are about to embark on an Equity,
   Diversity, and Inclusion (EDI) initiative
   starting with learning sessions for Council

- and Committee Chairs that will help inform us in all our work as regulators.
- Legislative changes from Government have been proposed and we are working to provide meaningful feedback alongside other regulatory agencies in Saskatchewan.
- Specialized procedures and advanced practice are important in our ability to offer services to the public, and we are part of the conversations to make that happen to ensure safe and effective practices.
- And much more....

Still on the theme of collaboration, please know that I am open to conversations: president@scpt.org.

Cathy Cuddington

**SCPT President** 

# **EDR REPORT**

The fall, rather than the spring, brings renewal to the SCPT. Fall is the time we gather for our Annual General Meeting, welcome new members to our Council and to our committees, the time when we welcome new graduates to the profession as they begin their physical therapy careers, and when we transition a number of members from a restricted licence to a full-practice licence through the Practice Based Assessment (PBA).

The SCPT **Annual General Meeting** (AGM) was held on October 14, 2023 online and in partnership with CERS. The AGM recording and related documents, including the SCPT's Annual Report can be found on the <u>SCPT website</u>.

Cathy noted our two new members of Council. Additionally, our **new committee members** include Amanda Fortin, Joel Gritzfeld, Angela LaFontaine, and John Marshall. Their fresh perspectives will continue the excellent work done at the committee level.

We were able to offer two rounds the **Practice Based Assessment (PBA)** this fall. At the time of writing, 32 candidates have completed or are in the process of completing the PBA. We expect to offer an additional PBA round in the spring of 2024 and at least 2 rounds in the fall of 2024.

The 2024-2025 **annual license renewal** will open January 8, 2024. There are no changes to this year's renewal process but in preparation please ensure you have uploaded your CCP documents prior to renewing and have proof of your liability insurance and practice hours information handy as part of renewal.

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As previously communicated, we have made some changes to the CCP process based on the excellent feedback provided by practitioners. Complete CCP information can be found on the SCPT website but in summary the changes include:

- Number of Documents Reduced: The Task Proof document has been eliminated and key information
  moved to a revised General Submission form. This means that practitioners need only complete and
  upload 2 documents compared to the previous 4. Only a General Submission Form is required for each of
  the Mandatory Domain and the Choice Competency.
- 2. **Revised General Submission Form (GSF):** The GSF has been revised to incorporate the task proof information, reduce duplication of questions, and to provide additional guidance to members. There are now only 4 questions requiring a response.
- 3. Mandatory Domain: the 2024-2025 Mandatory Domain is Leadership.

If you have any questions about anything SCPT please feel free to email or call the office.

Jason Vogelsang
Executive Director and Registrar



# **SCPT NEW COUNCIL MEMBERS**

The SCPT Council is pleased to welcome Marilyn Debnam and Cameron Bird to the SCPT Council for 2023-2024.



# **Marilyn Debnam**

# Member at Large

Marilyn Debnam (BScPT, MHA) has worked as a physiotherapist in a variety of service areas, including private, public, and management, but exclusively in rural Saskatchewan settings. She currently works as Director of Clinical Standards & Professional Practice with the Saskatchewan Health Authority, based out of Langenburg.



# **Cameron Bird**

# Student Representative

I was born and raised in Prince Albert Saskatchewan. I lived there my entire life up until I moved to Saskatoon to start University back in 2017. I graduated from the College of Kinesiology with a nutrition minor in 2022, and spent one year as a Nutrition Major but decided to switch to Physical Therapy. I've wanted to be a physical therapist since my third year of Kinesiology which is when I took a class on sport injury prevention and rehab. The class was my first real look into what Physical Therapists did and since then it has been my dream job. Currently I am not sure what type or branch of physical therapy I want to practice in, but it may be in sports, or paediatrics.

I joined the SCPT as a student because I love having a sense of community and I wanted to learn more about the governing body of Physical Therapy for the province and learn more about their role and supports.

# RECENT AND UPCOMING WEBINARS

The SCPT is pleased to be partnering with the Continuing Education in Rehabilitation Science (CERS) to co-present two free webinars:

# PROVINCAL AND NATIONAL LEADERSHIP IN PHYSIOTHERAPY

With speakers: Brenna Bath, Chad Magee, Dale Pitura, Liz Rackow, and Allison Stene.

# **Objectives**

By the end of this presentation learners will be able to:

- Discuss ways in which physiotherapists can champion the health needs of clients.
- Generate ideas which promote innovation in healthcare.
- Compare ways in which physiotherapists can contribute to leadership in their profession.

A recording of the webinar can be found at:

https://rehabscience.usask.ca/cers/practice-resources/webinars/leadership-panel.php

This evidence-based presentation can qualify as a task for the 2024 mandatory domain of *Leadership* within the CCP.



# MENTORING PHYSICAL THERAPISTS OF THE FUTURE: DEBUNKING SUPERVISION MYTHS

This presentation will provide guidance on how to properly and safely supervise both MPT students and Restricted Licencees. The School of Rehabilitation Science (SRS) will explain what is involved in serving as a Clinical Instructor (CI) and the Saskatchewan College of Physical Therapists (SCPT) will explain what is involved in supervising a Restricted Licencee.

Both the SRS and SCPT will attempt to debunk common myths of supervision and provide suggestions for making supervision more approachable.

# **Objectives**

By the end of this seminar, participants will know:

- Expectations of instructing an MPT student on a clinical placement.
- Expectations of supervising Restricted Licencees.
- Means to remove some commonly perceived barriers involved in instruction and supervision.

This presentation will be offered on two occasions:

December 7th, 2023 12:00 p.m. to 1:00 p.m.

and

January 9th, 2024 7:00 pm to 8:00 pm

Additional information including the registration links can be found at:

https://rehabscience.usask.ca/cers/learnhere/current-courses/clin-ed-supervision.php

# SCPT 2024-2025 LICENSE RENEWAL



License renewal will begin January 8, 2024. Members must renew their license for April 1, 2024-March 31, 2025 licensing year by February 29, 2024.

Other than the changes for CCP, there are no changes to this year's renewal process but in preparation for renewal, please be reminded of the following:

# **Continuing Competency Program (CCP)**

Members must have uploaded their CCP documents into their member portal BEFORE they are able to renew their license for 2024. We strongly recommend that you have everything uploaded before the end of the calendar year to avoid any delays with your renewal.

Please visit the CCP website for additional information and resources. Any questions about the CCP can be emailed to practiceadvisor@scpt.org.

### **Liability Insurance**

All members are required to have individual liability insurance, independent of any insurance that may be available through an employer and must include both cessation of practice and leave of absence coverage. Note you are only required to upload your individual liability insurance, you do not need to upload any employer insurance that you may have.

# **Specialized Procedures**

If you have any new or not previously uploaded certificates that qualify you to perform specialized procedures (acupuncture, dry needling, spinal manipulation, pelvic health) you can do so as part of renewal. All members are encouraged to view their public directory profile to ensure that specialized procedures are accurately displayed.

### Fees

The license renewal fee remains unchanged at \$500 and is payable as part of your renewal application but no later than February 29, 2023 to avoid late fees.

As in previous years, the following will be required as part of renewal:

- A. Proof of Professional Liability Insurance.
- B. The number of hours practiced in 2023. (January 1 December 31)
- C. The Jurisprudence Questionnaire.
- D. Specialized Procedure certificates, if applicable.

Further information and instructions for renewal will be sent to members in the coming weeks and when renewal opens, however in the meantime if you have any questions, please email operationsmanager@scpt.org.

# ASK THE PRACTICE ADVISOR INFORMED CONSENT

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

The PA is also responsible for assisting members with completion of the requirements for the Continuing Competency Program (CCP). Each Momentum will have a sample member question with a response from the Practice Advisor.

### Question:

I am providing supervision to a new restricted licensee (RL) and notice when I complete the required chart audits, the RL is only documenting consent at the initial assessment appointment. I would like to discuss this issue with the RL but wanted to first confirm with the College when consent must be obtained and documented and what the rules are around implied consent?

### **Practice Advisor Response:**

This is a great question as many physical therapists, even those with many years of practice experience, are uncertain at what points during care provision ongoing consent is required and when consent is implied by simply attending for an appointment.

Informed consent requires that a consent discussion has occurred where the client has been provided information relevant to the proposed assessment or treatment and had the opportunity to have questions answered. Following the assessment, the client is provided with a PT diagnosis and the proposed treatment and the risks/benefits and consequences of receiving or not receiving treatment have been discussed. The client then has

the opportunity to make an informed choice to accept or decline the proposed treatment.

# Informed consent is required -

- Prior to the initial assessment and treatment plan. This would typically be written consent though verbal is allowable so long as it is documented on the client's chart.
- When performing a review assessment and discussing the options for ongoing treatment.
- For changes in the treatment plan.
- When modalities or specialized procedures are introduced as part of the risks/ benefits/contraindications discussion.
- With pending discharge from treatment.
- At any other times deemed appropriate by the physical therapist based on the individual client and the practice situation.

The PT is responsible to determine whether verbal or written consent is required however written consent is recommended when the intervention risks are more significant or common or when the treatment is complex. Whether received verbally or in writing, consent must always be included in the client's chart.

Historically, it was thought that if a patient made an appointment and attended a treatment session, their consent was implied by their actions.

Attendance at a physiotherapy appointment cannot be considered "informed consent" in and of itself. The simple act of attending a physiotherapy appointment does not ensure that the physiotherapist has provided the patient with the necessary information to make decisions around care and that informed consent has been obtained.

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Relying on implied consent can lead to challenging situations in which the extent of consent implied becomes a matter of disagreement after the fact. It is, therefore, preferable to obtain express consent and to document the consent appropriately. However, a patient or their substitute decision maker (SDM), may provide consent for a "plan of care" expected to continue over a series of treatment visits. In this case, the patient's attendance, and participation with the agreed plan of care may be considered implied consent. Provided there is no significant change in the health status of the patient, the nature, expected benefits or risks of treatment, a physiotherapist may presume that consent to treatment continues. The physiotherapist is expected to provide updates and reporting to the patient (or their SDM) throughout the course of treatment to support this ongoing consent. A new informed consent must be obtained whenever there is a significant change in the patient's capacity, condition, the treatment plan, expected outcomes or risks.

Typically, during the subjective review at the time of a return appointment, PTs will ask the client how they were doing following the previous assessment/treatment, review the treatment plan for that visit and confirm that the client agrees to proceed. In this the PT is informally reaffirming consent to treatment at the start of each visit as the

PT has the client's ongoing agreement with the plan and has created a space for the client to decline or ask questions about the treatment. This does not mean that the PT should have a detailed consent discussion or obtain signed consent each time the patient visits the clinic, but when briefly documented on the client's chart, this interaction may be considered informed consent.

Bear in mind that a patient may at any time withdraw consent, whether it be for the plan of care entirely or for a specific intervention, therefore providers are advised to informally reaffirm consent to treatment at the start of each visit as this helps to avoid misunderstandings and disagreements.

There are several resources on the SCPT website related to regulation around informed consent including:

SCPT Practice Resource: Informed Consent and Capacity

SCPT Standard of Practice # 8 Consent Code of Ethical Conduct Section A #6



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