

# Manitoba Physiotherapy - In Touch

## College of Physiotherapists of Manitoba Newsletter

June 2009

Summer Edition 2009

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### Note from the Editor

Submitted by Ricky Paggao, Vice Chair and Newsletter Editor

*Greetings!*

First and foremost, congratulations to Brenda McKechnie on her 20<sup>th</sup> anniversary at the College of Physiotherapists of Manitoba! As our executive director and registrar, Brenda is the heart and soul of CPM. Her dedication goes far beyond the borders of Manitoba. She is very active nationally, through the Alliance and the national networking of registrars. Brenda reflects the many changes over the past 20 years in her Registrar/Executive Director's Report in the CPM Annual Report. Her involvement over the years has helped our profession become a leader among self-regulated health care professions, especially with the advent of the proposed Health Professions Regulatory Reform Initiative (HPRRI).

We are pleased to announce that Gisèle Pereira is the new Chair of the CPM Council. She has a wealth of experience on Council, serving many critical roles in many committees over the years. Gisèle is also the recipient of the Founders Award of the Canadian Lung Association. She was recognized in April for her significant and longstanding commitment to the "Catch Your Breath" program offered annually at SMR. The award honors individuals who have devoted themselves to the affairs of the Lung Association and the course of respiratory health and recognizes exemplary innovation or commitment towards lung health. Congratulations, Gisèle! As Dr. Cooper enthusiastically stated at the AGM, Gisèle is a "Cardio-respiratory Goddess".

Moni Fricke is our past Chair and remains very active with the College by chairing the Legislative Committee. A sincere thank you goes out to Moni for all the tremendous hard work she did on Council. Much of the respect that CPM has earned from our professional peers and stakeholders comes from such strong leadership on Council.

We would also like to welcome Andrea Giacobbo and Abby Morris (Public Member) to Council. Their insightful and dynamic involvement on Council is already evident and we look forward to working with them over the next few years. Best wishes to Rachel Borkowsky and Emily Koroscil, Council's outgoing student representatives who are graduating this year.

Be sure to stay *in touch* with the College of Physiotherapists of Manitoba, and visit our website regularly at: [www.manitobaphysio.com](http://www.manitobaphysio.com). If you have any suggestions, comments, or are interested in submitting an article to the newsletter, please email your inquiries to: [info@manitobaphysio.com](mailto:info@manitobaphysio.com).

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## Links

### Acupuncture List

*See the full Acupuncture list*

### Member Register & Facility List

*CPM Member Register and listing of Facilities*

### CPM Reference Guide

*Updated Policy & Procedure 3.10 Practice Hours*

## Contact Us

Visit our New Web Site  
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## Update on Policy and Procedures:

There has been a recent update to Policy & Procedure 3.10, Practice Hours. You can find this update on our web site or by clicking the link provided in this newsletter under links.

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## Congratulations to: Gisèle Pereira

**Submitted by Brenda McKechnie, Registrar/Executive Director**

Gisèle was selected by the Lung Association (National) to receive the Canadian Lung Association's 2009 Founders Award. This award is presented to honor individuals who have devoted themselves to the affairs of the Lung Association and to the cause of respiratory health. The award recognizes exemplary innovation or commitment towards lung health. Gisèle received the award on Saturday April 25, 2009 at the Canadian Lung Association's Dinner and Awards evening in Toronto.

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## Annual General Meeting

**Submitted by Brenda McKechnie, Registrar/Executive Director**

The College of Physiotherapists of Manitoba and the Manitoba Branch of the Canadian Physiotherapy Association held a shared AGM day on April 25, 2009 at Studios in The Exchange. The day began with the College's AGM followed by guest speaker Dr. Cal Botterill who spoke about "Going for Gold - The High Performance Physiotherapist". Dr. Botterill's presentation addressed the high performance athletes he has worked with and extrapolated how some of their strategies for success could be applied to the physiotherapist practitioner. The presentation was extremely interesting and entertaining and well received by the audience. Following the guest speaker was the annual general meeting of the Manitoba Branch. A short session was held at the end of the morning with Dr. Archie Cooper talking about visioning for the profession in Manitoba.

For the upcoming year, 2009-2010, your new Council members will be:

<b>Chair:</b>	Gisèle Pereira
<b>Vice Chair:</b>	Ricky Paggao
<b>Treasurer:</b>	Jenneth Swinamer
<b>Nominations Chair:</b>	Sean Gupta
<b>Complaints Committee Chair:</b>	Andrea Giacobbo
<b>Alliance Rep:</b>	Sean Gupta
<b>Newsletter Editor:</b>	Ricky Paggao
<b>Public Members:</b>	Darrel Cole Abby Morris Leslie Wilder

<b>Student Reps:</b>	Daniel Russell 2 vacancies to be filled.
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Moni Fricke who chaired the Council in 2008-09 has completed her term of office. The College accomplished a number of projects under Moni's direction. Council wishes Moni success in her future endeavours and is very grateful for her active participation on Council for the past three years.

As well, 2 student reps will be leaving Council: Rachel Borkowsky and Emily Koroscil. Both Rachel and Emily were great participants in our Council discussions. We wish them well as they launch into their physiotherapy careers.

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## **World Health Professions Conference on Regulation 2010**

**Submitted by Ricky Paggao, Newsletter Editor**

The World Health Professions Alliance and the World Confederation for Physical Therapy have announced the second World Health Professions' Conference on Regulation (WHPCR). It will be held on February 18-19, 2010 in Geneva, Switzerland.

The aim of the WHPCR 2010 will be to shape the future of health profession regulation within the context of the redesign of global health systems and evolving roles, always keeping in mind that public protection is the primary objective of health professional regulation.

Further information is available at: <http://www.whpa.org/whpcr2010/>

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## **Self-Regulation under Siege**

**Submitted by Brenda McKechnie, Registrar/Executive Director**

*Re-printed from "Grey Areas" (May 2009), the newsletter published by Steinecke Maciura LeBlanc, an Ontario law firm practicing in the field of professional regulation.*

Earlier articles of this newsletter have observed that Canada is one of the few remaining jurisdictions in the world still using the self-regulation model for professions and industries (see: [www.sml-law.com](http://www.sml-law.com), Grey Areas, issue No. 126). However, recent events in Ontario raise questions about the commitment to self-regulation in Ontario.

In recent years a pattern has developed where the media raises concerns about the effectiveness of a particular regulator and the government makes changes or amends legislation to increase the accountability of the regulator (or sometimes many regulators).

The nature and extent of the changes have cumulatively resulted in the erosion of the concept of self-regulation to the point that it is, in some circumstances, almost unrecognizable.

One trend has been that the number of public appointees to the governing Council or Board of regulators has increased. Two or three decades ago about 20-25% of the composition of the Council or Board, on average, were public appointees. Today it is just under 50% for most self-regulating bodies.

Another trend has seen the number and authority of independent "watch-dogs" increase significantly. Most regulators now have an independent body that reviews the handling of individual registration and complaints matters. The health professions also have the Health Professions Regulatory Advisory Council that conducts systemic reviews of some of

## Self-Regulation under Siege-Continued

the programs of the various health Colleges and regularly studies and makes recommendations on policy issues affecting them. In addition, the creation of the new Human Rights Tribunal has increased the number of complaints made against regulators.

Of course, regulators have always been subject to the scrutiny of the courts.

The Office of the Fairness Commissioner is now heavily involved in all systemic registration matters including amendments to regulations, annual self-reports and regular external audits of registration practices. Bill 175 enacting the *Ontario Labour Mobility Act* has been introduced into the legislature giving the government the authority to require regulators to take action implementing the Agreement on Internal Trade (AIT), imposing administrative penalties if they do not and authorizing the recovery of any penalties paid by the Ontario government for breaches of the AIT.

Government ministries have always scrutinized regulations proposed by self-regulating bodies. However, until recently this review tended to be at a high level (ensuring there was nothing fundamentally contrary to government policy) and legal in nature. In recent years, there is a perception that the scrutiny has become much more intense, down to justifying why a regulation requires 14 days notice of public meetings as opposed to 7 or 30 days.

Many regulatory bodies find the burden of complying with these various requirements to be enormous. Some feel that they spend more resources justifying their regulatory actions than actually regulating.

Earlier this month the government introduced Bill 179 amending the *Regulated Health Professions Act*. Two of the proposed amendments will further undermine the concept of self-regulation. The first allows the Minister to appoint a Supervisor to take over the administration of a regulatory College. This would be similar to the power of the Minister to take over the administration of a public hospital or a school board. The Supervisor would have the power of the Council, the Registrar and, it appears, the committees of the College.

The second amendment would allow the Minister to appoint auditors to examine the operations of the regulatory Colleges. The audit would not be restricted to financial matters, but of administrative and regulatory matters as well. The report would be made to the Minister and it would be up to the Minister to determine if a copy be given to the College.

These changes would significantly alter the concept of self-regulation. They would permit significant government involvement in regulatory matters without having to first enact legislation or even make a regulation. In addition, the implicit threat of exercising these powers could induce regulators to implement a government directive in order to avoid the alternative.

It is, of course, difficult to argue against enhanced accountability. On the surface it appears popular and sensible. And, sometimes it is. However, regulators need to defend the principle of self-regulation if they are to remain viable.

Otherwise the cost of self-regulation will be too high for the profession or industry to bear and the profession will give up on its regulatory body.

## Self-Regulation under Siege-Continued

Some strategies for defending self-regulation might include the following:

1. Articulate the benefits of self-regulation to the public. Professional buy-in to its public interest mandate is essential to prevent widespread and even condoned non-compliance as one sometimes sees with government regulation (viz. income and sales tax). In addition, self-regulation allows the most knowledgeable people to do the regulating.
2. Identify the costs of excessive accountability requirements. Regulatory action is delayed when staff are compiling lengthy and repetitive reports or preparing for extensive audits. Talented members of the profession will not volunteer or work for regulators if they perceive that they are little more than another government department.

Do a good job. Being fast, effective and fair removes the incentive for additional government involvement.

1. Ensure that the entire organization accepts and adopts the public interest mandate of the regulator.
2. Engage in public relations. Communicate what the regulator is doing in a manner that might interest the media. When there is a crisis or criticism, respond quickly and appropriately.
3. Maintain good communications with one's Ministry. Good informal problem solving will remove the need for formal accountability structures.

Self-regulation is a form of participatory democracy. When it works, it is the best option. When it fails, everyone including the public is left with second-best.

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## **Canadian Alliance of Physiotherapy Regulators** **Submitted by Brenda McKechnie, Registrar/Executive Director**

The Alliance held its Business and Annual General Meeting May 21 and 22 in Toronto. Two Manitoba physiotherapists received Recognition Awards in 2007 from the Alliance for their work on the Alliance Executive or committees. Congratulations are over due to Alison Baldwin who was on the Executive of the Alliance and Gisèle Pereira.

A number of Manitoba physiotherapists were noted to have participated in the work of the Alliance in 2008. Recognition of their contribution to the work of the Alliance is extended to:

**Executive Committee** - Gisèle Pereira

**Board of Examiners** - Neil Machutcheon and Ricky Paggao

**Analysis of Practice** - Practice Partners Reference Group - Jenneth Swinamer

**Analysis of Practice** - Subject Matter Expert Group - Dr. Barbara Shay

**Ethical Review Committee** - Nancy Ryan Arbez

**Written Test Development Group** - Neil Machutcheon

## **Essential Competencies for Physiotherapists**

### **Submitted by Brenda McKechnie, Registrar/Executive Director**

In preparation for the Alliance Annual Meeting in May, Joseph Vibert, Executive Director of the Alliance, conducted an environmental scan of issues affecting the physiotherapy regulators across Canada. The following is an excerpt from his report.

#### **Labour Mobility**

There is a significant amount of activity focussed on this issue of eliminating barriers to labour mobility and trade between jurisdictions at all levels- provincial, federal and international. There are a number of agreements in varying stages of development: The Agreement on Internal Trade (AIT) between the provinces and territories; the Trade, Investment and Labour Mobility Agreement (TILMA) a partnership between the Governments of British Columbia and Alberta; the Quebec Ontario Accord; the France Quebec Accord and a Canada-EU economic agreement.

There is the potential for substantial implications on the regulation of health professionals inherent in these agreements. The most immediately concerning are the amendments to the AIT that were to come into effect on April 1, 2009. The Physiotherapy Mutual Recognition Agreement (MRA) in effect since 2002 and updated and re-signed in 2008 has been effectively allowing mobility for physiotherapists within Canada. The MRA has accommodation provisions for jurisdictions that do not utilize the Physiotherapy Competency Examination (PCE). However, it appears that several provincial/ territorial governments are not approving requests from the regulators to maintain the PCE as an additional requirement for registration to achieve a legitimate objective of public health and safety.

#### **Fair Registration Practices**

Fairness commissions/agencies have been created in Ontario, Manitoba and Nova Scotia with the goal to ensure that regulated professions use transparent, impartial and fair registration practices. The requirements of the Acts associated with these commissions affect the regulatory bodies and third parties (e.g. the Alliance) that provide services such as credentialing of internationally educated applicants and administer entry to practice examinations.

The first major action in this area has been in Ontario. The College's registration practices have been audited (with a successful outcome) and their annual Fair Registration Practices Report was recently completed in March. The Alliance and other similar third party organizations participated in a survey of practices which resulted in a report: *Study of Qualification Assessment Agencies*.

This report and the recent review of the Alliance's practices with the Registrars have brought to light some opportunities for improvement of processes.

The Fairness Commissioner in Manitoba has engaged a consultant to undertake interviews with regulators concerning the certification process, data kept by the College about members and applicants and reporting out mechanisms. The Alliance and CPM have had preliminary contact with the consultant and will provide information and assistance as required.

Building on the previously mentioned legislative initiatives as well as Alberta's immigration strategy that includes a *Foreign Qualification Recognition Plan For Alberta 2008*, the federal government plans to work with provinces and territories to develop a common Foreign Credential Qualifications Framework to speed up the assessment and recognition of foreign qualifications.

### **Integration of the Internationally Educated Health Professional**

There are a number of initiatives occurring with federal and provincial funding for programs to facilitate the integration of the internationally educated into the Canadian labour force. There is considerable pressure from governments and employers to reduce barriers faced by these individuals. With the aging of the population and the expectation that the baby boomers will start exiting the workforce, the prediction is that by 2011 all growth in the workforce will be due to the internationally educated.

The Alliance is directly involved with the Ryerson University led *Internationally Educated Physiotherapists Bridging Program*. Other bridging programs for physiotherapists have been started in British Columbia and Alberta. There has been no apparent coordination amongst these programs. Other initiatives to assist the internationally educated include a new project to develop language benchmarking, testing and training for physiotherapists and occupational therapists. As well, the Alliance is finishing up a federally funded project to improve communication materials for credentialing applicants and examination candidates.

### **Legislation**

A number of jurisdictions are in various stages of changes to legislation that impact the regulated professions:

- Scope of practice - governments appear to be recognizing that practice is evolving and are open to changes in the Acts that allow for expanded scopes of activities. In several instances high risk, restricted or controlled activities would be permitted with restrictions and/or conditions attached.
- Complaints processes - governments are interested in having complaints and discipline processes consistent among the professions and some have created or will create regulatory oversight agencies/boards that could overrule decisions of registration committees.

## Essential Competencies for Physiotherapists- Continued

- Continuing competency/quality assurance - governments are mandating continuing competence programs. The jurisdictions are in varying phases of development regarding continuing competency.

### **Support Personnel**

The appropriate utilization of and regulation of support personnel has been getting increasing attention. A number of jurisdictions have the ability to regulate support personnel and others are contemplating legislation and/or guidelines. ACCPAP (The Accreditation Council for Canadian Physiotherapy Academic Programs) and the Canadian Association of Occupational Therapists are working on a project for the development and operations of an accreditation program of occupational and physical therapy support personnel education programs.

### **Foundational Documents for the Profession**

The Alliance completed its *Analysis of Practice* in 2008 which resulted in a new examination blueprint that was implemented in 2009.

CUPAC (Canadian University Physiotherapy Academic Programs) has recently completed its new *Entry-To-Practice Physiotherapy Curriculum: Content Guidelines for Canadian Academic Programs* with expected distribution this spring.

ACCPAP has revised the first five categories of the accreditation standards for educational programs. Its Council will complete the revision of Standard 6 (Physiotherapy Competencies) following the development of the new *Essential Competency Profile for Physiotherapists in Canada*, which is scheduled for completion in August 2009.

A conceptual *Physiotherapy Model of Practice* was drafted in 2007, received stakeholder feedback over the course of 2008, and was presented to CPA Congress and is expected to be available online for further stakeholder input later in 2009.

These documents contribute to the evolution of the profession and provide information to the public and stakeholders on the role and competencies of physiotherapists. The National Physiotherapy Advisory Group (NPAG) has proposed a cycle for the review of these seminal documents.

### **International Trends**

Physical therapists from around the world completed a World Confederation for Physical Therapy (WCPT) questionnaire to provide a picture of the issues that concern them most. The challenges of an aging society, new roles for physical therapists and health promotion are the areas they believe will be most important for the profession over the next five years. WCPT's ongoing policy and project work will include work on a model practice act and guidelines for review of the accreditation of PT professional entry-level education programs. An *International Policy summit on Direct Access and Advanced Scope of Practice in Physical Therapy* will be hosted by WCPT, APTA and CPA in the fall 2009.

## Essential Competencies for Physiotherapists- Continued

The United States Citizenship and Immigration Service has been delaying the granting of visas to foreign trained physical therapists because they are not at the masters level. This is apparently due to a miscommunication and/or misunderstanding by immigration officials and it is unclear how long this will take to be rectified.

There is a push in the United States to have all education programs at the clinical doctorate level by 2020. As the educational programs in other countries are not at this level, migrating to Canada may become a more attractive option.

### **Patient Safety**

The Canadian Patient Safety Institute has led a number of initiatives with the involvement of stakeholders and reports that a patient safety culture has started to take hold. Gradually, health care leaders have been embracing transparency, moving away from pointing fingers to learning from mistakes and adopting best practices. A number of Apology Acts are in development or have been passed and there is interest among regulators in developing positions statements/ guidelines concerning patient safety.

### **Inter-professional Collaboration**

There has been indication of government interest in the development of inter-professional standards committees and support and funding for multidisciplinary/integrated care initiatives. ACCPAP was involved in the *Accreditation for Inter-professional Health Professional Education (AIPHE)* project to develop accreditation standards related to inter-professional health education. Principles and guidelines for implementation and IPHE accreditation standards have been developed. A request or funding to support a second phase- Implementation and Evaluation- has been submitted.

### **Electronic Health Records**

CPA has recently been promoting the benefits of a national electronic health records (EHR) system to its membership. Canada Health Infoway, which is the federal agency behind the development of electronic health records in Canada has spent billions and will spend more to ensure that there is 100% coverage for Canadians. Once up and running, these systems will provide health care professionals with rapid access to accurate patient information, thus enabling more timely decisions about treatment and diagnosis. The Alliance, in concert with its members and stakeholders produced the document *Guideline for the Collection, Maintenance, Transmission and Destruction of Electronic Health Records (2004)*.

## **Note to Members**

### **Examination Candidate Registration**

Congratulations to third year students who will be graduating this year! After successful completion of the Written Exam, you will be eligible to register in Manitoba on the Examination Candidate register. Examination Candidate Registration packages were mailed out to you on April 16, 2009. Please notify the College if you did not receive a package, are moving, or do not plan to register. Registration on the Examination Candidate register must take place **prior to commencing employment**.

### **Changes in Profile Information**

A reminder to all members: please notify CPM if you have a change in contact information, home address or employment. You can also log in to your profile at any time to update this online at:  
<https://secure.alinity.com/cpm/webclient/>

### **Registration Reminder**

If you are presently on the Inactive register and planning to return to work, you must contact the CPM office in order to change your licensing status to the Active Register prior to returning to work.

### **Acupuncture Listing**

Congratulations to all those members who have recently successfully completed The Acupuncture Foundation of Canada (AFCI) Examination in Acupuncture. A full listing is available on our web site under Acupuncture Listing.

### **Office Hours During Summer**

Please note that the office is half staffed during July & August. Office hours during this time may vary. If you plan to attend the office, please call us at (204) 287-8502 to ensure it is open.