



Manitoba Physiotherapy - In Touch

College of Physiotherapists of Manitoba

Newsletter

December 22, 2008

Fall/Winter Edition 2008

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Note from the Editor

Submitted by Ricky Paggao, Newsletter Editor

Season's greetings and welcome to the Fall/Winter edition of the newsletter! This is my first note as the newly appointed Newsletter Editor. As a newer grad and new member of Council, I have gained much appreciation and respect for the whole other side of physiotherapy that many of us take for granted. There is so much hard work that goes on at the College of Physiotherapists of Manitoba. We are truly fortunate to have the experience, expertise and passion of CPM staff, Council and various committee members that keeps the rest of us in the know. Collectively, CPM not only protects the public, but also protects its members and helps promote our profession at all levels.

Congratulations to all the new graduate physiotherapists who completed the clinical component of the Physiotherapy National Exam in November. It was only a few years ago when I participated in that rite of passage to becoming a registered physiotherapist. Now I have the privilege of sitting on the Board of Examiners, which is a working committee of the Board of Directors of the Canadian Alliance of Physiotherapy Regulators. Our mandate is to set the passing scores for both the written and clinical components of the Physiotherapy Competency Exam. We also review and make decisions on all unsafe and unprofessional acts performed during the clinical component of the exam.

On behalf of CPM, I would like to thank you for the positive feedback we have received about the newsletter. Also thanks to the contributors of this newsletter, especially Brenda McKechnie. She wears many hats at CPM and her articles only represent a fraction of the amount of work she does. All previous newsletters are available on the newly revamped CPM website. I urge all of you to visit the new website if you haven't already. Virginia Kaskiw and Joey Stemarie, the Webmasters, have done a tremendous job at giving the website a new facelift. With 2009 membership renewals on the horizon, members will be pleased to know that online registration will be available this year!

If you have any suggestions, comments, or are interested in submitting an article to the newsletter, please don't hesitate to email your inquiries to info@manitobaphysio.com

Lastly, don't forget to mark your calendars for the 2009 AGM on April 25th!

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An Important Message about Registration

Submitted by Brenda McKechnie, Registrar/Executive Director

In recent months, the College has experienced an unprecedented number of physiotherapists returning to work, often after a maternity leave, who have failed to register on the active Practice Register of the College.

Members who go on maternity leave cannot remain on the Active Practice Register while on maternity leave. Rather, they have the option of not renewing their membership with the College in January or transferring to the Inactive Register (recommended). If you are going on maternity leave or other leave, please notify the CPM office of the change in your registration status.

When returning to practice, the physiotherapist **MUST** transfer membership to the Active Practice Register, or reapply for membership on this register **IN ADVANCE** of starting employment. According to the Regulations, a member can convert his/ her membership from the Inactive to Active Practice Register by filling in a registration form, pay the registration fee, provide evidence of having practiced physiotherapy for a minimum of 1,200 hours in the five year period immediately preceding the year for which registration is sought, declare that he/ she is not suffering from a physical or mental condition, disorder or addiction that could affect his/her practice of physiotherapy and provide evidence that he/she is about to commence practice within the next three months.

Providing evidence of practice hours means that a letter from the physiotherapist's previous employer(s) must be sent to the College which documents the practice hours for the preceding five years. The employer must also send a letter to the College which states that the physiotherapist is employed to commence work as a physiotherapist and the start date.

It is an offence of *The Physiotherapists Act* to work as a physiotherapist without being registered on the Active Practice Register.

The College has, and will continue to charge members for practicing without the appropriate registration. As well, employers have a legislated responsibility to ensure that their employees are registered on the Active Practice Register. The College will take legal action against employers who employ physiotherapists who are not registered to practice.

The names of physiotherapists who are registered on the Active Practice Register can be found on the College's website. Also, a telephone call to the College's Registration Secretary can confirm the registration status of a physiotherapist.

If you have any questions about maternity leave or your registration status, please contact the College office.

Contact Us

Visit our New Web Site

Send us an email

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Changing Your Address or Place of Employment?

Submitted by Brenda McKechnie, Registrar/Executive Director

Another situation that continues to arise is failure of members (including students) to notify the College of their change of address or employment. Without having this contact information up to date, the College may send important information to the wrong address.

As an example, some graduating students did not receive very important information about the Physiotherapy Competency Examination and registration information this past spring because they had moved and not notified the CPM. Other times, we have sought the opinions of various members on a number of topics. The College is unable to do this if we can't find you. Please make sure you notify the office of changes in your employment situation or home address. Starting in January, you will be able to make these changes on-line at the CPM web site.

New Web Site and College Logo

Submitted by Brenda McKechnie, Registrar/Executive Director

The Council is excited to announce that the College has launched its new web site and modernized logo. The website will be located at the same address: <http://www.manitobaphysio.com> but will have a brand new look.

The web site was re-designed in order to have a "Members Login Area" which will allow the College to accept credit cards for renewal of registration. Members will now be able to renew their registration online, and pay the renewal fees. Unfortunately, professional liability insurance certificates will still need to be mailed in order to complete the renewal process, unless this has been cleared in your renewal section under "Pending Registration Status". However, the process will be simpler than before. Renewal packages were mailed to all members on December 15th for the last time! Next year all members will need to renew online.

Physiotherapy Database

Submitted by Brenda McKechnie, Registrar/Executive Director

As has been reported in the newsletter previously, CPM and all the other physiotherapy regulators across Canada have been working with CIHI (Canadian Institute for Health Information) to develop a national database for the collection of information on physiotherapists.

The first year of submitting data to CIHI occurred in 2007 and the report will be released in December, along with separate reports on physicians, nurses, Occupational Therapists and Pharmacists. CIHI plans to highlight each report on a separate day during "HHR Week". Manitoba highlights from the Workforce Trends of Physiotherapists in Canada in 2007 indicate:

Supply

- The supply of physiotherapists in Manitoba grew by 17.6% between 2001 and 2006, which is higher than the average

national growth of 11.3% for the same period. **Pg. 12**

- Manitoba had 647 employed physiotherapists in 2007, which amounts to 54 physiotherapists per 100,000 population. **Pg. 19**

Demographics

- Manitoba had almost the same proportion of male physiotherapists (22.1%) compared to the national average (21.3%). **Pg. 22**
- Physiotherapists in Manitoba have an average age of 41.0 which is very close to the national average of 41.2. **Pg. 25**

Education

- Manitoba currently has one university that offers a physiotherapy program and it produced 52 new graduates in 2007. **Pg. 36**
- Manitoba had 9.3% of its physiotherapist workforce classified as new graduates, which is higher than the national average (5.9%). **Pg. 37**

Employment

- Among the provinces, Manitoba had the lowest percentage of its physiotherapist workforce (56.4%) reporting full-time employment status for primary employment. **Pg. 49** Full-time status by gender was not available for Manitoba.
- 22.6% of the Manitoba physiotherapist workforce indicated that they had multiple employers, which is very close to the national average (22.8%). **Pg. 42**
- Most of Manitoba's physiotherapists work in hospital (44.3%), followed by professional practice settings (34.1%). **Pg. 44**
- Across Canada, female physiotherapists worked fewer hours on average in their 30s and 40s compared to male physiotherapists. Manitoba data for hours worked were not available.

Geography & Mobility

- 90.0% of physiotherapist employers in Manitoba are located in urban areas, which is slightly less than the national average (92.1%). **Pg. 21**

The website for CIHI is <http://secure.cihi.ca/cihiweb/splash.html>

School of Medical Rehabilitation Open House

Submitted by Ricky Paggao, Newsletter Editor

The University of Manitoba, School of Medical Rehabilitation is hosting their annual Open House on:

Sunday, January 18 from 12:30 pm to 3:00 pm.

It is an excellent opportunity for prospective students, future medical professionals and anyone who would like to learn more about physical therapy, occupational therapy and respiratory therapy.

Place: The School of Medical Rehabilitation
University of Manitoba (Bannatyne Campus)
Brodie Centre
727 McDermot Avenue
Winnipeg, MB

Come and find out about the Medical Rehabilitation professions and learn more about the excellent programs offered at the University of Manitoba.

Still Recruiting...

Submitted by Brenda McKechnie, Registrar/Executive Director

The College is still interested in hearing from members who would like to become involved in the work of the College. Several committees, such as the Ethics Committee and Continuing Competence Committee, still could use physiotherapists who have an interest in the topic of ethics or continuing competency. A vacancy for a public member also exists. So if you know of a non-physiotherapist who would be interested in representing the public's viewpoint on Council, we would love to hear from you.

The Council and committees usually meet only once per month. The Council and committees take a hiatus over the summer. Work recommences in September. If you are interested or know of anyone who might be interested, please contact the Registrar.

Helping Students Find Their Future

By Dale Barbour - The Bulletin

The article appeared in The University of Manitoba "Bulletin" and is reprinted with their permission. Darrell Cole is one of the CPM Council's Public Representatives.

Career Trek founder takes a 'kids first' approach to his organization
A Day in the Life - of the Career Trek executive director



Career Trek executive director Darell Cole wants to help kids find a career that they'll love.

In some ways Darell Cole is just like any other entrepreneur; he's running a business, paying the bills and constantly trying to improve his products. But in this case the business is named Career Trek Inc., a not-for-profit agency and rather than turning out products, he's helping school-aged kids get a taste of over 80 different careers.

"We're trying to fight poverty through career development and educational opportunities. And the foundation of our programming is that we want kids to be able to experience how an education is relevant to their lives," Cole, the executive director for Career Trek Inc., said. The group's main office is based at the University of Manitoba, but they're an independent operation that works equally with the University of Winnipeg and Red

River College.

Career Trek partners with 60 middle schools from across Winnipeg and surrounding rural communities to bring an annual cohort of 240 kids into the program.

The parents are part of the process from day one, signing up at the same time as their children to ensure they both understand and support what the program is trying to do.

“We start working with kids at the age of ten, so we’re an early intervention program,” Cole said. “In the first year of our core program, which is based in the city of Winnipeg, the kids are able to experience 80 careers in 17 different fields. But those careers are all tied into their school subjects, so the kids understand that they have skills, and gifts, and talents, but these opportunities are also tied to gaining an education.”

Career Trek works with kids who wouldn’t be seen as likely to go on to post secondary education. “It could be anything from poverty to no family history of education attainment, to being in a rural area, to ability issues,” Cole said. The program takes the youngsters through career options at the different education facilities.

“On a typical Saturday they will try four different careers in four different fields,” Cole said.

At the U of M that could mean heading down to the Faculty of Kinesiology to try being an athletic therapist or over to the department of geology to get a feel for being a geological engineer.

“The key is to take something that is real about a career and then let them do it. So, not lecture them, not do demos, not hand kids brochures, but actually let them try and discover for themselves what they think of it,” Cole said. The training part of the job is carried out by university and college students. The program was initially run through the University of Manitoba with funding from the federal government. When that funding dried up, Cole, who has a social work degree from the U of M, looked at the program and decided he wanted to keep it running on his own.

“I decided it was helping. We have a skilled labour shortage. So how crazy is it that we’ve got people leaving school, and we’ve got employers saying I can’t find anyone. When you fight poverty you’re also dealing with the skilled labour shortage. It’s a two for one,” Cole said. “As a social worker I wasn’t interested in dealing with symptoms. I’m an entrepreneur, so I started my own organization. I wanted to do prevention work, I’m doing what I want to do and I love what I’m doing and that’s what I want every kid I work with to feel.”

That was nearly ten years ago. Last year, over half of the staff Cole hires to demonstrate the different Career Trek programs, came through the program themselves. “We have different elements as they go along, and it culminates with when they get to post secondary they have a part time job waiting for them, because that’s our staff, so they have a job to help pay for their postsecondary education, they have a support network and they get to be a role model for younger kids coming up,” Cole said.

Meanwhile, working with all three places of higher learning – and yet not being beholden to any of them – allows Cole to send the kids to the places that are best suited to give them career training in a particular field. If they're considering plumbing, it's Red River College. If they're looking at dentistry, then they come to the U of M. "They all know they're getting a fair shake, everyone knows who are focus is, our focus is the kids first. And if all the institutions buy into that philosophy they'll all benefit. The notion that we're competing for kids is kind of archaic," Cole said.

Accessing Neil John Maclean Health Sciences Library across Manitoba

Submitted by Ricky Paggao, Newsletter Editor

The Neil John Maclean Health Sciences Library (NJMHSL) is located on the University of Manitoba Bannatyne Campus at 727 McDermot Avenue. It supports the teaching, research, and patient care activities of students, faculty and staff in the city of Winnipeg and beyond. Through its eight satellite hospital libraries the University of Manitoba serves all Winnipeg hospitals, personal care homes, and WRHA staff. It is an excellent resource not only for medical professionals, staff and students, but also for patients and the general public.

As part of an agreement between the Regional Health Authorities of Manitoba and the Neil John Maclean Health Sciences Library, the NJMHSL is pleased to offer library and information services to health care providers working for affiliated RHAs in Manitoba. There is no charge to health care providers for this service. This will bring enhanced access to quality medical and allied health literature for evidence-based practice and health promotion programs. It is intended as an outreach program to provide health care professionals working throughout the province with better access to quality health care information. Library privileges were also recently granted to all staff at Community Therapy Services.

Any Manitoban with library privileges may contact the NJM Library for:

- Articles, DVDs, book chapters, clinical practice guidelines delivered directly to you
- Literature searches to find the best information for your work (they do the research!)
- Table of Contents or Alerts services to keep current with the latest information as it is published
- Resources for continuing education
- Training sessions and conference presentation for you and your staff

U of M alumni may register to borrow material for an annual fee of \$25.00 and adult Manitobans may register to borrow for an annual fee of \$50.00. Patients and the general public may apply for a special Consumer Health Card, which provides FREE access to the Consumer Health Collection.

More information may be found at <http://www.umanitoba.ca/libraries/health/>

Physiotherapy Standards Committee Update

Submitted by Liz Harvey, PT Standards Committee Chair

A brand new committee and chair for the CPM Standards Committee held its first meeting in May of 2008. Our goal is to meet once a month (with summers off, of course) to review the 27 Practice and Position Statements. The process includes researching the particular topic by reviewing the latest evidence as well as consultation with any resource that may be appropriate. Our priority topics are those standard documents that have passed their five year review date and those that have been deemed pertinent by Council. The members of our committee are: Monica Achtemichuk, Kim Hamilton, Monique Levesque and Maureen Walker. We welcome the addition of any member who is interested in joining and do our best to limit meetings to only 1 ½ hours with some good food for dinner!

Anyone interested in joining should contact Virginia Kaskiw at info@manitobaphysio.com or at (204) 287-8502.

Forwarded from the National Office of CPA

Dear Colleagues, The Canadian Centre for Ethics in Sport (CCES), on behalf of Canada's True Sport Movement is pleased to release What Sport Can Do: The True Sport Report.

There is one very simple idea at the heart of this report – good sport can make a great difference. The same idea is at the heart of the True Sport Movement.

As you may already know, True Sport is a national movement for sport and community. Its goal is to help sport live up to its full potential as a public asset for Canada and Canadian society, making a significant contribution to the development of youth, the well-being of individuals, and quality of life in our communities.

To download a copy of the report and the related backgrounders, or for more information on True Sport, please visit our website at <http://www.truesport.ca>

If you are interested in organizing a presentation on the report at your national or regional conference, please contact Jennifer Keith, Senior Manager, Engagement at 613-521-9533 ext. 3226 or jkeith@truesport.ca

Many thanks again for your interest and assistance.

Paul Melia

President and CEO Canadian Centre for Ethics in Sport

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Master of Physical Therapy Program

Submitted by Jenneth Swinamer

This graduate entry-to-practice program, that will replace the current BMR (PT) program, has been approved for implementation in 2010 by the University's administration. The proposed MPT program completed a successful external review process over this past summer.

The last class into the current BMR (PT) program was accepted this fall. There will be no new students accepted in 2009. The new program will start in August of 2010.

The masters program will be 25 months of continuous learning with students scheduled to complete the program in September, two years after they begin. The new program includes anatomy coursework, clinical visits and 30 weeks of clinical placements. In addition to the physiotherapy content of the program, students are responsible for a research project, under the supervision of a faculty member. One of the major differences between the current undergraduate program and the new graduate program will be the type of teaching used. The new program will use more labs, tutorials and seminars with students required to complete pre-reading assignments prior to class. Education literature has supported that the small group learning/teaching approach is more effective for knowledge uptake.

For more information about the new masters program please follow this link:

http://umanitoba.ca/faculties/medicine/units/medrehab/media/mpt_faq.pdf

Health Professions Legislation

Submitted by Brenda McKechnie, Registrar/Executive Director

The College continues to be involved in collaborative efforts with Manitoba Health and other professions, as we move towards health professions legislation.

At the moment, work continues at the government level to develop the wording on the complaints and inquiry sections of the legislation. The goal of government is to develop wording that reflects a similar complaints and inquiry process for all twenty of the regulated health professions affected by this new legislation.

Significant discussion has already taken place around the topic of reserved actions. Reserved actions are those activities undertaken by health professions that pose a serious risk of harm and should be taken out of the public domain and delegated to only those health professions which have the requisite skills knowledge and abilities to conduct those activities. Once taken out of the public domain, those activities can no longer be practiced by unregulated health professions, or others who have not been given the authority to practice these activities.

One of the reserved actions that will affect physiotherapists is the activity that we call spinal manipulation. Two other health professions are affected by this reserved action, being the chiropractic and naturopathic professions. Several meetings have been held between the three professions to discuss the wording of a description of this activity. CPM engaged the opinions of several physiotherapists who practice spinal manipulation including Evelyn Lightly, Rolly Lavallee, Mark Beatty and Darcy Reynolds. The CPM Legislative Committee was also involved in meetings with the other professions as well as reviewing draft wording.

Two face to face meetings were held in 2008, one in April and the other in June. The purpose of the June 26th meeting was to discuss the concerns raised as a result of the April 17th meeting and to determine whether or not an agreement could be reached regarding appropriate wording. These discussions are taking place in light of the current environment. That is, there exists a mutually collaborative working relationship at present upon which we will need to build further as we move forwards with the proposed umbrella health professional legislation. More information about this legislation is available at: <http://www.gov.mb.ca/health/hprri/index.html>

Two key concepts were clarified at the June meeting: the issue of risk and the concept of appropriate wording.

Manitoba Health has indicated that restricted activities are those activities which pose a high risk to the public. In deciding which activities constitute a high risk to the public, the following factors need to be considered: 1) the likelihood of harm, 2) the significance of the harm (the worst being death caused by the activity) and 3) the number of people affected. There should be some evidence of harm, not just theoretical harm.

In our discussions, some confusion arose over the proposed wording and what it is meant to describe. The wording is not meant to describe what a spinal manipulation is or is not. The wording describes the activity which is deemed to be high risk. As three distinct professions, we use different terminology and different definitions of what constitutes “a spinal manipulation/or adjustment”. These words will not appear in the legislation, only the definition of the activity.

The method of application or administration of the activity was discussed at length in our meetings. Whether to include or exclude how the activity was delivered in the definition (i.e. whether to be explicit or not) was determined to not be an important factor since the action itself, not the method of application was the important criterion to develop.

Therefore, by consensus, the following wording of the activity was approved and sent to Manitoba Health:

14. Administering by hand, instrument or other means
 - a) a fast, low amplitude thrust to move the joints of the spine beyond the individual’s usual physiological range of motion; or
 - b) a high velocity force to one or more segments of the spine.

This wording must now be approved by Manitoba Health and the

legislative drafters. Once all reserved actions have been approved by government, it is anticipated that delegation of the reserved activities to the various regulated professions will take place.

Sterilizing Reusable Medical Devices

Submitted by Brenda McKechnie, Registrar/Executive Director

The College of Physiotherapists of Manitoba's Practice Statement Number 4.6 on the topic of Acupuncture and Intramuscular Dry Needle Therapy recommend that physiotherapists use single-use, sterile, disposable needles only. In the case of intramuscular dry needle therapy, where a reusable plunger type applicator may be used, the applicator must be properly sterilized, in an autoclave, after use with each patient.

CPM has recently become aware of concerns regarding the cleaning and sterilizing of reusable needle plungers for intramuscular stimulation (IMS). Apparently the instructions provided with some of these devices are not sufficiently detailed to enable users to understand how to correctly reprocess these devices and in some cases, there are no instructions at all. There are also concerns about the ability to adequately reprocess devices with small lumens (such as IMS plungers). In particular, any sterilizer used to process IMS needle plungers must be validated for narrow lumen devices.

Some of the gravity displacement sterilizers, commonly known as the table top steam pressure autoclaves, have not been validated for narrow lumen devices.

The Ontario Government has developed a guideline entitled *Best Practices for Cleaning, Disinfection and Sterilization in All Health Care Settings (2006)* which can be found by going to The Ministry of Health and Long-Term Care's Website under Health Care Professionals section, Infectious Diseases and Control, Provincial Infectious Diseases Advisory Committee.

The College of Physical Therapists of Alberta (CPTA) is working with Alberta Health and Wellness, Health Canada and regional health authorities on this issue as well. CPTA has hired an infection control physician to assist with this issue. In preliminary meetings with the consultant, it appears that the reality of what needs to be done to meet reprocessing standards is most likely cost prohibitive for physiotherapists. The consultant also identified significant risks to physiotherapists that may be more serious than risks to the patient.

Appropriate infection control is an essential element of clinical practice management because of its critical importance to the health and safety of both patients and practitioners. The issue of reprocessing of needle plungers is a complex issue and knowledge of clinical infection control measures is continually growing. CPM recommends that physiotherapists adopt a risk management approach and stay informed in order to ensure patient and practitioner safety.

Physiotherapists who practice acupuncture and Intramuscular needle therapy must meet the educational qualifications required by the College.

These can be found in Practice Statement 4.6 which is located in your blue Members Reference Guide and also on the College website. Practicing acupuncture or dry needling without meeting the College requirements can result in disciplinary action.

World Physical Therapy 2011

20-23 June 2011, Amsterdam, Holland

Submitted by Ricky Paggao, Newsletter Editor

Every four years, the World Confederation of Physical Therapy (WCPT) hosts a scientific congress showcasing advancements in physical therapy research, practice and education. This spectacular event brings together more than 3,500 physical therapists. In 2007, World Congress was held in Vancouver, Canada. In 2011 the Royal Dutch Society for Physical Therapy will host the congress in Amsterdam. More information about World Physical Therapy 2011 may be found at <http://www.wcpt.org/congress/>

Now is your chance to become involved in how physical therapy is globally portrayed. WCPT is launching an international photography competition, open to amateurs and professional photographers alike.

They are seeking outstanding images from across the full range of physical therapy; practice, education and research. The photographs may be used on WCPT's website, in print publications and in presentations.

The images selected will:

- reflect practice of high quality
- show physical therapy across the lifespan
- illustrate the full scope of practice and a variety of practice settings

Images are to be taken at the best quality available. When photographs are submitted, please also provide evidence that any necessary permissions have been obtained from any person/s featured in the photographs. Students/models/actors may be used.

The closing date for entries is 20th January 2009. Please email your entries (or direct any enquiries you may have) to Mia Lockner at mlockner@wcpt.org. All winning entries and selected photographs will be featured on the WCPT website.

Policy & Procedure 3.10 Practice Hours Update

Submitted by Brenda McKechnie, Registrar/Executive Director

The College of Physiotherapists of Manitoba's [Policy & Procedure Number 3.10](#) on the topic of Practice Hours has been updated and can be downloaded from the CPM web site. Please replace the new update in your blue Reference Guide under section 3. Registration Policies.

Ordering X-Rays in The Pas

Submitted by Monique Levesque
Physiotherapist/Senior Rehab Therapist
The Pas Health Complex
NOR-MAN RHA
mlevesqu@normanrha.mb.ca

Effective September 23, 2008, the NOR-MAN RHA granted the privilege of ordering X-rays to the physiotherapists working at The Pas Health Complex.

This initiative has been in the works for a year. The idea came about from a discussion I had with CPM registrar, Brenda McKechnie, who informed me that The Physiotherapists Act does not prevent physios from ordering X-rays.

I therefore proceeded to discuss this with our site administrator and the RHA Executive Director of Professional Development who were very supportive of the initiative.

BACKGROUND

The Pas is situated 600km northwest of Winnipeg. The population of The Pas is approximately 6000 and the Opaskwayak Cree Nation across the Saskatchewan river from The Pas has a population of approximately 2500. Our 39 bed hospital also serves the RM of Kelsey and several outlying aboriginal/Métis communities. It has a catchment area of approximately 16 500 people.

The rehab department consists of 2.6 physio, 1.0 OT and 1.5 rehab assistants. The department is responsible for the delivery of rehab services to the hospital in-patients, the attached 60 bed LTC facility, homecare clients and the doctor referred out-patients.

Not unlike other rural and northern communities, The Pas has ongoing challenges of recruiting family physicians to the community.

This challenge has impacted the rehab department.

Our Physiotherapy Department presently has an out-patient waiting list of approximately 100 patients. But a year ago the waiting list was much greater due to a shortage of physiotherapists.

Frequently patients waited months before starting therapy and by then their referring physician was often no longer working in the community and they did not have a new family physician.

Therefore if an X-ray was required after the start of therapy, it was difficult to find a physician to order the exam. This often necessitated that the patient spend hours waiting in our busy, overworked ER department or Walk-In Clinic to simply receive an X-ray requisition. The patient's physiotherapy was often put on hold for several days until the X-ray requisition was sorted out.

This is why when Brenda informed me that physiotherapists can order X-rays, I jumped at the opportunity. This was our chance to enhance our patient's quality of care, without delay, and decrease the stress on other RHA services. Physios working in rural/northern settings work in collaboration with other health care providers but are often, because of circumstances, the patient's primary care provider. The physiotherapy X-ray ordering privilege makes the delivery of care more efficient and cost effective.

THE POLICY

Physiotherapists are able to order X-rays but reading them is not within our scope of practice. The diagnostic interpretation of the X-ray is the responsibility of the radiologist.

In order to request an X-ray, the physio fills out the requisition following the Diagnostic Imaging guidelines set out by our radiologist. A copy of the radiologist's report is sent to the therapist and the referring physician. When the patient's referring physician is no longer accessible a copy is sent to the hospital Chief of Staff. In the event that the X-ray reveals pathology that requires medical follow up, the referring physician or the Chief of Staff will organize appropriate care with the assistance of the physiotherapist.

THANK YOU

This initiative would not have been possible without the input and support of several people. Thank you to CPM and Brenda McKechnie, the NORMAN RHA especially Executive Director of Professional Development Bill Knight, past The Pas site administrator Vivian Painter, radiologist Dr. Debbie Mabin and The Pas Chief of Staff Dr. Colin Noel.

The Pas Physiotherapy Department ordered its first X-ray on October 16, 2008.

Canadian Patient Safety Institute

Submitted by Brenda McKechnie, Registrar/Executive Director

The [Canadian Patient Safety Institute](#) (CPSI) was established in 2003 as an independent not-for-profit corporation, operating collaboratively with health professionals and organizations, regulatory bodies and governments to build and advance a safer healthcare system for Canadians. CPSI performs a coordinating and leadership role across health sectors and systems, promotes leading practices and raises awareness with stakeholders, patients and the public about patient safety.

In spring 2006, the CPSI brought together an interdisciplinary team of Canadian health-system stakeholders to form the Disclosure Working Group with the mandate to develop national guidelines for the disclosure of adverse events to patients and their families. The guidelines are intended to assist and support healthcare providers, interdisciplinary

teams, organizations and regulators in developing and implementing adverse event disclosure policies, practices and training methods across Canada. [The Canadian Disclosure Guidelines](#) are posted on the CPSI web site.

Recent work by CPSI has included the development of inter-professional competencies for patient safety. The Safety Competencies Framework provides a unique set of core competency domains suitable for all health professionals to incorporate into educational programs as well as professional development activities. This is a pan-Canadian approach for patient safety education. These core domains will help healthcare practitioners and educators to focus on the key abilities that contribute to safer patient care. More information about the [Safety Competencies Domains](#) can be found in the October 2008 edition of the CPSI newsletter.

Re-Entry into Physiotherapy Practice

Submitted by Brenda McKechnie, Registrar/Executive Director

A person who holds a physiotherapy degree/ diploma but has been unable to fulfill the practice hour requirement (1200 hours of physiotherapy practice over the previous 5 years), will be required to successfully complete the Physiotherapy Competency Examination(PCE) in order to re-enter the profession and register with CPM.

There are currently no programs in place which will assist a physiotherapist to upgrade their knowledge, skills and abilities in preparation for the multiple choice (first component) of the PCE. The Re-entry candidate will need to undertake independent study, and use other available resources in order to prepare for the first part of the PCE. If successful on the multiple choice component, the Re-Entry Candidate is eligible to be registered with CPM to practice under the supervision of a Manitoba registered physiotherapist. While practicing under supervision, the candidate will receive periodic performance evaluations and other feedback to improve his/her competencies in physiotherapy practice which will enhance the ability of the Re-Entry Candidate to be successful on the second part of the PCE, which is the OSCE examination. Re-Entry Candidates are monitored closely by the College's Board of Assessors. Once a Re-entry Candidate has passed the multiple choice component of the PCE, he/she has two years in which to complete the PCE. As well, the candidate is provided with 3 opportunities to pass the PCE within the two year time period. In other words, the College will continue to register the Re-Entry Candidate to practice under supervision for up to three attempts in two years to complete the PCE.

A Re-Entry Candidate who is successful in passing both components of the PCE while on the Examination Candidate Register is then required to transfer his/her membership to the Active Practice Register and can practice independently.