

Annual Report 2010

COLLEGE OF PHYSIOTHERAPISTS OF NEW BRUNSWICK

REPORT OF THE COUNCIL AND REGISTRAR

CPTNB is almost a full year into its structure under the Physiotherapy Act (2010) and even newer Regulations, the latter of which were enacted in June, 2010. Although the Act was passed in March we continued government negotiations on regulations for several months on such matters as registration processes which would reflect labour mobility trends.

As is described in another section of this report, CPTNB faced significant work in relation to complaints in 2010 but our attention was also turned to support workers, development of practice educational material, establishment of new registration processes to accommodate the new exam requirements, setting up several supervisory situations, recruitment of new committee members and the initial building stages of our transition to the new College council structure.

Physiotherapist Support Workers (PTSW)

After considering results of the major study begun in 2009 and hearing concerns of members, council agreed to maintain the PTSW task group, invited the formal partnership of the NBPA and focused its work in 2010 on developing some useful tools for PTs as they work with, or supervise others. The result is a new practice standard and a supervision guide for PTs. Future consideration of other developments with PTSW matters will remain on council's agenda.

Evolution of CPTNB Registration Requirements

After allowing for a transitional period, CPTNB began the full implementation of its new registration processes, additional requirements and categories of membership - the major change being the requirement for initial applicants to have successfully completed the Physiotherapy Competency Exam (PCE.) All new applicants must have completed the PCE-Written component before registering, and will have two years to successfully complete the PCE-Clinical after no more than 3 attempts. We also developed an alternative process which may be chosen by graduates from physiotherapy programs in Quebec. The latter members may practise in the public sector for 2 years during which time they remain under supervision and evaluation, pay equivalent fees to PCE candidates and are subject to 2 on site evaluations by a registered PT appointed by the Registrar. We also evaluated a sample jurisprudence test which we hope will be available in future.

In regard to increasing reliance on clinical performance and jurisprudence assessments, CPTNB has begun to develop various tools and modules and has also initiated the recruitment of assessors from among its membership. We have been able to rely on the experience and resources of other regulators but our approach is somewhat cautious given that the required human and financial resources are steep, and each province has a unique practice environment.

Standing Committees

Having a new Council structure also set the stage for the establishment of three new standing committees to sustain the mandate of the CPTNB: (i) Registration (ii) Complaints and (iii) Discipline committees. The Professional Competence committee was sustained under Regulations. We will continue to develop and revise terms of reference and division of responsibilities among the committees, the Council and the Registrar plus, we must complete recruitment including appointing public representatives on the complaints and discipline committees.

Registration and Membership

At its maximum our registry totalled 519 members in 2010 (exclusive of Temporary ones), an increase of 12 since 2009. Most were new graduates although the number of new graduate applicants was down by 7.

Based on their individual circumstances, CPTNB registered several members as provisional or conditional registrants, who were required to undergo clinical performance evaluations, or to practise only under supervision such as those who were progressing through the two-part PCE. We were also able to complete full registration processes for several members who successfully completed their conditions. Despite several inquiries, we did not receive any applications from Internationally Educated PTs in 2010.

The total number of private practices (including professional corporations, self-employed PTs, sole proprietorships and partnerships) was fairly static – 94 – with one closure in 2010. More PTs seem to be starting self-employed casual practice while there is also a trend toward multiple-site ownership by a few PTs. However, the vast majority of private practices are single-owners or simple partnerships with one clinic. A number of clinics have non-regulatory affiliations with organizations which offer some administrative advantages to them; many PTs practise with other non-PTs in their clinics.

CPTNB continues to meet the challenge of participation in data gathering agreements with the N.B. Department of Health, the Canadian Institute for Health Information (CIHI) and the Alliance of Physiotherapy Regulators. Some very interesting reports are now accessible from these sources but such information demands significant resources for its collection, verification and retention. Additionally CPTNB has to maintain two systems now, which is wasteful duplication and together they still do not respond to all our needs. Aspects of such tools include web-based programs for self-registration, online entry, access to interactive educational and other modules, payment/invoicing, a mix of public and restricted, individual access, as well as reliable statistics and reports. Software programs have advanced enough to meet the complex needs and the costs have greatly decreased but are not insignificant to CPTNB which must also offer services in two official languages.

Administration and Finances

The change from a full audit to a financial engagement review was performed by chartered accountants with no reported concerns. In 2010 CPTNB experienced high legal costs as a result of complaints and the completion of our new legislation. As well, we supported special projects as reported elsewhere in this report. Our reserves have decreased even though we delayed some developments as we became aware of the growing legal costs. Council has considered options for improving financial stability to be able to sustain its public protection mandate and has a five year plan to acquire increased revenues. It has also developed a method of fee setting to be approved by members. Regardless, regulators cannot predict how many or how complex complaints may be in any one year so maintaining adequate reserves remains a fundamental responsibility.

Complaints and Discipline

Case 1: Alleged Billing Fraud & Record Keeping Issues (Opened August, 2008. Closed September, 2010)

Insurer submitted a complaint against the owner of a clinic which alleged a pattern of potential incorrect billing and lack of adequate charting and billing records. The PT owner - who was one of five practising members in the clinic over the time referenced in the allegations - engaged legal counsel. Significant delays followed initially because the complainant withheld evidence which CPTNB needed. The complainant was initially reluctant as they had presumed privacy legislation restricted them from providing certain evidence. Once CPTNB was able to confirm and clarify our authority in relation to our access to information, we received more evidence. Following engagement of legal counsel by the PT, many more delays ensued when issues and challenges were raised and which persisted through 2010. While CPTNB felt confident we were acting fairly, responsibly and fully within our authority, we had to counter each concern by researching precedents and relevant jurisprudence. Finally, we were able to satisfy the objections and moved to hold a committee of inquiry (COI) composed of 3 PTs and 1 public representative. They conducted a thorough review of a significant volume of evidence, including several sworn affidavits and hundreds of billings and patient records. Finally, they conducted interviews of major witnesses. Their findings and recommendations were presented to the Board along with a full report – all of which were accepted by the

Board. The matter was closed after the Board's decision that the complaint not be referred for a discipline hearing because: (i) in respect of the billing issues, the Board accepted the opinion of the COI that there was no evidence of fraudulent billing. Further, where there was incorrect use of the billing number and a few billing errors, these were shown to be clerical errors of which the member had no knowledge and which had been resolved to the satisfaction of the complainant; and (ii) in respect of charting issues, the information available to the Board indicated there was room for improvement in charting practices but there was insufficient evidence to conclude that the member breached practice of standards in relation to charting.

Case 2 Alleged Incompetency (Opened December, 2008. Closed August, 2010)

Employer submitted a complaint alleging incompetency of a member who had been practising in a public setting for 13 years. The member chose to involve a union representative and we mutually proceeded. With the eventual cooperation of the union, the member and the employer, CPTNB was asked to conduct a competency assessment. We were finally able to make arrangements for a comprehensive clinical performance evaluation (CPE) of the PT in another facility involving a team of PTs and which concluded in late 2009. Subsequently, a Committee of Inquiry (COI) composed of 3PTs and 1 public representative was appointed to consider all evidence in the matter and they held an initial meeting to review the case. At that time, the COI requested that more of the evidence be translated and a date was set for the inquiry while the work on the documents began. However, prior to the inquiry, the member resigned her membership and agreed to stop practising physiotherapy under the further conditions that if the member wishes to renew membership in future, she will be required first, to pass the PCE-W&C and also undergo a successful CPE while under provisional registration within a time limit. Council accepted the agreement, dismissed the COI and closed the matter.

Additional Member Considerations

In conducting the inquiry, into Case 1, and taking into consideration all the evidence before it, the Committee of Inquiry came to the conclusion that it may be of benefit to the members of the profession, and consequently, in the interest of the public, that the Council consider taking action to achieve additional member education in the following subjects:

- Expectations of charting and developing patient records
- Responsibilities for maintaining, securing, accessing, storing and discarding patient records and also releasing of the information
- The use of the Physiotherapists' Registration number as a billing tool
- Individual Physiotherapists' responsibilities in monitoring billings under their name and provider or College registration number.

CPTNB encourages all members to be frequent visitors to College documentation and their web site www.cptnb.ca where they may refer to standards, ethics, advisories, responsibility statements and other directives to enable them to be clear about minimally acceptable practice standards. Further, we hope to issue more information soon on the requirements of privacy legislation, as well as other statements clarifying members' individual responsibility and liability for documentation, billing and records.

Canadian Alliance of Physiotherapy Regulators

Nationally, CPTNB works in collaboration with the Alliance (a federation of all Canadian physiotherapy regulatory authorities - all provinces and the Yukon) and we have made significant progress in becoming a leading regulatory federation, being much more responsive and adaptable to its member regulators, achieving more consistency in our practices – and always – evaluating, reassessing and improving its major functions to provide entry-level examinations plus credentialling, assessment and support programs for non-Canadian educated applicants. The Alliance has developed many national and international partnerships and generally keeps alert to trends and issues which have impacts on regulators and physiotherapists. Both members and the public can glean a lot of informative trends by visiting the Alliance's web site www.alliancept.org. Government and public pressures are demanding increasingly engaged regulators in various matters and there are growing expectations to demonstrate full accountability and competency of practitioners along with best practices of regulators and fair access for all qualified applicants. Such factors will no doubt dominate our agendas for the foreseeable future ■