



**MEETING OF THE COUNCIL OF THE  
COLLEGE OF PHYSIOTHERAPISTS OF ONTARIO**

**March 23-24, 2022**

**Meeting time: 9:00 am – 4:00 pm each day**

Meeting to be held at the College Boardroom via Zoom and YouTube

**Commitment to the Public Interest**

The public interest is the foundation of all decisions made by this Council. Acting in the public interest ensures that decisions consider: Accessibility, Accountability, Equality, Equity, Protection of the public and Quality Care

**What is Public Interest?**



**Conflict of Interest and Bias**

Council members are required to declare a conflict of interest or remove themselves from any discussion where they or others may believe that they are unable to consider a matter in a fair, independent and unbiased manner. A declaration in this regard must be made at the start of any discussion item

| Purpose                           | Item            | March 23, 2022   |
|-----------------------------------|-----------------|--|
|                                   | *               | <b>Welcoming Remarks and Roll Call – Theresa Stevens, President</b><br>Land Acknowledgement Statement                          |
|                                   | <b>1 Motion</b> | <b>Approval of Agenda- T. Stevens</b>  |
| <b>Governance For Information</b> | <b>2</b>        | <b>President’s Report – T. Stevens</b><br>A written report of updates from the past quarter                                    |
| <b>Governance For Information</b> | <b>3</b>        | <b>Registrar’s Report – Rod Hamilton, Registrar</b><br>A written report of internal and external updates from the past quarter |



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|---|---------------------------|--|
| <b>Governance</b><br>For Decision       | <b>4</b><br><b>Motion</b> | <b>Consent Agenda- T. Stevens</b> <ol style="list-style-type: none"><li>1. Approval of Council meeting minutes</li><li>2. Executive Committee meeting minutes<ul style="list-style-type: none"><li>• Written resolution to appoint Laina Smith to the Discipline &amp; Fitness to Practise Committee</li></ul></li><li>3. Acceptance of Committee Reports<ul style="list-style-type: none"><li>• Registration Committee</li><li>• Inquiries, Complaints and Reports Committee</li><li>• Quality Assurance Committee</li><li>• Executive Committee</li><li>• Finance Committee</li><li>• Patient Relations Committee</li><li>• Discipline &amp; Fitness to Practice Committee</li><li>• Compliance Monitoring</li><li>• Practice Advice</li><li>• Policy, Strategy, and Governance</li><li>• Communications</li></ul></li></ol> |
| <b>For Information</b>                  | <b>5</b>                  | <b>Background about the Canadian Alliance of Physiotherapy Regulators and the College's Registration Process</b><br><br>This is background information relevant to Agenda items 6, 7, and 14   |
| <b>Strategic</b><br>For Information     | <b>6</b>                  | <b>Entry to Practice Update</b><br><i>Joyce Huang, Strategic Projects Manager</i><br><br>In December 2021, Council made a number of decisions and directed staff to undertake work in response to the ongoing unavailability of the PCE-Clinical exam. This is a status update on the work items.  |
| <b>Strategy/Policy</b><br>For Direction | <b>7</b>                  | <b>College's General Regulation Amendment Proposal- Consultation review</b><br><i>Justin Rafton, Governance &amp; Policy Manager, and Evguenia Ermakova, Policy Analyst</i><br><br>Council is asked to consider the Executive committees' recommendation to direct staff to conduct a fulsome analysis and review of the General Regulation and return with a revised proposal for Council consideration.  |



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|---|----------------------------|--|
| <b>Operational</b><br>For Decision                | <b>8</b><br><b>Motion</b>  | <b>Annual Budget FY 2023</b><br><i>Zoe Robinson, Director of Corporate Services</i><br><br>The annual operating budget for the fiscal year 2023, covering the period April 1, 2022, to March 31, 2023, requires approval by Council.   |
| Lunch 12:00-1:00pm                                |                            |  |
| <b>Strategic</b><br>For Decision<br>1:00 pm       | <b>9</b><br><b>Motion</b>  | <b>Strategic Plan 2022-2026</b><br><i>Rod Hamilton, Registrar</i><br><br>Council is asked to consider the 2022-2026 CPO Strategic plan.  |
| <b>Governance</b><br>For Information<br>30 mins   | <b>10</b>                  | <b>Council Education: Quality Assurance Program</b><br><i>Presentation by Shelley Martin, Quality Assurance Manager</i>  |
| <b>Other (External Reporting)</b><br>For Decision | <b>11</b><br><b>Motion</b> | <b>College Performance Measurement Framework (CPMF)- 2021 submission</b><br><i>Rod Hamilton, Registrar</i><br><br>The College Performance Measurement Framework (CPMF) 2021 report has been completed. The Executive Committee recommends that Council approve the report for publication. |
| <b>Governance</b><br>For Decision                 | <b>12</b><br><b>Motion</b> | <b>Committee Slate Amendment</b><br><i>Elicia Persaud, Governance Analyst</i><br><br>Council is asked to approve the amended committee slate   |
| Adjournment                                       |                            |  |

| Purpose   | Item      | March 24, 2022   |
|---|-----------|--|
| <b>Governance</b><br>For Information<br>9:00 am | <b>13</b> | <b>Committee Role Orientation</b><br><i>Presentation by Committee Chairs</i><br><br>To provide a high-level overview of each of the College's Committees, to assist Council members as they consider their Committee interest for the upcoming year. Each Committee's Chair will provide the overview for their Committee, followed by time for questions. |



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|--|--------------------|--|
| <b>Strategic</b><br>For Decision<br>10:00 am | <b>14</b>          | <b>Development of an Alternative Exam: Ontario Clinical Exam</b><br><i>Joyce Huang, Strategic Project Manager</i><br><br>Council is receiving an update on the ongoing work to develop the Ontario Clinical Exam                 |
|  | <b>14.1 Motion</b> | <b>Approval of Ontario Exam blueprint</b><br>For Decision<br><i>Presentation by Leanne Worsfold</i><br><br>Council is asked to approve the exam blueprint.   |
|  | <b>14.2 Motion</b> | <b>Approval of Ontario Clinical Exam for Use</b><br>For Decision<br><br>Council is asked to approve the Ontario Clinical Exam, once it has been developed, as an approved exam for registering in Independent Practice.          |
| <b>Operational</b><br>For Information        | <b>15</b>          | <b>FY 2022 Q3 Financial Management Report</b><br><i>Zoe Robinson, Director, Corporate Services</i><br><br>Year-to-date spending, including notes about variance between budget and actual spending, is provided for information. |
| <b>Governance</b>                            | <b>16</b>          | <b>President, Vice President, and Executive Committee Election</b><br>Election of the President, Vice President, and Executive Committee members at large.<br><br>Note: the election will use electronic voting                  |
|  | <b>17</b>          | <b>Member's Motions – T Stevens</b>  |
| <b>ADJOURNMENT</b>                           |                    |  |

#### Future Council Meeting Dates

- June 28-29, 2022
- September 22-23, 2022
- December 12-13, 2022



## College of Physiotherapists Land Acknowledgement Statement

Before we begin, we would like to acknowledge with the respect that the land we are meeting on is the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg (Awe – Nish – Nah – Beck), the Chippewa (Chip – A – Wah), the Haudenosaunee Hoe – De – Nah – Show – Nee), and the Wendat (When – Dat) peoples.

These lands are now home to many diverse First Nations, Inuit (ee – nu -eet), and Métis ( May – Tee ) peoples. We also recognize that the meeting place of Toronto, traditionally known as Tkaronto (Tka – Ron – Toe), is covered by Treaty 13 with the Mississaugas of the Credit and is within the lands of the Dish With One Spoon covenant.

We are honouring these lands as part of a deeper commitment to Ontario's Indigenous communities. As provincial health regulators, we have a large role to play in reconciliation to meet the broader goal of public protection.

We would like to encourage you to reflect on the lands you call home and how you came to inhabit them, and on the Indigenous communities who have a traditional kinship with these lands. Those of us joining virtually outside of Toronto are also encouraged to learn more about the traditional keepers of their territory



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

**Motion No.: 1.0**

**Council Meeting  
March 23-24, 2022**

**Agenda # 1: Approval of the agenda**

It is moved by

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and seconded by

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that:

the agenda be accepted with the possibility for changes to the order of items to address time constraints.

|                       |                            |
|-----------------------|----------------------------|
| <b>Meeting Date:</b>  | March 23-24, 2022          |
| <b>Agenda Item #:</b> | 2                          |
| <b>Issue:</b>         | President's Report         |
| <b>Submitted by:</b>  | Theresa Stevens, President |

## Governance

- The College has a new public member. We received a notice that Laina Smith has been appointed until Feb 2025. She is a lawyer from north of Toronto. You will remember that due to the urgent need for a public member she was immediately appointed to the Discipline and Fitness to Practice Committee. You will also see that she is being appointed to the QA committee to ensure it is appropriately composed.
- You should also note that we have lost a public member. Myles MacLeod's appointment expired in February and he did not ask to be renewed due to workload demands.
- Congratulations to public member Carole Baxter, she has been re-appointed to stay on Council until 2025.
- The Executive Committee is responsible for administering the Council Education Plan. Executive approved a Council Education Strategy which is included as an attachment and has confirmed the two education sessions planned for the 2022-2023 Council year: Principles in Governance and Public Interest. These sessions will be scheduled over the next year. See Appendix 1.
- Executive has deferred the decision around conference attendance until an agenda has been released for the two targeted conferences: Canadian Network of Agencies for Regulation (CNAR) and The Society of Adjudicators and Regulators (SOAR). This will ensure that the focus of the conferences align with the priorities of Council this year. The outcome of these decisions will be brought back in June.

## Environment

- We received notice that the government was going to de-regulate the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario and put acupuncture back in the public domain. Three days later, the government changed its mind. The Registrar's report has more detail.

## External Representation for the College

- Ontario Physiotherapy Leadership Consortium (OPLC) – PT Academic Chairs, CEO of OPA. The college has been having an ongoing series of discussions with this group to discuss Entry to Practice and exam related questions and processes.
- Last week the Registrar, Rod Hamilton, and I independently met with the Governance review consultant that the Canadian Alliance of Physiotherapy Regulators (CAPR) has hired to review its governance process. We provided some insight into the issues associated with CAPR governance that we are aware of and suggested solutions.
- Proposed Emergency Amendment to the General Regulation. College staff has provided the Ministry with responses to questions about the proposed regulation. We have yet to hear when the regulation will move forward for approval.

## Council Feedback – from December 2021 meeting

- Councillors reported a general consensus that briefing notes provide enough background information in order to make appropriate decisions.
- The Strategic planning session allowed councillors a chance to explore and provide direction on the strategic issues of the College.
- There was a request for materials to be provided ahead of time to process the material.
- There was agreement that group discussion was helpful.
- Positive feedback on the practice advice education session was received.
- Councillors agreed a diversity of opinion was expressed during the Council's discussions.
- General consensus that President managed the discussions well and that Council discussion stayed on topic related to motions.
- General agreement that discussion during the meeting was at an appropriately high level of detail, and not overly operational, to help Council make decisions.
- Councillors agreed that potential conflicts of interest were identified and managed.
- General agreement that councillors actively participated in discussions.
- There was consensus that the President's report was useful in updating about general College activities.
- There was consensus that the Registrar's report was useful in updating about general College activities.
- There was a request for more social time before the start of a meeting (breakout room) and for in-person meetings as getting to know other councillors is beneficial.

## Attachments:

Appendix 1: CPO Council Education Strategy



# Council Education Strategy

## Core Education

These are the fundamental training needs identified for Council as being essential to the role of a Council member.

## Supplementary Training

These are additional training opportunities that are identified for a specific purpose or individual to help meet a targeted goal.

**1. Onboarding and Orientation**  
Baseline education provided to all new Council members.  
All topics included in the In-service education sessions will be introduced during the onboarding and orientation.

**2. In-service Education Sessions**  
These sessions are scheduled in a three-year rotation cycle, except for Sexual Abuse Prevention and Financial Management Training which are held annually.  
These sessions will enhance the learning received during the Onboarding and Orientation.

**3. Ad Hoc Education**  
Important training sessions to support Council decision making based on specific needs.  
These sessions are provided when necessary

**4. External Education Opportunities**  
These opportunities are assessed annually based on the annual priorities of Council and are identified as needed

- Onboarding
- Orientation Program
- Training Modules

- Principles of Governance
- Public Interest
- Risk Management
- Communication
- Equity, Diversity and Inclusion
- Governance Best Practices
- Sexual Abuse Prevention
- Financial Management

Education to support specific activities as needed

- Targeted Training
- Governance Conferences

|                       |                         |
|-----------------------|-------------------------|
| <b>Meeting Date:</b>  | March 23-24, 2022       |
| <b>Agenda Item #:</b> | 3                       |
| <b>Issue:</b>         | Registrar's Report      |
| <b>Submitted by:</b>  | Rod Hamilton, Registrar |

## Environment

There has been some suggestion that as the provincial government considers governance reform in the regulation of health professionals, it may decide to add additional oversight mechanisms to the regulatory framework, such as they have already done for some non-health regulators.

One option might be for the government to give the provincial auditor some oversight of Colleges. The attached Grey Areas report provides an analysis of the kinds of oversight the provincial auditor may bring to bear on the Colleges if such an oversight mechanism were implemented (Appendix 1)

## Stakeholders and System Partners

*See CAPR decision*

OPLC – Discussed in Presidents report – ongoing discussions with this group to share information related to entry to practice issues

## Legislative

*Deregulation of Traditional Chinese Medicine and Acupuncture/Winding down of College of TCM.*

On February 28, the government announced its intention to deregulate Traditional Chinese Medicine and Acupuncture and return the controlled act of acupuncture to the public domain, which meant that people who provide the service would no longer need to be members of a health regulatory college that are permitted to perform acupuncture as a controlled act.

Some days later, the government announced a change in its plans (see attached letter Appendix 2) and that it had decided to retain TCM as a regulated profession and keep acupuncture as a controlled act.

## Legal

### *Human Rights Tribunal of Ontario (HRTO) Update*

On October 22, 2021, the College received notice of an application being made to the Human Rights Tribunal of Ontario by a registrant of the College naming a number of parties including the College. The College has not received notice from the HRTO as of yet.

### *Provincial Offences Prosecution*

The College will be prosecuting Josephine Slaa for holding out as a physiotherapist under the Provincial Offences Act. On February 11, 2022, the College obtained a summons to serve J. Slaa and require them to appear in court on April 22, 2022.

## College Initiatives and Projects

### *Staff-identified governance process improvements*

Staff have identified a number of governance process improvements based on expectations in the College Performance Measurement Framework (CPMF), Councillor feedback, and staff suggestions. The following changes will be introduced on a trial basis:

- Review of minutes after each meeting: About a week after each Council meeting, staff will circulate a draft of the minutes to Councillors for review and feedback, and the revised draft will be included in the meeting materials in the subsequent meeting for formal approval. This process helps to ensure that Councillors have an opportunity to review the minutes while their memory is still fresh and makes the formal approval more efficient at the following meeting.
- Capturing action items: Motions are intended to capture formal decisions, however, in the past, we lacked a mechanism to capture direction and action items needed to implement a decision or direction. We will start using an action items list for the purpose of capturing direction or action items that are not part of a formal decision, to supplement the use of formal motions.
- Reporting on action items on an ongoing basis: To better align with expectations in the CPMF, we will start reporting on the status of active action items on an ongoing basis to demonstrate progress in implementing Council's decisions and direction. It is expected that reporting on the action items list will be included in the Registrar's Report. An example is included at the end of this report.
- Reducing the use of formal motions at Executive Committee meetings: Formal motions are typically used to capture decisions. While the Executive Committee does make some decisions, many of the items they discuss are for direction and recommendation to Council. Therefore we are suggesting that we trial a change where motions are only used for formal decision items, but not for items for direction and recommendation.

- Adding categories to agenda items: The CPMF expectations indicate that the Ministry believes College Councils should deal with certain types of matters, for example, financial oversight, risk management, setting strategic direction, etc. To make it easier to demonstrate alignment with these expectations, we will be indicating the category or type of issue associated with each Council agenda item.
- Written Registrar's and President's Reports: We will return to the use of written President's and Registrar's Reports in Council materials so that Councillors have a chance to review and consider the updates in advance and be able to ask questions at the meeting.

### *Strategic Planning*

In December 2021, Council had a second strategic planning session where they engaged in generative discussions to identify areas that are of strategic importance to the College and to begin to build consensus on what those priorities might be as a group.

On March 4, 2022, Council had their third strategic planning session where they reviewed a draft version of a strategic plan document based on their previous discussions, with an opportunity to indicate agreement. Some changes were proposed to the document which will be available for Council's review and approval at the March 23-24 Council meeting.

### *Practice Advisory Service review*

Over the last year, staff has engaged in a broad review of the Practice Advice service. The review describes the history of the service, its current purpose, analyzes the risks identified as well as the benefits of the service. There have been ongoing quality improvement activities resulting from an appraisal of the service activities.

### *Research about internationally educated physiotherapist's transition to practice*

The College hired Goldfarb Intelligence Marketing to conduct qualitative and quantitative research to better understand the experience of internationally educated physiotherapists and how the College is meeting their needs within the context of the College's mandate.

The research conducted 17 in-depth, one-on-one interviews with individuals educated outside of Canada, representing a range of experiences. ( 10 registered in provisional practice, 7 fully registered, 5 who completed the UofT Bridging program, 1 PhD at Western, 8 from India (some studied in UK or UAE), 1 Australia, 1 Colombia, 1 Ireland, 1 Madagascar, 1 Netherlands, 1 Nigeria, 1 Pakistan (studied UAE) and 1 US). Following the interviews conducted by Zoom, the College launched an online survey with 535 PTs completing the online survey.

The research yielded a list of recommendations. Some of these recommendations have begun to be implemented and others will be considered for implementation over the coming year. See the two attached reports for additional information (Appendix 3 & 4)

## Operations / Program Area Updates

### *Staffing Updates*

- Amanda Pinch- Credentialing & Examinations Manager
- Justin Rafton- Policy and Governance Manager departing March 31

### *Space / Leasing Update*

The college's office space at 375 University Ave was put on the sublease market in November 2021. By the middle of February 2022, 13 enquiries had been made about the space, however, none of these enquiries included a walkthrough. Colliers, the real estate company managing the sublease, is still confident that planning for a sublease tenant by October 2022 is reasonable.

### *Website and Social Media Analytics report (November 2021 – February 2022)*

This information will provide an overview of some website and social media metrics that may be of interest to Council members and the public (Appendix 5)

## Risks / Opportunities

### *Status of Risk Registry*

A draft approach to the risk registry has been developed and is currently under review by management.

### **Status Updates on Action Items (example only):**

*A running list of action items from previous Council meetings; once items are marked complete, they will come off the list.*

| Date of Meeting | Action item description | Required by date | Assigned to | Current Status |
|-----------------|-------------------------|------------------|-------------|----------------|
|                 |                         |                  |             |                |
|                 |                         |                  |             |                |
|                 |                         |                  |             |                |

## Attachments

- Appendix 1: Grey Areas: External Review of Regulators by the Auditor General
- Appendix 2: Update on Schedule 5 of Bill 88
- Appendix 3: Research about internationally educated physiotherapists – Qualitative Research Report
- Appendix 4: Research about internationally educated physiotherapists – Quantitative Research Report
- Appendix 5: CPO Analytics -November 1, 2021, to February 28, 2022

## External Review of Regulators by the Auditor General

by Natasha Danson  
March 2022 - No. 264

There are proposals circulating that will expand the mandate of the Auditor General of Ontario to include auditing self-governing professions. It appears that such reviews will not be limited to the financial integrity of regulators. Given the recent audits of other arms-length regulators of professions and industries, the scope of those reviews will extend to questioning the regulatory approaches and philosophies of regulators.

Five of the more recent reviews by the Auditor General for non-government regulators have been for the following regulators:

- Ontario Motor Vehicle Industry Council
- Ontario Securities Commission
- Alcohol and Gaming Commission of Ontario
- Bereavement Authority of Ontario
- Electrical Safety Authority

By analyzing these reports one can obtain a sense of how the Auditor General perceives its role in such reviews.

Some aspects of those reports deal, as expected, with financial revenue and spending issues, including:

- The accumulation of large surpluses rather than using the resources to enhance regulation;
- Whether appropriate investment strategies were used for surplus funds;
- Whether the regulator's meal and hospitality reimbursement policy was appropriate;
- Compensation levels for staff compared to other regulators; and
- The percentage of compensation fund claims recovered from the offending registrants.

However, many aspects of those reports contain a much broader analysis of the regulators, including policy preferences for the approaches and philosophies of regulators. For example, below is a partial list of the points of scrutiny by the Auditor General.

### Inspections and Related Compliance Monitoring

- The number of inspections, etc., conducted, including comparison to past years;
- The use of checklists for inspections, etc., and whether those checklists were made public so that practitioners and the public could better understand the expectations of the regulator;
- Public reporting of inspections, etc., and the accuracy of those public reports;
- The use of risk analysis and selection criteria for scheduling inspections, etc.;
- The necessity of inspections, etc., conducted;
- Whether inspections, etc., could be effectively and safely done remotely;
- The frequency of follow-up inspections, etc., where violations were found and whether they were prioritized on the basis of risk;
- Whether inspectors and enforcement staff were rotated so that they would not repeatedly be in contact with the same registrants;
- Whether regulators used "undercover investigators" or "mystery shoppers" to monitor compliance with the rules by registrants;
- Whether regulatory activities were coordinated with other regulators with overlapping mandates;
- The adequacy of information technology and analytical tools to monitor regulatory performance and to identify patterns of concerns within the profession or industry;
- Whether the regulator monitors the length of time to complete inspections, etc., and whether those timeframes are reasonable;

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#### FOR MORE INFORMATION

This newsletter is published by Steinecke Maciura LeBlanc, a law firm practising in the field of professional regulation. If you are not receiving a copy and would like one, please contact: Steinecke Maciura LeBlanc, 401 Bay Street, Suite 2308, P.O. Box 23, Toronto, ON M5H 2Y4, Tel: 416-599-2200 Fax: 416-593-7867, E-Mail: [info@sml-law.com](mailto:info@sml-law.com)

#### WANT TO REPRINT AN ARTICLE

A number of readers have asked to reprint articles in their own newsletters. Our policy is that readers may reprint an article as long as credit is given to both the newsletter and the firm. Please send us a copy of the issue of the newsletter which contains a reprint from Grey Areas.

# Grey Areas

## A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

- Whether the difference in enforcement action rates among enforcement staff was reasonable; and
- The rate of enforcement action flowing from complaints and the criteria used for evaluating complaints.

### **Governance**

- The percentage of Board members who are from the regulated profession or industry;
- Whether there were term limits for Board members;
- The adequacy and completeness of the performance indicators and targets for the regulator;
- The length of time it took for the regulator to develop and implement key policy changes.

### **Registration**

- The percentage of applicants for registration processed within the target timelines;
- The appropriateness of the registration criteria for applicants (e.g., financial responsibility);
- Whether the regulator follows up quickly with registrants who file incomplete information with their renewal applications;
- Whether the regulator follows up on practitioners who do not renew their registration to ensure that they are not acting illegally; and
- Whether the regulator effectively deters illegal practice by checking advertising and posing as consumers to see the prevalence of illegal practice.

### **CPD and Quality Assurance**

- Whether registrants are required to complete continuing professional development in order to renew their registration.

### **Public Awareness Activities**

- Consumer awareness of their rights and whether the regulator publishes the results of surveys measuring consumer awareness;
- Whether the regulator answers technical questions or has a meaningful way for members of the public to obtain answers to those questions; and
- Whether prices for similar services charged by practitioners was within a reasonable range.

### **Legislation and Government Role**

- The appropriateness of the limits on the compensation fund criteria established in the legislation;
- Whether practitioners should be required to post specified consumer information (e.g., prices for services) online;
- The lack of Ministry oversight related to governance concerns within a regulator;
- Whether the legislation permits the regulator to issue “tickets” and administrative monetary penalties;
- Whether the regulator should be regulating additional categories of practitioners or transactions; and
- Whether the regulator was consulted by government on policy issues or pandemic strategies in which the regulator had expertise.

This broader mandate for the Auditor General is justified under the “value for money” principle, despite the fact that most of these regulators do not receive public funds. As the Auditor General frequently conducts follow up reviews to ascertain whether its recommendations were implemented, these reports can have a significant impact on the future priorities of the regulators subject to the reviews.

# Grey Areas

## A COMMENTARY ON LEGAL ISSUES AFFECTING PROFESSIONAL REGULATION

### Commentary

<https://www.auditor.on.ca/>.

While one can see the value in holding regulators accountable, a number of questions arise as to the appropriateness of using the Auditor General to assume this role. Does the Auditor General have the expertise to assess these matters? Is it fair to assess a regulator on criteria that are not established in advance? Are the assumptions behind the Auditor General's assessment valid (e.g., Should the regulator be the source of casual advice for members of the public as to the content of technical standards? Should the regulator directly address prices charged by practitioners?)?

Will these reports have the effect diminishing the role of a regulator's Board setting regulatory priorities (e.g., a shift from "right-touch regulation" principles to ticking off timely follow-up boxes)? Does the regulatory cost of participating in the review constitute value for money?

External scrutiny of regulators is a trend that is taking hold in Canada. For example, in British Columbia the Office of the Superintendent of Professional Governance has an oversight role for a number of professions. In Ontario the Office of the Fairness Commissioner is already conducting a similar role for the registration practices of most professions, duplicating the proposed role of the Auditor General.

Ultimately, assuming that external monitoring is valuable, is having the Auditor General periodically conduct intensive reviews of some selected regulators the best way of conducting such oversight?

Regardless of the answers to these questions, regulators should consider whether the general recommendations made by the Auditor General in previous reviews warrant reconsideration of some of their own processes.

The reports of the Auditor General can be found at:

From: Regulatory Projects (MOH) <RegulatoryProjects@ontario.ca>  
Sent: Tuesday, March 8, 2022 6:25 PM  
To: rhamilton@collegept.org  
Subject: Update on Schedule 5 of Bill 88

Hello Executive Director and Registrars,

Please find attached a message regarding the above subject:

We would like to inform you of recent developments regarding the oversight of traditional Chinese medicine practitioners and acupuncturists in Ontario.

On March 7th, the government informed the Ministry of Health that it intends to remove Schedule 5 from Bill 88 and directed the ministry to work with the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario to offer a Chinese language entry to practice exam for registration with the college.

The ministry has been in contact with the College to discuss this matter and to ensure it has the necessary resources to undertake that work.

As soon as the Legislature agrees to remove Schedule 5 from Bill 88 at standing committee, the profession of traditional Chinese medicine will remain a regulated health profession in Ontario. Also, as a result of this development, no changes will be made to the controlled acts regulation that exempts the performance of acupuncture to the eight named professions (in addition to medicine and traditional Chinese medicine).

Thank you,  
Ontario Ministry of Health



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO



# QUALITATIVE RESEARCH: THE IEPT EXPERIENCE

*OCTOBER 26, 2021*

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| <i>Discussion guide</i>     |      |

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# OBJECTIVES AND METHODOLOGY

## Objectives

- To understand how to best address the needs and wants of IEPTs within the context of the College's mandate.

## Methodology

### 1. In-depth Investigation

- We reviewed materials provided by the College of Physiotherapists of Ontario (CPO) including the College website, the CAPR (Canadian Association of Physiotherapy Regulators) website and the "report and detail review plan (of entry to practice)."
- Discussions with the College of Physiotherapists team members.
- This research set the foundation for the work. It provided the context for step two.

### 2. In-depth Internal Interviews

- Respondents were recruited by invitation in the newsletter and by the CPO reaching out to potential participants.
- We conducted 17 one-on-one interviews with internationally educated physiotherapists (IEPTs) from September 3 - 22.
  - 10 registered under provisional practice, 7 fully registered.
  - 5 who completed the U of T Bridging program, 1 PhD at Western.
  - 8 from India (some studied in UK or UAE), 1 Australia, 1 Colombia, 1 Ireland, 1 Madagascar, 1 Netherlands, 1 Nigeria, 1 Pakistan (studied UAE) and 1 US.
- Interviews took place by Zoom (and a few by telephone) and lasted approximately one hour.
- Moderated by Rebecca Goldfarb.
- Discussion followed a guide (attached in appendix).

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# SUMMARY AND RECOMMENDATIONS

# SUMMARY

- Most found out about how to practice in Ontario by conducting internet research in their home countries. Some found this process easy and others indicated it was hard to get to the 'right' websites. The website for Immigration, Refugee and Citizenship Canada (IRCC) is the first source of information.
- The CAPR was seen as difficult to interact with. Response times were not quick.
- The Bridging Program at University of Toronto (U of T) is very well received by all who took it. Those who took the program said all aspects of the program were extremely useful.
- The physiotherapy assistant (PTA) experience is very mixed. Getting an initial PTA job without Canadian experience is difficult. Many indicated that their first job was not so positive and in some cases problematic.
- The CAPR written exam is seen as difficult by most. It was hard to know what to prepare and find the time to prepare. Some wonder if an exam this comprehensive is necessary.
- Provisional registration after completing the written CAPR exam with the College of Physiotherapists was recalled as very easy. The simplicity of the process leaves IEPTs with a neutrally positive view of the CPO. The interaction was easy and uneventful, but did not encourage further interest or engagement with the CPO. Those who are fully registered also found this process easy.
- Overall, most had a better experience as physiotherapy residents. They tended to find resident jobs based on the contacts they had already made in Ontario. Many found positions at hospitals or long-term care facilities, and looked specifically for these type of positions. Some still had concerns with their employment in this role. Most did not find it too difficult to find a supervisor and describe their experience with their supervisor as neutral to positive. Those who were on the same site as their supervisor had a better experience. Those who are positive articulate that the time under provisional practice gives them an opportunity to learn about the Canadian health care system.
- The practical exam is simply a total source of frustration.

## SUMMARY (CONTINUED)

- All understand that the CPO is a regulatory body and most understand it acts in the public interest. There is some hesitation about trusting the College as some think the College is always on the patient's side. At the same time, most want to have a positive relationship with the College and want to see it as an organization that benefits the profession.
- For most, their interaction with the College is limited: they complete the requirements for registration and may go to the website to look for some information. They are positive about the information on the site. Most also receive and review the newsletter, and see it as a good way to stay up-to-date. They mention the case of the month as a good source of information, but it also seems to reinforce the perception that the College is a body about discipline. They do not follow the College on social media. Overall, IEPTs do not feel specifically supported by the College.
- When specifically probed on opportunities for further engagement, most still had some interest. Most say they have not attended events or educational programs, but are interested. Programming that fits with the CPO's mandate would likely be of greater interest. Most also expressed interest in a mentorship program. Many thought the guidance provided through a mentorship program would have really been beneficial to them when they first arrived in Ontario.
- Most were familiar with the confidential practice advice service. While they had general knowledge that this service existed, they were unsure in what circumstances it would be appropriate to use this service. A few have used this service. Those who have used it said their questions/concerns were well answered and they were dealt with respectfully.
- All are aware of the Ontario Physiotherapy Association (OPA) and the Canada Physiotherapy Association (CPA). Some are members of the CPA, and decided to be members for practice insurance purposes. Some are involved in the CPA and participate in courses or events. The CPA is seen as a place to find practical courses.

# RECOMMENDATIONS

1. It would be beneficial if there were a link from the Immigration, Refugee and Citizenship Canada (IRCC) website. This website is the first destination for most who want to immigrate to Canada.
2. It may be beneficial to provide more initial direction on how to be certified in Ontario, including a timeline that recommends completing the CAPR Form D in their home country.
3. CPO should consider building on the attributes of the bridging program at U of T:
  - a. Looking to the bridging program at U of T for resources or help developing resources/programs that could help IEPTs learn about the Canadian Healthcare System.
  - b. Developing a mentorship program.
  - c. Creating a resource of programs beyond the bridging program at U of T.
4. During provisional registration, there is an opportunity to draw IEPTs to relevant information for them specifically, once they complete this registration process on the CPO website.
5. IEPTs would benefit from guidelines and a list of questions they may consider on their own or could ask a potential supervisor. Guidelines would help them take advantage of the supervisor requirement and use it as an opportunity for learning about the practice of physiotherapy in Ontario.
6. There is an opportunity to better explain how complaints are addressed and communicate more about the range of activities of the College. Conversely, it is important to communicate the limits of the College's mandate.
7. Include information about the process of discipline in the case of the month in the newsletter. This will help physiotherapists understand that the process is fair. Include cases where there was no enforcement as this will help communicate fairness.

## RECOMMENDATIONS (CONTINUED)

8. There are a few themes from the interviews that could be translated into programming, including:
  - a) Ontario billing practices,
  - b) informed consent,
  - c) patient focused approach,
  - d) rules for WSIB patients and MVA patients,
  - e) exercise as a part of therapy,
  - f) and Canadian practice norms.
9. Build a mentorship or networking program. There is interest in a mentorship program offered by the CPO. All indicated they would volunteer to be mentors.
10. It would likely be beneficial to have an advice service specifically for physiotherapist residents (perhaps delivered through different email addresses and telephone numbers). This would make them more secure about using the service. At a minimum, physiotherapist residents should be added to the existing list on the website. Additional information on the CPO site to encourage a variety of inquiries would also likely reassure people that they can reach out appropriately.

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# DETAILED REPORT

# FIRST STEPS TO PRACTICE IN ONTARIO

- People settle in Ontario for specific non-career reasons. Some knew people already in Ontario. A few settled in Ontario because of a partner.
- Initially, most found out about how to practice in Ontario by doing internet research in their home countries. Some found this process easy and others indicated it was hard to get to the 'right' websites: the CAPR (Canadian Association of Physiotherapist Regulators) and the CPO.
- Some had friends or contacts in Canada that helped guide them. While this guidance was helpful, most recognized that it is best to rely on verifiable sources of information.
- Most believe this research process took them to the CAPR website, where they needed to begin. Most recall looking at the CPO site too.
- While accessing basic information was seen as relatively easy, it was suggested that it would be even better if there were a link from the Immigration, Refugee and Citizenship Canada (IRCC) website. This website is the first destination for most who want to immigrate to Canada.
- Learning about Ontario and how things work here was a challenge for many. Those who came without contacts found it difficult to build a trustworthy group of advisors and contacts. Some were connected with people from their home country, and then found out that perhaps the advice they received was not the best.
- While many arrive in Canada broadly knowing the process, those who have had several years of experience as a physiotherapist or a Master's Degree from a country with a similar educational framework to Canada, question the requirements to be qualified as physiotherapist in Ontario.

# FIRST STEPS TO PRACTICE IN ONTARIO: CAPR

- The CAPR was seen as difficult to interact with. Some who settled in Ontario more than a few years ago say the only option for communication was by mail. Response times were not quick. Respondents remember waiting weeks or months to get a response from the CAPR.
- There are mixed views about the information provided by the CAPR. Some found this process a little difficult to navigate, and others found it very difficult. Many mentioned needing Forms A, B, C and D. Those who initiated and completed getting these documents in their home countries described an easier process. Those who tried to access documents needed for Form D from Canada had a harder time, and in certain countries, they needed to rely on friends and family back home. The main challenge is that documents need to come directly from their education institution, and this is not always easy to accomplish. It may be beneficial to create a road map or timeline that would recommend completing Form D and attaining Form D documents before arriving in Canada.
- There is little knowledge about the cost estimator tool. The few who remember using it, say it is okay.
- There is not familiarity specifically with the self-assessment readiness tool. At the same time, there is a belief that the “blue print” document was not helpful to prepare for the written exam. Most see the “blue print” document as the source of information for what they need to know. Most say that there is not a good outline of the requirements easily available.

# BRIDGING PROGRAM

- The bridging program at University of Toronto (U of T) is very well received by all who took it. Those who took the program said all aspects of the program were extremely useful.
  - A key attribute of the program was that it really enabled learning about “the Canadian Healthcare System.” For many this was essential knowledge that they think is difficult to learn simply by reading sources of information on different websites and other relevant documents. The program enabled them to familiarize themselves and be comfortable with Canadian healthcare values and norms.
  - Some commented specifically that the program did not teach for the exam, but rather provided a broader learning experience essential for success in Canada. At the same time, all who took the exam after the bridging program had success with the written exam.
  - The two internships were also seen as hugely beneficial. They liked that each internship had a specific goal: one to assist in areas of potential growth and the other to focus on an area of interest and strength. All believe time and care were taken with placements for internships, and that these internships gave them excellent experiences at well-regarded health centres. Many were able to come back to these same institutions as physiotherapy residents or for jobs as physiotherapists. At a minimum, these internships provided Canadian experience and references.
  - The program had important guest speakers, including speakers from the CAPR and the CPO. Most say they know about the CPO because of this experience. They believe that they learned useful details about not only the CPO mandate, but also its operating structure (the council).
  - The mentors were also seen as very beneficial. Having a mentor while in the program gave participants assistance with navigating the program, their internships, the CAPR process and just settling in Ontario as a physiotherapist. These mentors were a great resource and source of knowledge and comfort. One said “*it was great to have someone on my side.*”

## BRIDGING PROGRAM (CONTINUED)

- The network of other new physiotherapists was seen as a key benefit of the program that extended beyond the length of the program itself. Most keep in touch with some of their program colleagues and continue to meet in a group format on a semi-regular basis.
- To summarize the benefit of this program, one said *“The benefit is unimaginable – the exposure you get, internships, on-going learning, and the people you meet.”*
- The only negative of the program was the cost. Those who participated indicated that it was a high (but worthwhile) investment at \$13,000. A few investigated and did not take the course because of cost. A few were disappointed it is not OSAP eligible.
- Some elected to take other programs that were less costly including: The Robin McKenzie Institute, Georgian College, Anderson College, and more commonly The Physiotherapy Development Institute. Some indicated they would like assistance in navigating good programs that are approved by the CPO. One mentioned they signed up and paid for Anderson and then learned it was not approved.
- The CPO could consider:
  1. Looking to the bridging program at U of T for resources or help developing resources/programs that could help IEPTs learn about the Canadian Healthcare System.
  2. Developing a mentorship program.
  3. Creating a resource of programs on their website beyond the bridging program at U of T.

# PTA EXPERIENCE

- The physiotherapy assistant (PTA) experience is very mixed. Getting an initial PTA job without Canadian experience is difficult. Some indicated there simply are not so many opportunities available. One said “*you take what you can get.*” Another, who had a good experience, said “*I was lucky.*”
- Some indicated that they looked online and applied to available jobs. Others used their limited existing networks in Ontario, and went to a place they learned about from this network, usually a private clinic. This did not always result in a good experience.
- Some said that their first PTA job was not overall a positive experience – some left their first place of employment as a PTA. Others had a good first experience. Lifemark was mentioned by a few as a good place of employment as a PTA in the private sector.
- Those who had issues raised the following concerns:
  - Billing practices,
  - Requirement to treat more than one patient at the same time,
  - No time allowed for documentation,
  - Requirement to provide other services outside of physiotherapy, including massage,
  - Inability or lack of comfort to ask questions and have them answered appropriately by the supervising physiotherapist,
  - Discomfort with treatment plan/approach and
  - Feeling under utilized or disrespected.

## PTA EXPERIENCE (CONTINUED)

- These issues predominately existed at private practices. Respondents sometimes felt trapped as they needed employment and were afraid to raise concerns either with their employer or with the CPO. Most looked for a new opportunity at a public hospital or well-known private clinic such as Lifemark. They *“just want to move on.”*
- Many, as new arrivals, have very limited networks. One said *“I felt very alone when I came - didn’t know anyone.”* Many began to build their network from these first jobs. When they worked with people they liked and trusted, they made efforts to stay in touch. At the same time, building a new network in a new country is not easy.

# CAPR WRITTEN EXAM

- This exam was seen as difficult by many. A few passed on their first attempt, some on the second, and a couple on the third. For those who took the exam a third and final time, knowing that they could not take the exam again was stressful.
- Some felt they needed to quit their PTA job and schedule time simply for exam preparation. Exam preparation was seen as almost a full-time obligation that would take a few months. While seen as necessary, this created a short-term financial challenge for some.
- Most found it difficult to know what to prepare and did not feel the CAPR provided adequate outlines of what was needed to study. Some complained about the “blue print”.
- Most found the comprehensiveness of the exam as unnecessary. Many had a specialization that they had been practicing in their home country, and planned to practice the same specialization in Ontario. As result, they were not sure the benefit of re-learning and/or learning the breadth of general information required for the exam. This sentiment was shared by almost all, regardless of country of origin. One said *“You had to know everything. It was daunting.”*
- The multiple choice format was unfamiliar to many. Such exams are not typically offered in their home countries. A few indicated *“there seems to be two right answers and it is hard to choose.”* Those who had English as second language, felt language impacted their ability to do this type of exam.

# REGISTRATION WITH CPO

- Provisional registration after completing the written CAPR exam with the College of Physiotherapists of Ontario was recalled as very easy. All remember doing so online and finding the instructions simple to follow.
- Those who had questions remember receiving a response quickly – within hours or one day.
- Different respondents recall the process of providing results from the exam: some believe they uploaded the results and others said this information came direct from the CAPR to the CPO. Given that some undertook this process years ago, it is not surprising that some details are forgotten.
- The simplicity of the process leaves IEPTs with a positive view of the CPO. For all, they feel much more positively about the CPO than CAPR. However, while they are positive, they are in fact “neutrally positive.” The interaction was easy and uneventful, but did not encourage further interest or engagement with the CPO.
- There may be an opportunity to draw IEPTs to relevant information for them specifically once they complete this registration process.
- Time spent in provisional practice varies greatly as a result of the cancellation of the practical exam. Those who pre-dated this issue, were in provisional practice for approximately 3-6 months
- Those who are fully registered also found this process easy.

# RESIDENT EXPERIENCE

- Overall, most had a better experience as physiotherapist residents. Some again said they “*were lucky.*” It seems most were able to make decisions with better knowledge of the Canadian healthcare system. They also applied to these jobs with the needed Canadian experience. Finally, they began to develop a network in the city in which they lived, and had learned more about navigating the employment market.
- Some were able to find employment at the same place where they had worked as a PTA or intern. Others applied for different jobs. One stayed employed as a PTA at their place of employment because “*it easy to get a job as a PTA*” and resident jobs are harder to find. A few took jobs as residents that created a longer commute or moved because they prioritized a quality of work environment. One commuted 2 hours each way.
- Most found that their experience as resident physiotherapists was relatively positive. They have work they enjoy and they feel able to interact and help patients. Many said they are treated well or with respect.
- Many found positions in hospitals or long-term care facilities. Others found employment in larger private clinics such as Lifemark.
- While this experience seemed to be characterized with less issues than their PTA experiences, those who had issues raised the following concerns:
  - Feeling under utilized: this was the key challenge for many. Some came to Canada with significant of experience and feel they are not able to practice as they would like to and use their expertise. The delay in the clinical exam has exacerbated this feeling of frustration.
  - Inability or lack of comfort to ask questions and have them answered appropriately by the supervising physiotherapist.
  - Requirement to treat 3 or 4 patients at the same time.

## RESIDENT EXPERIENCE (CONTINUED)

- Relatedly, is frustration with lower pay.
- Many say with time and experience, they built informal networks of professionals. These networks were principally work colleagues. One said “*my network is friends of friends.*” Another said “*my network is the people at work.*”
- Finding a supervisor was not considered difficult. Many had relationships with physiotherapists based on their internships and PTA experiences. They reached out to people they knew. While most were able to find a supervisor relatively easily, a few asked and were told no. It seems some physiotherapists simply do not want to take on extra obligations. To some extent, individuals were supervised by whoever would agree to be their supervisor.
- Some worked at the same worksite as their supervisor and others did not. Overall, the relationship was better when at the same site. When working at the same site, advice and ability to have questions answered occurred naturally. When at different sites, the relationship varied. Some had regular contact through email and more rarely telephone or an online platform. Others describe the interaction as sporadic and perhaps not so beneficial as a learning experience.
- Most describe the relationship as neutral to positive. They know this is a necessary requirement and therefore make the best of it. Some have been in this relationship for longer than expected given the challenges with the practical exam. This fact likely impacts their current impression of the relationship and situation.

## RESIDENT EXPERIENCE (CONTINUED)

- Those who are more positive articulate that having a supervisor helps them learn about the Canadian healthcare system. These individuals point out Canada has different cultural norms and healthcare practices, and it is beneficial to have someone to help you learn. For these individuals, this is not about the technical ability to practice, but more about how physiotherapy is delivered in Ontario. One said *“the time I spent in provisional practice was essential. I gained knowledge of the Canadian system.”*
- Some who were less positive about the experience simply see it as a waste of time because they have already practiced for years. One said *“I already had six years experience. [Working with the supervisor] felt strange.”* Those with a large number of years of experience in their home country feel almost de-valued.
- IEPTs would benefit from guidelines and a list of questions they may consider on their own, or could ask a potential supervisor. While IEPTs have little flexibility in who they accept as a supervisor given it is a requirement, guidelines may help them take advantage of the supervisor requirement and use it as an opportunity for learning about the practice of physiotherapy in Ontario.

# ADJUSTING TO A DIFFERENT PRACTICE MODEL

- Many IETPS found adjusting to the Canadian healthcare system somewhat challenging. Our model for the delivery of physiotherapy is different than the model in their home countries. In some countries physiotherapists are not primary healthcare practitioners. As a result, some IEPTs do not feel completely comfortable working in the Canadian model and know that they need to gain more knowledge of the Canadian healthcare system, and how to work within it.
- Differences of note:
  - First, in Ontario, patients are able to seek physiotherapy services without a physician's referral. For some, this was not what they were used to, and therefore they were unsure of how to treat such patients without a doctor's referral plan. To a few, patient "*self-diagnosis*" is strange and does not really make sense to them.
  - Second and relatedly, some do not feel able to develop a treatment plan as this was not part of their training or professional experience. In some countries, including India, physiotherapists work under a physician and implement a treatment plan that the physician provides.
  - Third, a parallel private system is new to many IEPTS, and the practice of billing in Ontario is unfamiliar. Many want more guidance about billing as they know it can get them into trouble if not done properly.

# CAPR PRACTICAL EXAM

- The practical exam was the key and in some ways the only issue for those that have been unable to take it. They report that the situation they are in has impacted not only their professional progress, but also their emotional well-being and financial situation.
- While they understand the exam is offered by the CAPR and it is the CAPR's responsibility to administer the exam effectively, they do not exonerate the CPO. They believe that the College is the regulator and as the regulator should have influence in fixing the situation. While they appreciate the extension of time to practice as a resident and empathy, both are not enough. A few point to the solution in Alberta, and wonder why Ontario cannot do something similar.
- More specifically, there is general wonder about the format of the exam, both by those who have completed it and by those who are unable to. The 16 stations are seen as a contrived form of evaluation, and not really conducive to evaluating if someone is fit to practice.

# KNOWLEDGE OF CPO

- All understand that CPO is a regulatory body. Most also know that the College acts in the public interest. One said *“The College protects the public, not me.”* Those who have taken the bridging program are more able to articulate this public interest role. Only some say there is something similar in their home country
- IEPTs understand that as a regulatory body, the College also disciplines. Some have heard the College *“can be harsh,” “takes the side of patients,” “judges us,”* and *“believes that patients are always right,”* One said *“People are scared. The College keeps eyes on us.”*
- Some IEPTs are not sure if they can fully trust the College. Some feel the College should be for them too – this does not mean that the College should not act in the public interest, but should undertake *“disciplinary evaluations in a way that is fair to the professionals.”*
- There is an opportunity to better explain how complaints are addressed, and how the complaint process is fair to physiotherapists.
- There is also an opportunity to communicate more about the range of activities of the College. All were grateful for the information provided about COVID-19 and saw this as not only a helpful resource, but essential information. The College could communicate more about how the work it does improves the practice of physiotherapy, and how this benefits both the public and the profession. One said *“The College plays a paternal role. I compare the College relationship with us to a Dad and a kid. The College disciplines us but can also play, interact as friends and help us learn.”*
- Conversely, it is important to communicate the limits of the College. A few mentioned that the CPO does not discipline clinic owners and that often these owners can be the cause the problem. It would be helpful to communicate the CPO’s jurisdiction.
- Some want to feel respected as residents and cared for as residents. One remarked that a council member said *“PT residents are part of the furniture.”*

# CURRENT INTERACTIONS WITH CPO

- For most, their interaction with the College is limited: they complete the requirements for registration and may go to the website to look for some information. Most also receive and review the newsletter. In this context, IEPTs do not feel specifically supported by the College.
- All have used the College website and see it as a good source of information. It is easy to navigate. Also, the answer to many questions can be found there.
- Almost all do not follow the CPO on Facebook, LinkedIn, Youtube or Twitter. Some say they try to limit social media usage generally. Others do not see a need to follow the College on social media: information they need can be found on the College website when they need it.
- Those who receive the newsletter by email are all positive about this communication. Most say they review it quickly and find some of the information helpful. They think it is useful for staying up-to-date and for learning.
  - Case of the month: Many focused on this specific part of the newsletter and find the cases interesting and good sources of information about *“how not to get into trouble.”* A few mentioned reading a case about billing fraud as an example. The challenge is that while IEPTs see this information as interesting and helpful, it also reinforces the belief that the College is a regulator and as a regulator *“it gets you in trouble”*. Including information about the process in the cases may help physiotherapists understand that the process is fair. Including cases where there was no enforcement likely helps communicate fairness.
- Few see other specific reasons to interact with the College. They have little awareness of webinars or other events.
- While most are satisfied with the interactions they have had with the CPO, most are not actively thinking about further engagement. They see the CPO as the regulator and therefore do not think about the CPO as a destination for further professional interactions. In some ways, a relationship of distance makes sense to them.

# CPO: OPPORTUNITIES FOR CONNECTION

- When specifically probed on opportunities for further engagement, most still had some interest.
- Most say they have not attended educational sessions, outreach programs or roadshows. Most seem unfamiliar with these events. This is likely COVID-19 related. Recently, most have not attended webinars and are not familiar with webinars offered by the CPO.
- At the same time, many say they would be interested in educational programming. A few have participated in educational sessions offered by the Canadian Physiotherapy Association (CPA), and are unsure what programming makes specific sense for the College (that is different from the CPA offering). There are a few themes from the interviews that could be translated into programming, including:
  - Ontario billing practices,
  - Informed consent,
  - Patient focused approach (and patient's direct access to physiotherapy care without physician diagnosis and referral),
  - Rules for WSIB patients and MVA patients,
  - Exercise as a part of therapy (and managing patients that do not do the exercises and claim care on insurance),
  - Canadian practice norms (which might be different than in their home country such as use of a lift, mobility assessments and use of exercise as the preferred treatment).

## CPO: OPPORTUNITIES FOR CONNECTION (CONTINUED)

- Most also expressed interest in a mentorship program. Most were positive about the idea of having networks and mentors through a service offered by the CPO. While they had worked to build informal professional networks and find advisors, they had difficulty building professional networks outside of their work colleagues.
- Many thought guidance would have really been beneficial to them when they first arrived in Ontario. These individuals think they would have signed up for a mentorship program if it existed and they knew it existed. All say that if such a program were developed, they would volunteer to be mentors to newly arrived IEPTs. All see the CPO as an appropriate organization to help with mentorship.

# CPO: PRACTICE ADVICE SERVICE

- Most were familiar with the confidential practice advice service. While they had general knowledge that this service existed, they were unsure in what circumstances it would be appropriate to use this service.
- The main reason given for not using this service is that for most questions about practice *“I can ask my supervisor or colleagues.”* One said *“I have not used, but I know there are dedicated people who can help me and it is confidential.”* Others simply say they have not had an issue where they think it would be appropriate to call this service. One said *“Small issues - I would just resolve with colleagues or friends.”*
- Most say that they would trust that the service provided by the CPO is confidential. As one said, *“In Canada if you say it is confidential, it is confidential.”*
- While most know about the service and are comfortable that it is confidential, there still is hesitancy to use it. Some indicated they thought the service was for actual physiotherapists or for “bigger” issues. One said *“I might call. I have some hesitancy. I am more comfortable with my network.”*
- It might be beneficial to have a service specifically for physiotherapist residents (perhaps delivered through different email addresses and telephone numbers). This may make them more secure about using the service. At minimum, physiotherapist residents should be added to the list on the website: *“(The Advisors provide free, confidential advice to patients, caregivers, physiotherapists, employers and others).”* ([www.collegept.org](http://www.collegept.org)) Additional information on the CPO website to encourage a variety of inquiries would also likely reassure people that they can reach out appropriately.
- A few have used this service. Those who have used it said their questions/concerns were well answered and they were dealt with respectfully. One said *“I have called a 2 or 3 times to look at ethical issues. They gave me useful links.”*

# ALL HAVE KNOWLEDGE OF CPA AND OPA

- All are aware of the Ontario Physiotherapy Association (OPA) and the Canada Physiotherapy Association (CPA).
- Some are members of the CPA, and decided to be members for practice insurance purposes. Others get insurance through their employers or from other insurance options.
- Some have not joined. The main reason for not joining is cost.
- Some are involved in the CPA and participate in courses or events. The CPA is seen as a place to find practical courses.
- Only one respondent was active with the OPA. This respondent joined the board.

# APPENDIX

The College of Physiotherapists of Ontario  
August 26, 2021

## Recruiting Specifications

**Guide for all three groups. Questions will be customized to each group.**

People who have not registered with the College yet, but will need to. These individuals are at the CAPR stage.

Maximum of 4 people.

One from the Bridging program and 3 through CAPR.

We would like to have 1 US graduate and at least 2 graduates from India and a fourth from India or elsewhere.

CPO will sort out getting individuals by working with our partners.

People who just recently registered with us under Provincial Practice (0-12 months in provisional).

6 people

People who are fully registered and have been registered for 12-18 months.

Target of 6 people. (Due to the delay in exams this group is going to be a bit harder to recruit than we had imagined.)

We are hoping to have one who has gone through the complaints process and the other 5 who have not.

*Note to Moderator: Important: Because of the unprecedented delay in running the exam due to COVID you may encounter some people (especially those in the first two groups) who want to discuss the exam delay and COVID. You should be prepared to address this with people if they start to fixate on this.*



## Introduction (10 min)

Introductions and explain process

Can you tell me a little about yourself? (*PROBE AS RELEVANT*: where are you from? When did you come to Ontario? What has been your experience in Ontario?)

Why did you choose to come to Ontario?/Was being able to practice physiotherapy in Ontario part of your decision?

Where did you receive your training as a physiotherapist?

Can you tell me a little about your experience as a physiotherapist? (*PROBE AS RELEVANT*: fear, excitement, apprehension)

## In-depth Discussion (45 min)

**I would like to continue our discussion of how you became a physiotherapist in Ontario.**

What steps have you taken to become a physiotherapist in Ontario?

How did you get the information you need to become a physiotherapist and practice in Ontario? Where did you go to get information on the practice of physiotherapy in Ontario?

Have you been in contact with any physiotherapy organizations in Ontario? Which ones? (*UNAIDED*)

Can you please tell me about your interactions?

How has \_\_\_\_\_ helped?

Were there any challenges? If so, what were they?

PROBE as relevant: U of T bridging course

Were you required to complete a language assessment as a part of your credentialing process?

**Knowledge of/Contact and interaction with CPO (College of Physiotherapists of Ontario) CAPR (Canadian Association of Physiotherapy Regulators), OPA (Ontario Physiotherapy Association). Focus on CPO.**

*Information to be provided as relevant during interview*

**CPO:** sets the rules for practice, issues licenses, investigates complaints and ensures the ongoing improvement of the practice of physiotherapists and to service the public interest.

**CAPR:** CAPR is a credentialing and assessment agency that provides evaluation services on behalf of its members. CAPR reviews the education and qualifications of applicants educated outside of Canada to determine whether or not they are substantially different from those of Canadian-educated physiotherapists. For both Canadian- and internationally-educated physiotherapists, CAPR administers the Physiotherapy Competency Examination (PCE) to determine a candidate's readiness for safe, effective and independent physiotherapy practice.

**OPA/CPA:** are the associations. OPA Mission: OPA is committed to leadership in physiotherapy through the provision of advocacy, professional development and career support services for its members in order to provide quality physiotherapy to Ontarians.

CPA Mission: As the vital partner for the profession, the CPA leads, advocates, and inspires excellence and innovation to promote health.

Do you know about CPO/CAPR/OPA/CPA? If yes, what do you know about CPO/CAPR/OPA/CPA? If no, moderator to provide brief description.

If yes:

How did you find about CPO/CAPR/OPA/CPA?

What does CPO/CAPR/OPA/CPA do? What is the mandate of CPO/CAPR/OPA/CPA? (*PROBE:* differences in mandates, trust, here to help)

How can CPO/CAPR best help you? What are they doing that works for you? What could they be doing better? Did you or are you experiencing any challenges with CPO/CAPR? If yes, can you please tell me more about that?

If no:

Now that I have reminded you about CPO/CAPR what else do you know? *NOTE TO MODERATOR: If familiar, go back to 'yes' questions.*

Now that you know more about CPO/CAPR, how do you think CPO/CAPR can assist you?

Do you think that you will reach out to CPO/CAPR now that you know more about CPO/CAPR?

Are there other groups or website or discussion forums or other sources that you found valuable when you were starting the process of becoming a physiotherapist in Ontario/Canada?

Organization specific:

Do you think the College of Physiotherapists of Ontario plays an important role for physiotherapists? For patients? If yes, why? What do you think this role is? If no, why not? How could the College help physiotherapists?

Thinking about the College more broadly: Is there information you would find helpful to receive from them? What else could they do to help you?

How do you receive communications from the College? Is this the best way to communicate with you? What else might work?

Probe: e-newsletters, social media (Facebook, LinkedIn, Youtube and Twitter), webinars, website

Have you attended any education sessions / outreach programs/roadshows put on by the College? If yes, please tell me about that experience. If no, would outreach from the College be beneficial? Why/why not?

Probe: in-person before COVID-19 and webinar now

What tools could the College of Physiotherapists provide to you that could be helpful? (*PROBE: free webinars as an example and other options*)

What about the tools provided by CAPR? (*PROBE: self-assessment readiness tool, and cost estimator tool*)

What about the exam process? (*PROBE: written and clinical, cultural barriers, language proficiency, time, cost*)

*NOTE TO MODERATOR: For the Provisional Practice and those in practice 1- year group:*

What has the College done/What could the College do to support you during your first days / weeks practising as a physiotherapist? Probe: for IEPT

## Practice in Ontario (as relevant to respondent)

Can you please tell me about the registration process with the College of Physiotherapists of Ontario? How did the process work for you?/ What do you know about the process?

How did you find a supervisor?/ How do you anticipate finding a supervisor? Was that a difficult process?/ Do you anticipate that process to be difficult? How could the process have been made easier for you?

Did/do you work at the same worksite?

How long did you/do you have a supervisor for? How often did you see them or meet?

Once you had/have a supervisor, did/do you find this period of provisional practice useful? How was/is your relationship with your supervisor? Did/do you learn from your supervisor?

Do you think there are ways to improve the relationship with the supervisor? What do you think could be done to improve this process?

What did supervision include while you held a provisional practice certificate of registration?

Do you speak a language other than English or French when delivering care to your patients?

Did you pay your supervisor?

Can you please tell me about your current position?

How did you find employment?/ What are you doing to look for employment? I know that finding employment in a new place can be challenging, can you tell a little more about your own experience? (*PROBE: comfort, ethics, ease*)

Can you tell about your practice? What do you like about practicing in Ontario? What are some of the challenges? (*PROBE as relevant: comfort with providing diagnosis and treatment plan, various funders for care, pressures from employers to meet targets*)

Do you believe that your knowledge and skills as a physiotherapist are being used well in your current / previous roles? Why / why not?

If you need help with a care issue or practice challenge where do you go for help?

Did you know the College offers a free and confidential practice advice service where you can call or email, and a physiotherapist who works at the college will try to answer your questions, direct you to resources or talk to you about difficult or ethical dilemmas? Yes or No.

If yes: Have you ever contacted the College's Practice Advisory Service? Was it helpful?

If no: Why have you not *called* (*PROBE: knowledge, no need, concerns about calling*)? Do you think it would be helpful?

How do you learn about developments in the profession or approaches to care?

Do you connect with other physiotherapists? How do you make these connections? Are these connections important to you?

About how many other physiotherapists do you know? How do you connect with them? (*PROBE: call, text, meet with them*)

Would you be interested in someone or some organization helping you facilitate these connections? If so, what kind of connections would be helpful? Who would you like to connect with? How/in what format would you like these connections?

Do you believe that your knowledge and skills as a physiotherapist are being used well in your current or previous roles – tell us why / why not?



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO



# QUANTITATIVE RESEARCH: THE IEPT EXPERIENCE

*FEBRUARY 3, 2021*

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# OBJECTIVES AND METHODOLOGY

## Objectives

- To follow-up on the qualitative research with IEPTs in Ontario, completed in October 2021.
- To better understand the IEPT experience in Ontario, and how the College is meeting their needs within the context of the College's mandate.

## Methodology

- Goldfarb Intelligence Marketing worked with the CPO to design survey content. Questions in the survey were designed to acquire needed knowledge to better meet the needs of IEPTs. The survey was designed after the qualitative research so insights from this research could be incorporated.
- The survey was administered by the CPO using SurveyMonkey. The survey was:
  - Sent to 3,263 IEPTS. 535 fully completed the survey. The response rate for full completes was 16%.
  - Conducted from November 18, 2021 to January 2, 2022.
  - Took an average time of 16 minutes and 24 seconds to complete.
- The survey is attached in the appendix.
- Goldfarb Intelligence Marketing received an SPSS file from the CPO. This file was used to create data tables for analysis.
- Goldfarb Intelligence Marketing completed the analysis.
  - Totals are reported. Demographic data is only reported when there are significant differences.

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# SUMMARY AND RECOMMENDATIONS

# SUMMARY AND RECOMMENDATIONS: EARLY ARRIVAL EXPERIENCE

- The quantitative findings are overall consistent with the qualitative research completed in October 2021.
- Only about one-third (33%) say there is an organization similar to the CPO in their home country. Also, respondents from the same country answer this question differently indicating perhaps a lack of full understanding among respondents of how the CPO and organization in their home countries work. At the same time, 94% know the CPO acts in the public interest.
- Finding employment (without Canadian experience) and cultural differences are key issues IPETs experienced when they first arrived. For those who have arrived recently, the exam is the key issue.
- 41% have taken an exam preparation course and another 39% have taken a course on healthcare in Canada. Courses are taken to gain practical skills, because they are required, and to prepare for the exam.
- 65% of respondents work or worked at the same organization or company as their supervisor, and 49% work or worked at the same facility. Most respondents seem to have a good relationship with their supervisor. Fully 91% say their supervisor treated them with respect, 83% say their supervisor provided helpful feedback and 81% say they connected with their supervisor often. At the same time, only 67% say that having a supervisor was helpful because it allowed them to learn more about the Canadian healthcare system.  
**There may be an opportunity to make the experience more educational about practice in Canada.**

## SUMMARY AND RECOMMENDATIONS: CPO

- The relationship with the College is strong. Respondents say they understand the role of the College (87%). They also say the College informs them about new practice requirements (84%), and communicates on-going obligations as a College member (79%). Most find the website easy to navigate at 75%. Fewer agree that they knew the process for provisional registration (72%), the registration process was easy (69%), and the registration process was quick (62%). **There may be room to strengthen the relationship at the beginning.**
- More than half have completed an e-learning module (60%) or attended a webinar event (57%). Both these numbers drop for IEPTs who arrived in 2020/21 to 27% and 42% respectively. **There may be an opportunity to encourage participation among new arrivals.**
- Both email and telephone are commonly used to reach the practice advisory service. Newly arrived IEPTs are much more likely to use telephone (73%) than email (27%). Only 36% say they know the practice advisory service is available to physiotherapist assistants. **There is an opportunity to communicate that this service can be used by physiotherapist assistants. This research supports the recommendation to consider renaming the practice advisory service.**
- There is a strong interest for education and learning events and programs at 87%. There is also interest in additional resources to help internationally trained physiotherapists at 69%, a program that helps with networking and mentoring at 62%, outreach events at 54%, and information on how to select and work with a supervisor while under provisional practice (52%). **There is an opportunity for further engagement.**

# SUMMARY AND RECOMMENDATIONS: CPO COMMUNICATIONS

- Most (77%) prefer to contact the College by telephone. This number is even higher for IEPTs who arrived in 2020/21 at 92%.
- 70% of respondents access the College's website once a month or more. Those who speak a language other than English at home are more likely to visit the website frequently. This likely demonstrates a desire to engage with the College and learn from it.
- Most are interested in most of the content on the website and are also satisfied with the content. The College website meets the needs of users. **The screening interview and on-site assessment program may be areas where changes could be made to improve satisfaction.**
- 49% read the newsletter every month and another 28% read most months, but not every month. About two-thirds (64%) are satisfied with the E-newsletter. IEPTs are engaged with the newsletter and are generally satisfied with it. Those who speak a second language at home are more likely to read the newsletter demonstrating the interest and engagement of this group.
- Facebook and YouTube are most used. 77% of respondents use YouTube and 68% of respondents use Facebook once a week or more. Most do not follow the College through social media. Only 23% access the College on Facebook and 14% access the College on YouTube once a week or more. LinkedIn and Twitter are not commonly used. **Social media strategies should focus on Facebook and YouTube. There may be an opportunity to encourage LinkedIn usage as tool to connect with the physiotherapist community in Ontario.**

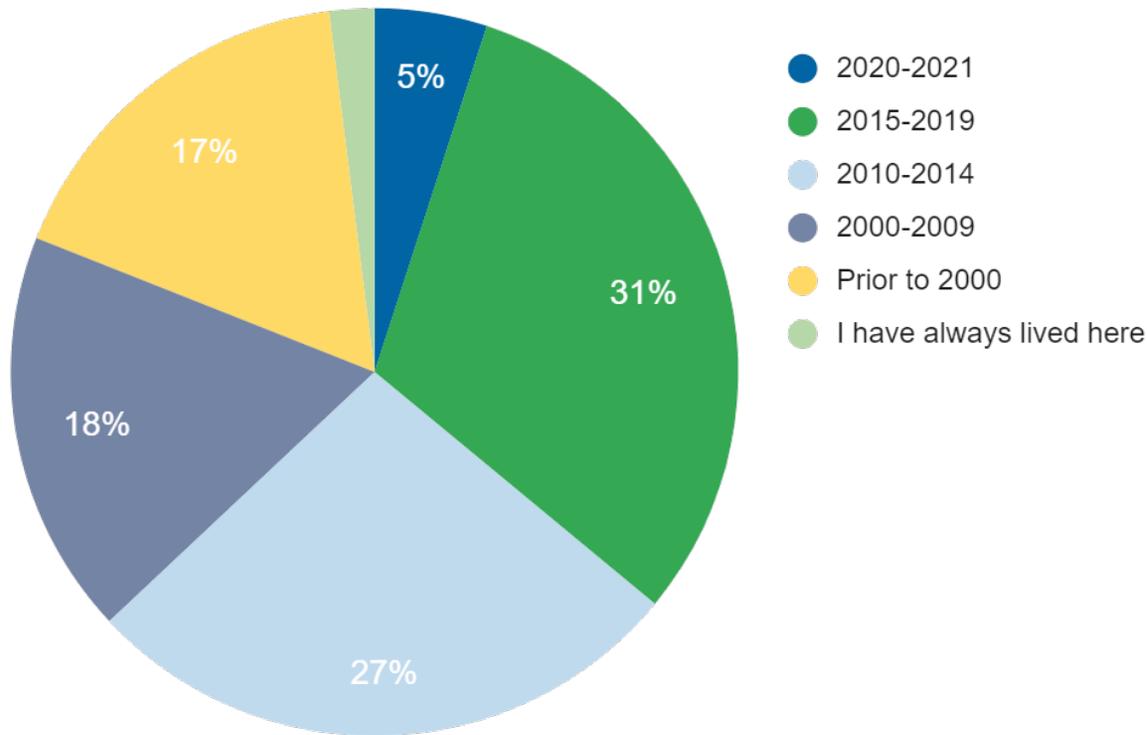
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# RESPONDENT DEMOGRAPHICS

# DEMOGRAPHIC CHARACTERISTICS OF IEPTS IN ONTARIO

- Only 5% of respondents have arrived in 2020/2021. Another 31% have arrived relatively recently (since 2015).

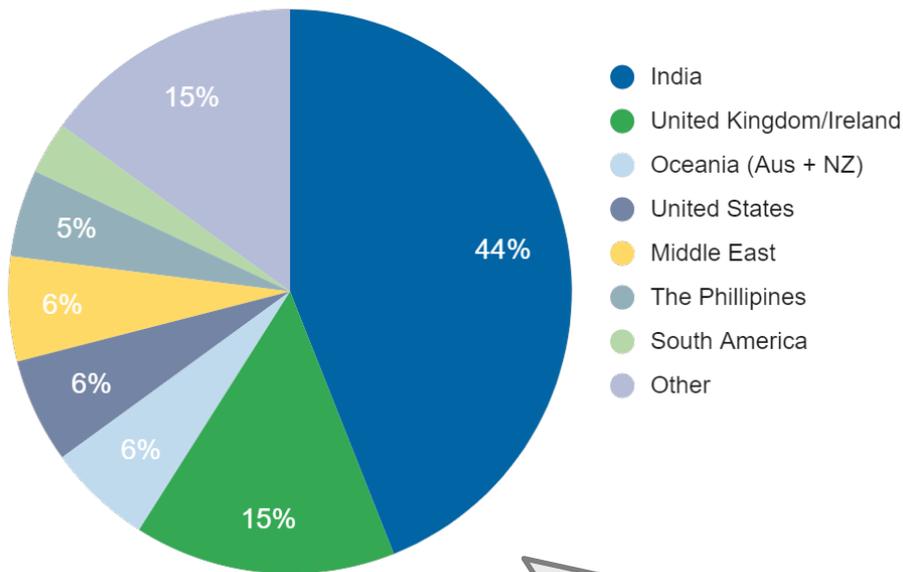
## Year Arrived in Ontario



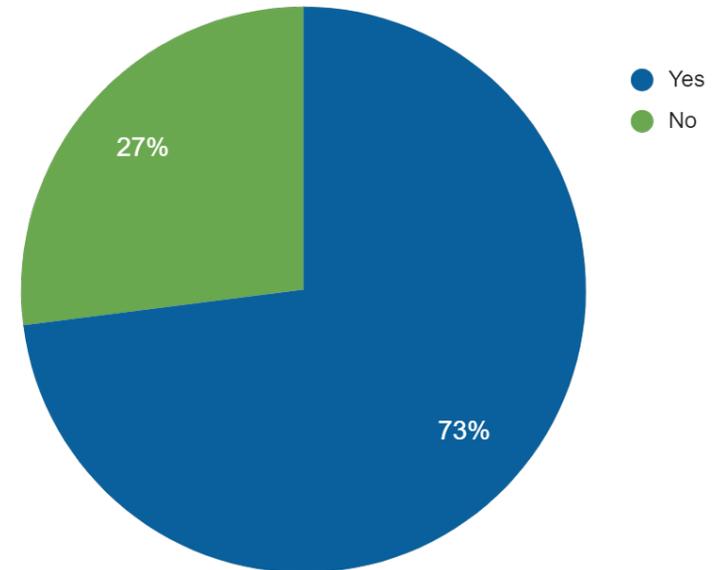
# DEMOGRAPHIC CHARACTERISTICS OF IEPTS IN ONTARIO

- 44% of respondents received their primary physiotherapy education in India.
- Many others received their primary physiotherapy education in English speaking countries (United Kingdom/Ireland at 15%, Australia and the United States each at 6%).
- Almost three-quarters (73%) speak a language other than English at home.

Country received primary physiotherapy education



Language spoken at home other than English

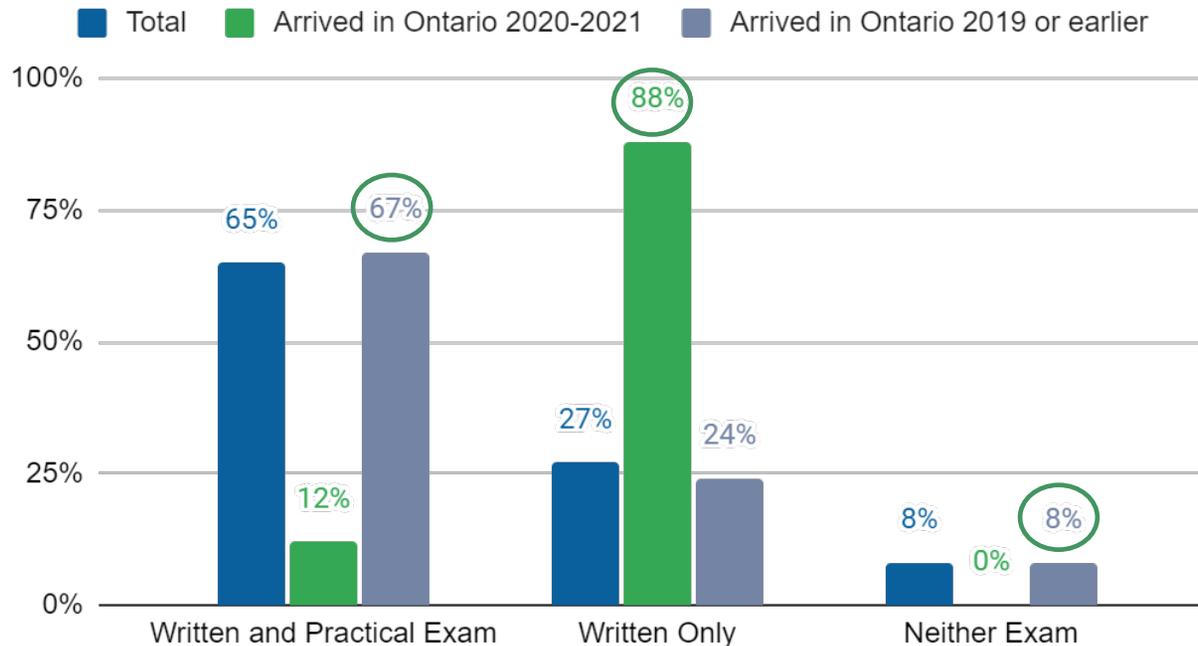


Of those from Oceania the vast majority were from Australia vs. New Zealand (97% Aus vs 3% NZ)

# EXAM COMPLETION

- About two-thirds (65%) of respondents have taken both the written and practical exams.
- This number is dramatically different for those who arrived in 2020/2021 at 12%. 88% of newer arrivals have completed the written exam.

## Physiotherapy Exams Completed



Those who completed neither exam, all arrived in Ontario prior to 2010.

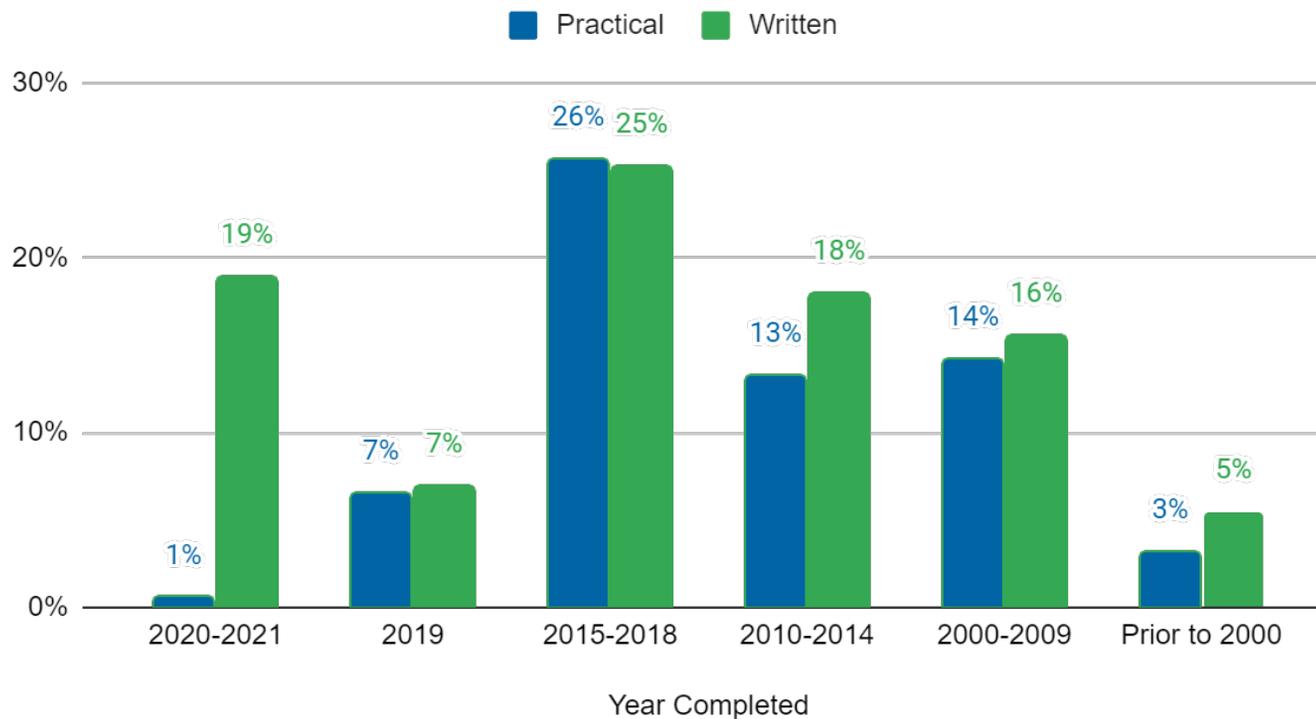


4. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Written  
If yes, please indicate the year of exam completion.
  5. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Clinical?  
If yes, please indicate the year of exam completion
- Base: Total Respondents total: (n= 535),

# EXAM COMPLETED (CONTINUED)

- Prior to 2020, completion rates for both exams are similar, especially between 2015 and 2019.
- As expected (1%), almost no IEPTS completed the practical exam in 2020-2021.
- 19% completed the written exam in 2020-2021 including some who arrived prior to 2020.

## Year Exam Completed



4. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Written

If yes, please indicate the year of exam completion.

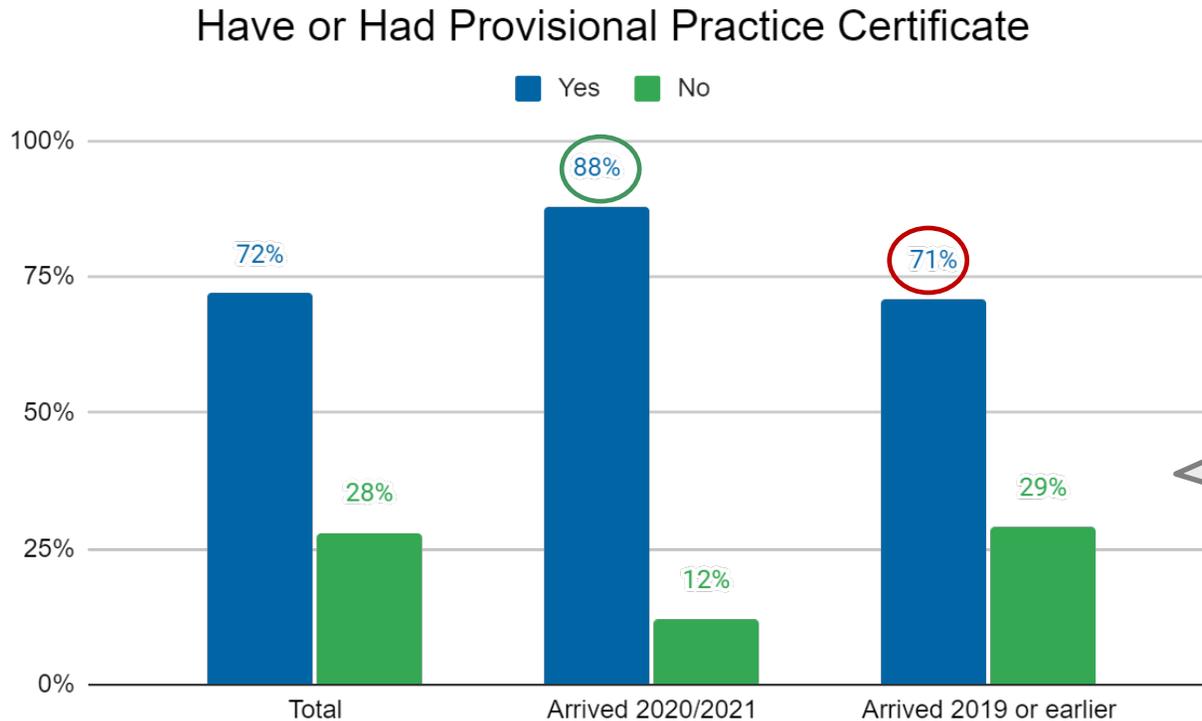
5. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Clinical?

If yes, please indicate the year of exam completion

Base: Total Respondents total: (n= 535),

# PROVISIONAL PRACTICE CERTIFICATE

- 72% of respondents had or have a provisional practice certificate.

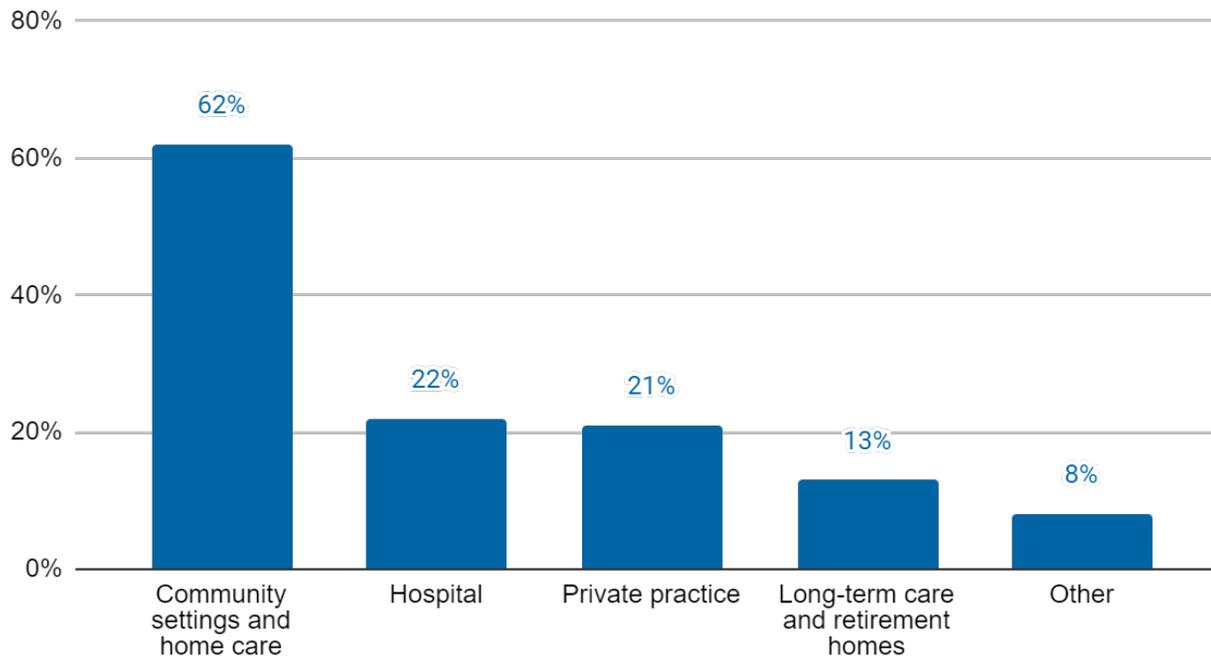


Those who arrived in 2020/2021 were significantly more likely than those who arrived in 2019 or before to have or have had a Provisional Practice Certificate.

# PRACTICE SETTINGS OF CURRENT WORK

- The majority (62%) work in a community setting or home care.
- 22% work in a hospital and 21% work in private practice.
- Those who do not speak English at home are more likely to work in long-term care and retirement homes, and community settings and home care. Those who speak English at home are more likely to work in hospitals.

Practice Setting(s) of Current Work



By language spoken at home:

Community settings and home care

Eng. Only: 24%      2<sup>nd</sup> lang: 14%

Long-term care and retirement homes:

Eng. Only: 5%      2<sup>nd</sup> lang: 16%

Those who speak English only at home were more likely to work in:

Hospitals:

Eng. Only: 31%      2<sup>nd</sup> lang: 19%

“Other” includes:

- Clinical (rehab, outpatient clinic, pediatric clinic)
- Academic setting (teaching, research, other academic)
- Speciality (military, WSIB)
- Not working, non-clinical/other (e.g. admin)

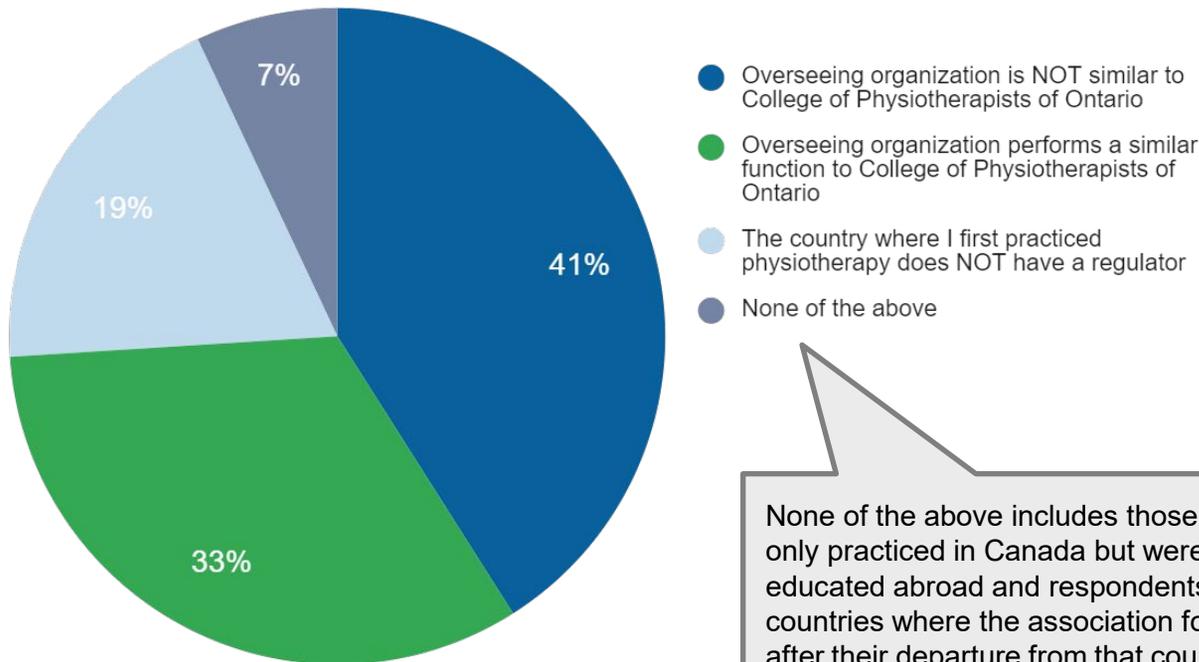
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# DETAILED REPORT

# SITUATION IN HOME COUNTRY

- 74% of respondents indicate there is an organization the same or similar to the College in their home country.
- Knowledge of organization in home country and Ontario is likely inconsistent among respondents creating a situation where respondents from the same country answer this question differently. Based on their own knowledge:
  - About one-third (33%) say the overseeing organization performs a similar function to the College of Physiotherapists of Ontario.
  - About 4 in 10 (41%) say the overseeing organization is NOT similar to the College of Physiotherapists of Ontario.
  - About 1 in 20 (19%) say the country where I first practiced does not have a regulator.

## Regulator in Country Where First Practiced Physiotherapy



Respondents who listed **India** as the country where they received their physiotherapy education:

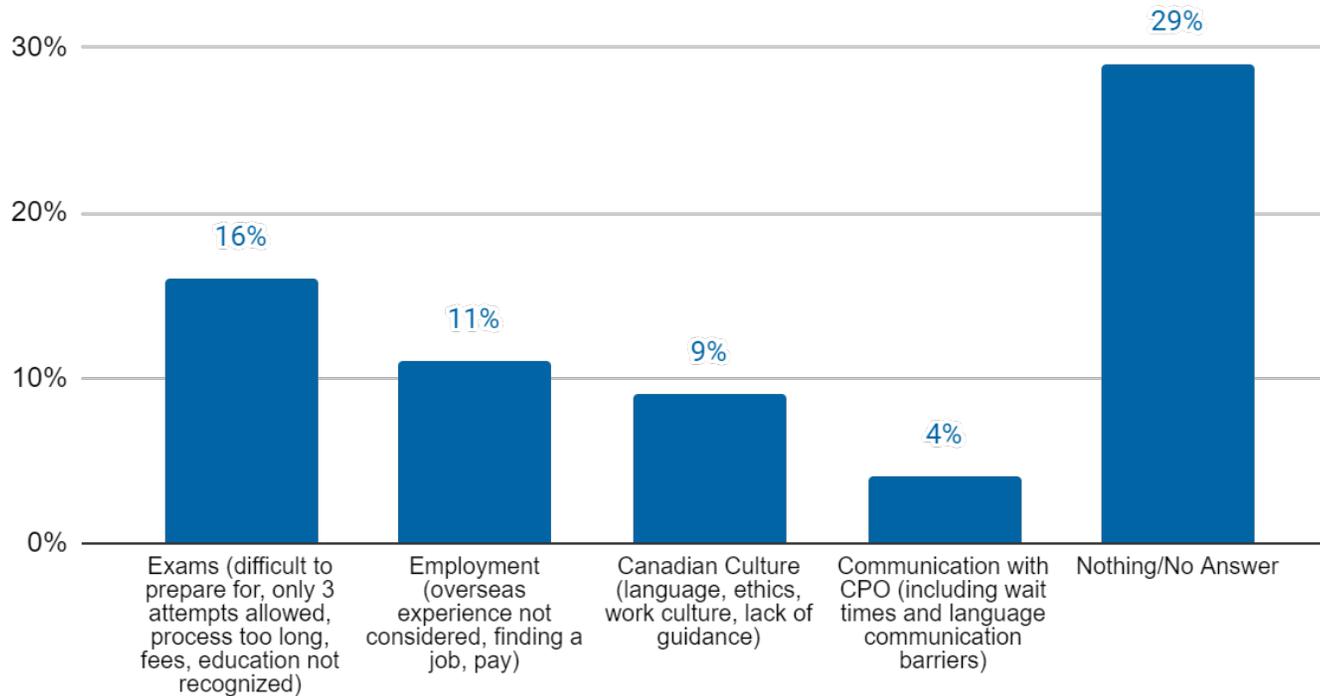
8% - indicated the regulator performed a similar function  
53% - indicated the regulator was not similar  
37% - indicated there was no regulator

None of the above includes those who only practiced in Canada but were educated abroad and respondents from countries where the association formed after their departure from that country.

# ISSUES WHEN ARRIVING IN ONTARIO

- They key issue for IEPTs when they arrive in Ontario is the entire exam process.
- Consistent with the qualitative research, finding employment and adapting to Canadian culture are specific challenges faced by new arrivals.
- Few (4%) expressed difficulty communicating with the CPO.

## Issues related to the practice of Physiotherapy when First Arrived to Ontario



# ISSUES WHEN ARRIVING IN ONTARIO

Unacceptably LONG wait times from the time of applying to take the PCE and actually taking it. Understanding how things worked in Ontario for accreditation was not clear and required a lot of reading and searching through the website to understand the process. The test itself seemed much more difficult to access (twice per year, vs literally any day of the year) than tests in other countries.

My Overseas experience is not considered at my workplace.

Being hired. Acceptance of the communication skills (this latter is highly connected to culture and accent even though I have 22 yrs of specialized hospital work).

It's challenging to pass the written and clinical test and be able to look for a job with out having the Canadian experience.

Being internationally trained PT- offered to work at low wage as PTA until becomes registered PT. As new licensee also offered low hourly rate saying lack of experience.

Yes. I believe there is a lot of stress in regards to keeping up with the documentation and always fearing any pending legal action from the patient. I've no problem with documentation but I feel that someone can always find a small fault with the documentation which can go wrong against you if something happens.

In my opinion, the cost of the continuing education is expensive.

Documentation and informed consent were the aspect that were not practiced the way here as back home.

# ISSUES WHEN ARRIVING IN ONTARIO

Difficult getting accreditation approved. Hard to reach CAPR for questions and confirmation of details with process.

Cultural differences, social communication skills. Knowing all health care laws.

Lack of Canadian experience. Coming from a country almost 100% opposite of the way you practice. Examples, In India no public funded physiotherapy, No private insurance / MVA type insurance coverage, No WSIB, no long term care homes. Almost 100% private cash paid physiotherapy service. I think foreign trained physiotherapists greatly benefit from going through a mandatory internship program similar to pharmacist, which help them to integrate Canadian health care system through real-time experience. Also which drastically reduce abuse/fraud because most foreign trained PTs are vulnerable for it.

Language barrier, different country and culture, not be able to express yourself as new immigrant, just usual things at the beginning.

Poor acceptance of communication skills based on accent and how it reflects our cultural composition versus the current Canadian.

I think language and culture here were a very big challenge for me here. Certain behaviors would have been acceptable back in my home country but would not be acceptable here.

Lack of genuine mentors at the beginning.

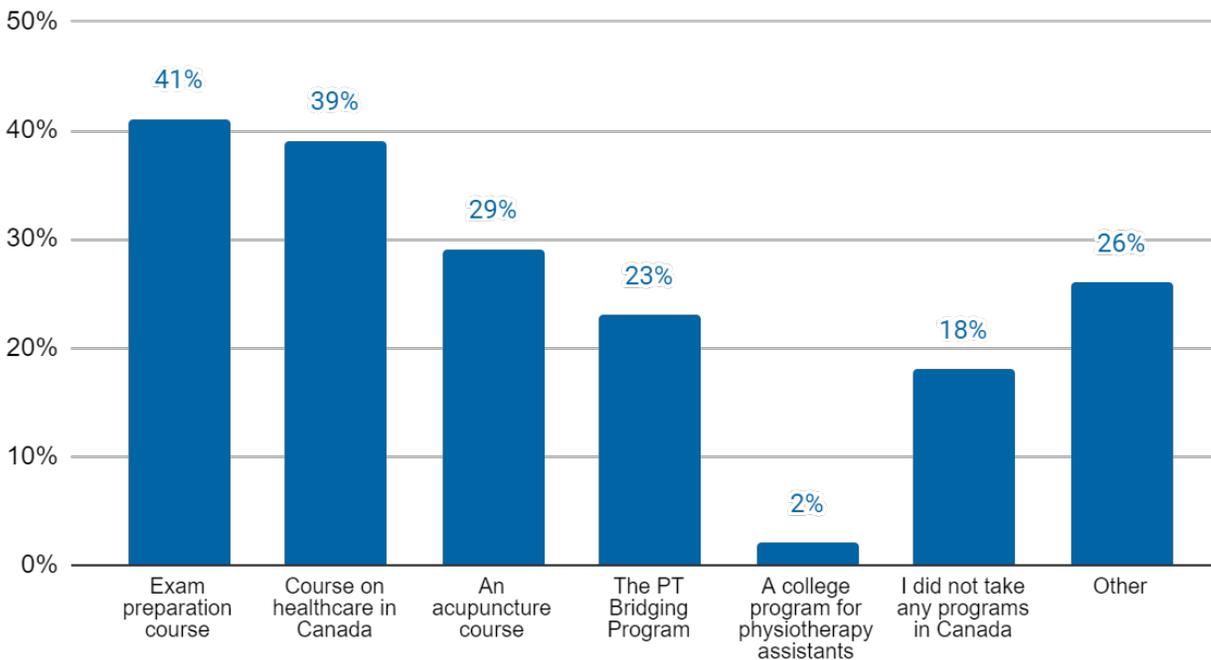
Communication, Limited rights of Physiotherapists, College of PT's limited assistance in guiding PTs as they never answer your question directly, Limited shadowing options for Canadian Context/clinics/hospitals.

Exams/credentialling language test/ overall transitions to become a Physiotherapist was challenging.

# PROGRAMS COMPLETED IN CANADA

- Respondents have taken a variety of programs.
- About 4 in 10 (41%) have taken an exam preparation course and another 39% have taken a course on healthcare in Canada.
- 29% have taken an acupuncture course.
- 23% of respondents have completed the PT Bridging program.

Programs completed in Canada



82% of respondents indicated that they took at least one program in Canada.

**Completed any program:**

Country received physiotherapy education:

India: 87% The Philippines: 90%

Oceania: 89%

UK: 73% US: 67% Europe: 70%

\*Oceania was only significant vs UK and US (not Europe). India and the Philippines were significant vs all three

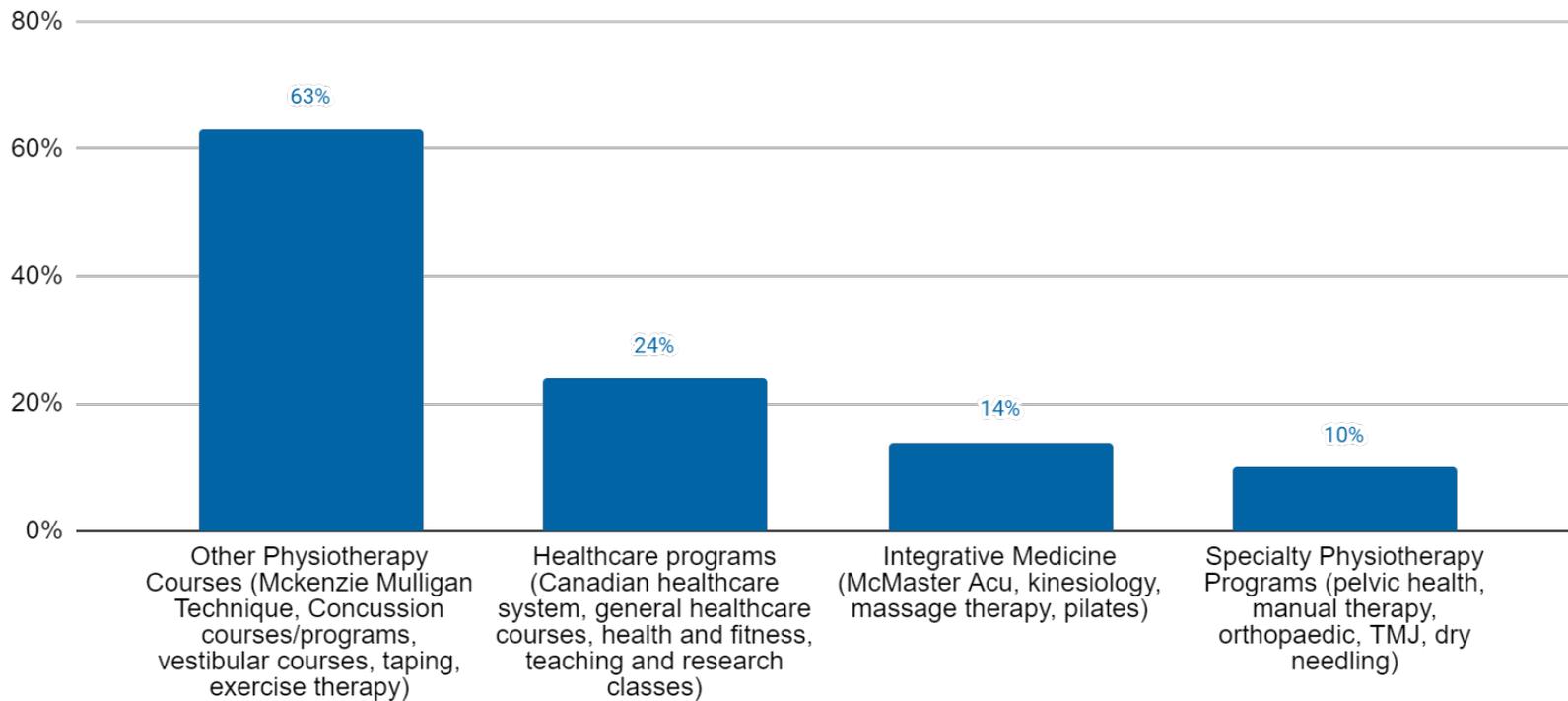


9. Please indicate which of the following programs you have completed in Canada. Please check all that apply. Please indicate what program(s) were taken:  
Base: Total Respondents (n=535)

# PROGRAMS COMPLETED IN CANADA

- Respondents indicated they completed the following programs in Canada:

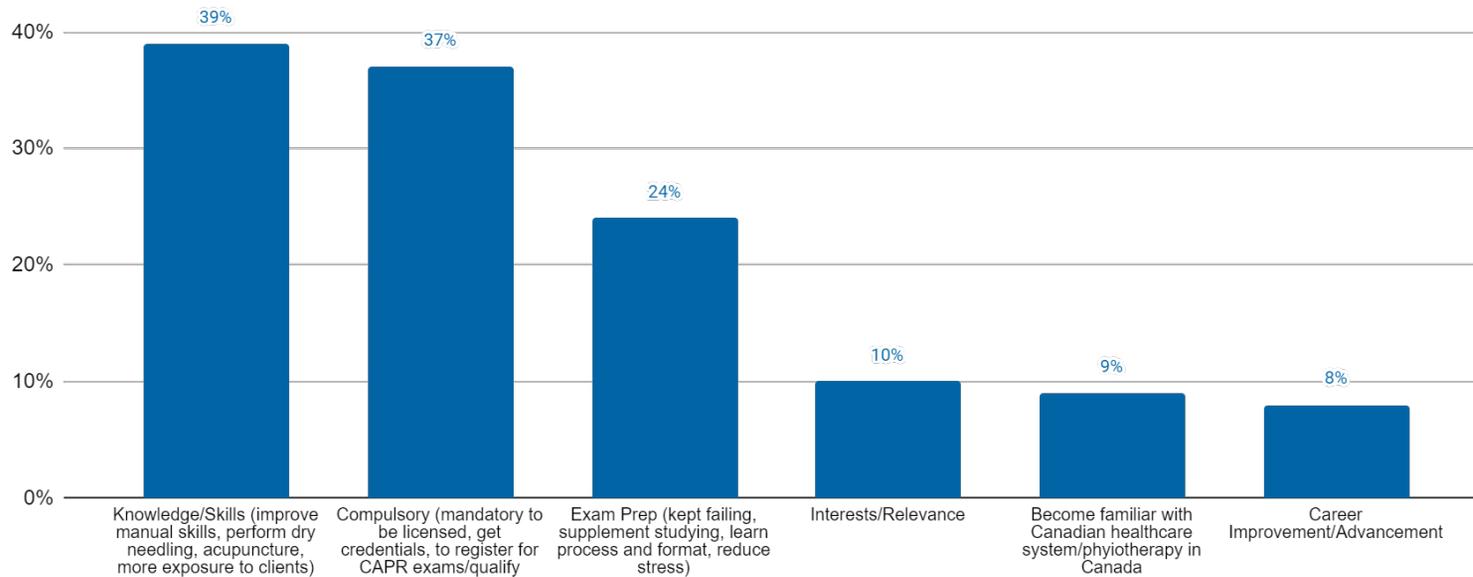
## Specific Programs Completed in Canada



# PROGRAMS COMPLETED IN CANADA

- Many (39%) took courses to gain practical skills.
- 37% took courses because they were required or understood as necessary.
- 24% indicated they took courses specifically to assist with the exam process.

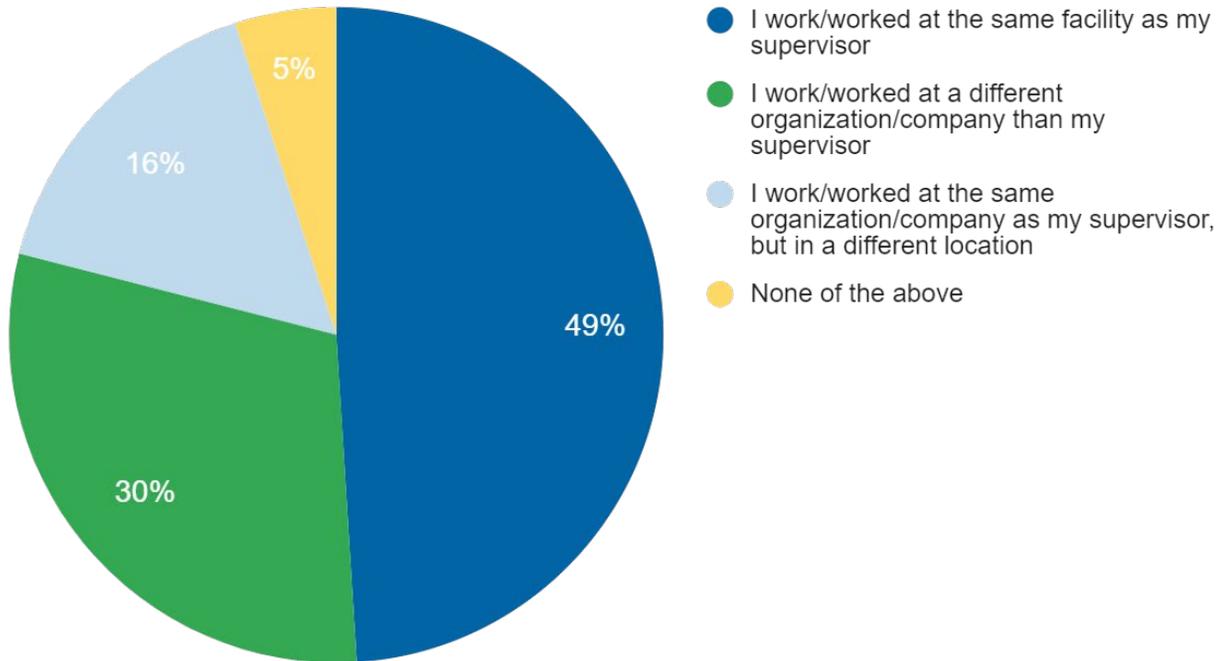
Reasons for Choosing Program



# WORKING RELATIONSHIP WITH SUPERVISOR

- Almost half (49%) work or worked at the same facility as their supervisor. 16% work or worked at same organization or company but a different location. Fully, 65% of respondents work or worked at the same organization or company as their supervisor.
- 30% work or worked at a different organization than their supervisor.

Working Relationship With Supervisor



Those who arrived more recently to Ontario were more likely to say they work or have worked at the same facility as their supervisor.

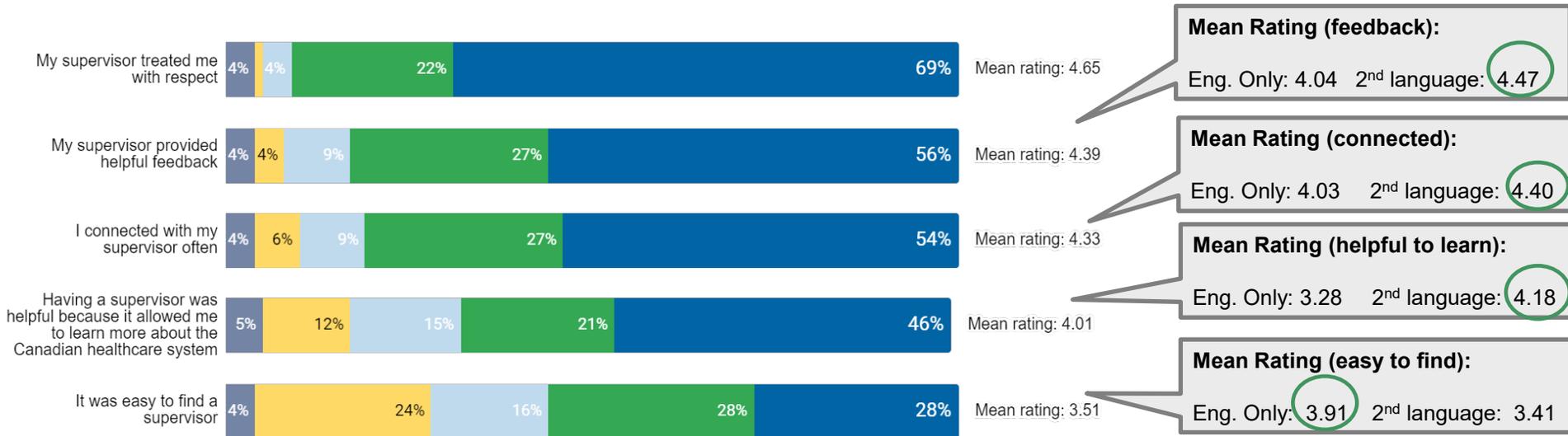
2020/2021: 78%    2019: 46%

# RELATIONSHIP WITH SUPERVISOR

- Most respondents seem to have a good relationship with their supervisor. Fully 91% say my supervisor treated me with respect, 83% say their supervisor provided helpful feedback and 81% say they connected with their supervisor often.
  - Those who have English as a second language are more likely to indicate that their supervisor provided helpful feedback and that they connected with their supervisor often.
- At the same time, only 67% say that having a supervisor was helpful because it allowed them to learn more about the Canadian healthcare system. While most feel treated well by their supervisor, there may be an opportunity to make the experience more educational about practice in Canada.
  - Those who have English as second language are more likely to agree.
- Finding a supervisor is a challenge. Only 56% say it was easy to find a supervisor. There may be an opportunity to assist with this process including through communicating about the best route to find a supervisor.
  - Those who have English as second language find it more difficult.

## Agreement with Statements about Relationship with Supervisor

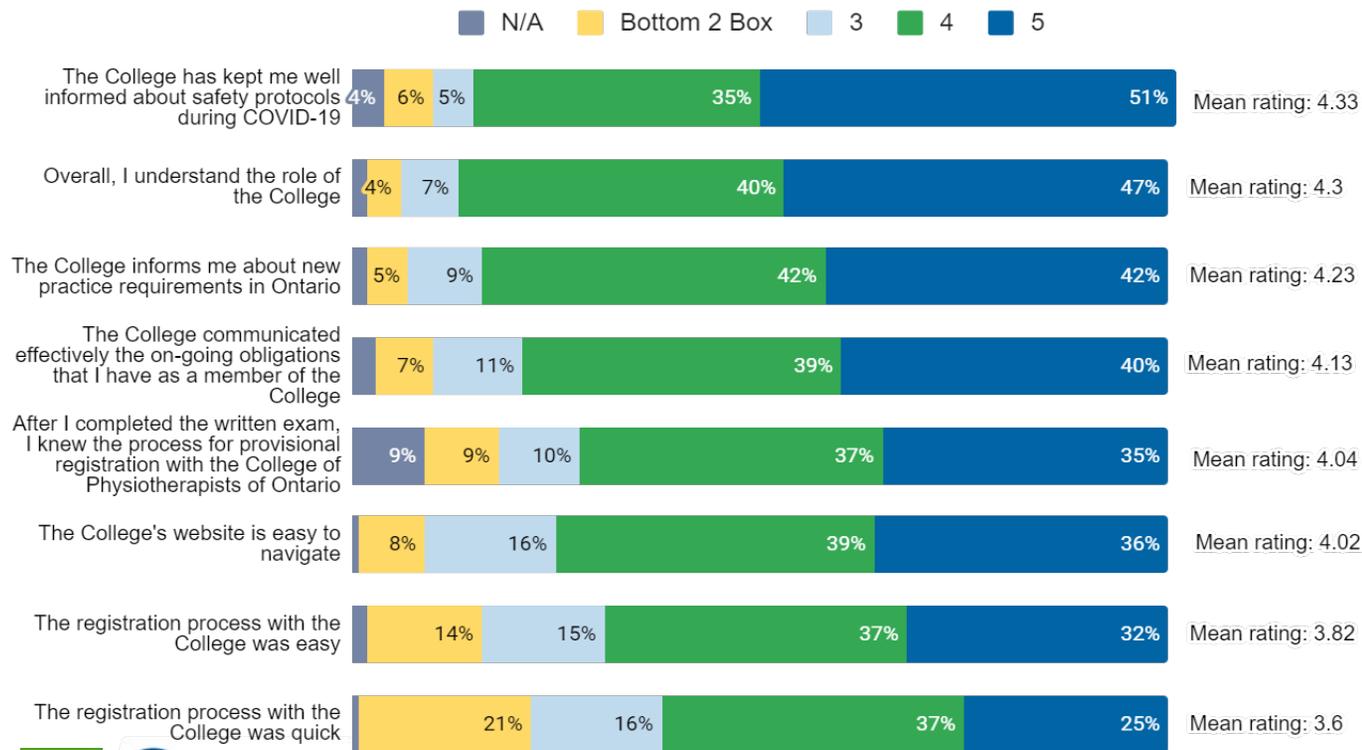
■ N/A ■ Bottom 2 Box ■ 3 ■ 4 ■ 5



# RELATIONSHIP WITH THE COLLEGE

- The relationship with the College is strong. Agreement rating from a high of 87% to a low of 62%.
- Respondents say that they understand the role of the College (87%) and that the College keeps them well informed about safety protocols during COVID-19 (86%), informs them about new practice requirements (84%), and communicates on-going obligations as a College member (79%). Most find the website easy to navigate at 75%. The vast majority have a positive relationship with the College on an on-going basis.
- There may be room to strengthen the relationship at the beginning. Fewer agree that they knew the process for provisional registration (72%), the registration process was easy (69%), and registration process was quick (62%). However, in the qualitative research almost all indicated the process was easy and quick.
- Those who speak a language other than English at home were more likely to agree, indicating a positive relationship with this group.

## Relationship with the College

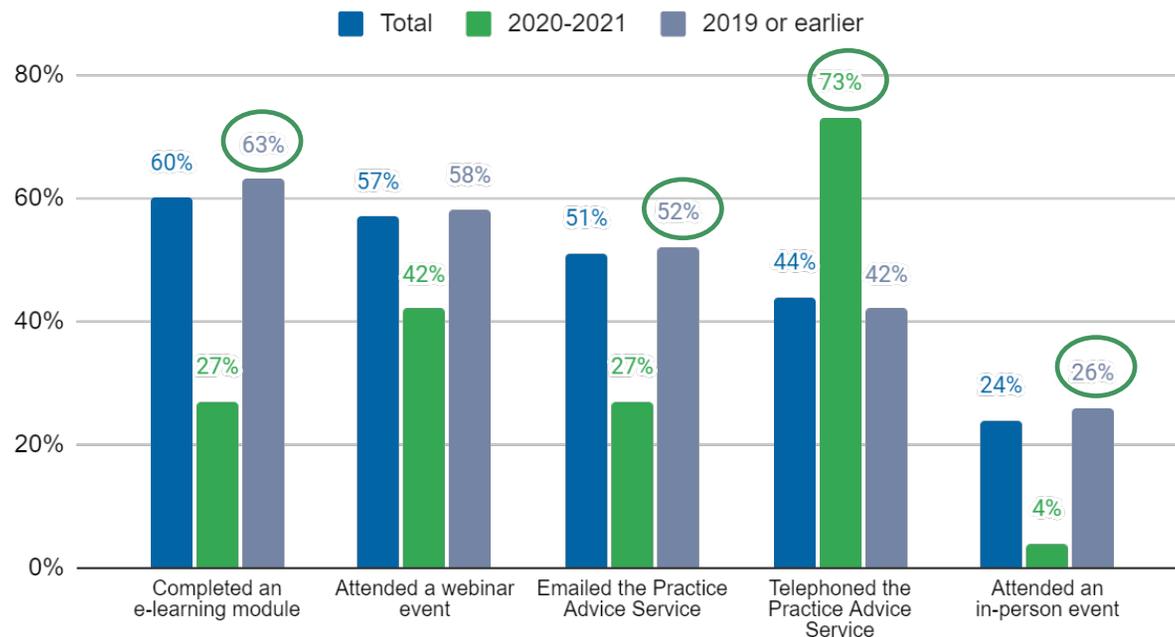


Those who speak a language other than English at home were **more likely to agree with all statements except "Overall, I understand the role of the college"** where no significant difference was found.

# PARTICIPATION IN ACTIVITIES

- More than half have completed an e-learning module (60%) or attended a webinar event (57%). Both these numbers drop for IEPTs who arrived in 2020/21 to 27% and 42% respectively. There may be an opportunity to encourage participation among new arrivals.
- Both email and telephone are commonly used to reach the practice advisory service. Newly arrived IEPTs are much more likely to use telephone (73%) than email (27%). Perhaps respondents choose this method because they hope that it will be the better way to have questions addressed in a comfortable way.

## Participation in Activities Offered by the College

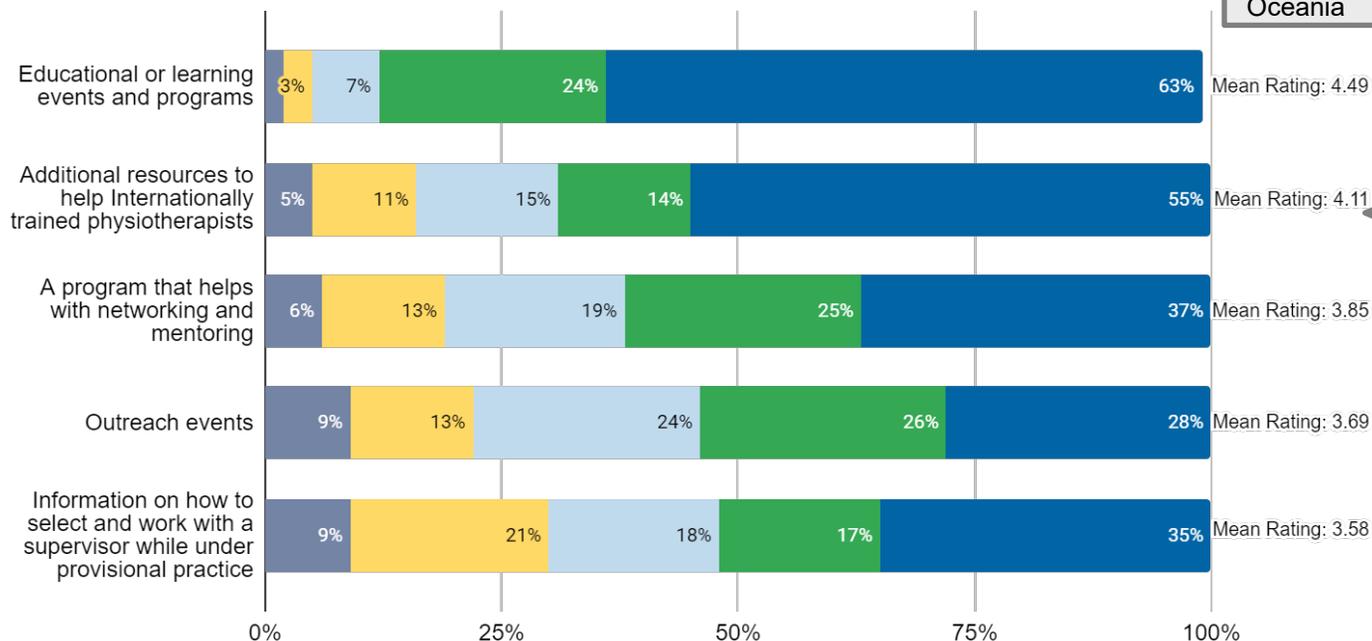


# INTEREST IN OFFERINGS BY THE COLLEGE

- Consistent with the qualitative research, there is a strong interest for education and learning events and programs at 87%.
- There is also interest in additional resources to help internationally trained physiotherapists at 69%, a program that helps with networking and mentoring at 62%, outreach events at 54%, and information on how to select and work with a supervisor while under provisional practice at 52%.
- Those who arrived recently (2020/2021) are more interested in many of these offerings. This fact is also true for those from India, The Philippines and South America/Caribbean. Interest indicates an opportunity for engagement.

## Interest in Offerings by the College

■ Don't Know ■ Bottom 2 Box ■ 3 ■ 4 ■ 5



Those with international education from **India, The Philippines, and South America/Caribbean** had **higher** mean ratings in all offerings vs UK, USA, and Oceania

**Mean Rating: Additional Resources**  
Arrived in Ontario:  
2020/2021: **4.50** 2019 or before: 4.10

**Mean Rating: Networking/Mentoring**  
Arrived in Ontario:  
2020/2021: **4.38** 2019 or before: 3.8

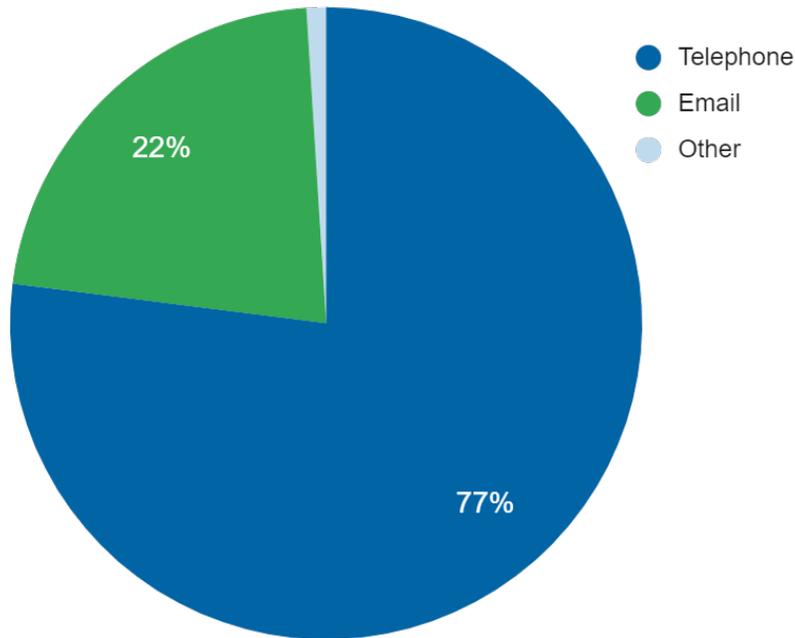
**Mean Rating: Supervisor Info**  
Have or had Provisional Practice Cert:  
Yes: **3.84** No: 2.86  
Arrived in Ontario:  
2020/2021: **4.19** 2019 or before: 3.58

Those who speak a language other than English at home had a **higher** mean rating for interest in all offerings by the College.

# COMMUNICATION WITH THE COLLEGE

- Most (77%) prefer to contact the College by telephone. This number is even higher for IEPTs who arrived in 2020/21 at 92%.

Preferred way to contact the College



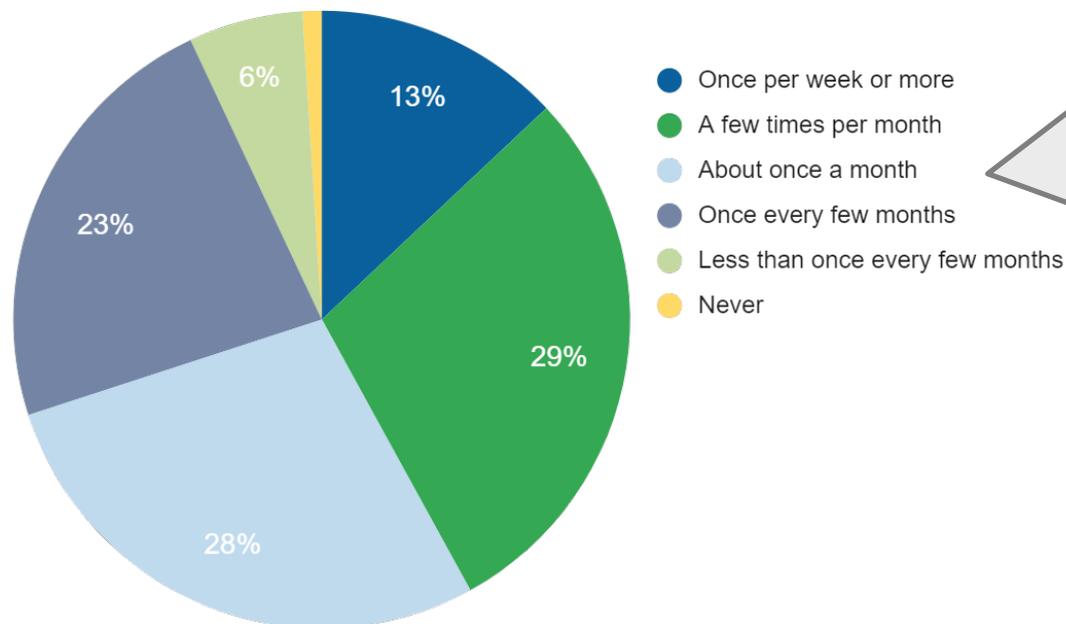
**Email:**  
**Year Arrived in Ontario:**

2019 or earlier: 76%    2020/21: 92%

# ACCESSING THE COLLEGE WEBSITE

- 70% of respondents access the College's website once a month or more.
- Those who speak a language other than English at home are more likely to visit the website frequently. This likely demonstrates a desire to engage with the College and learn from it.

Frequency of Accessing the College's Website



Those who speak a language other than English at home were more likely to visit the website frequently.

Once per week or more:

Eng. Only: 3%    2<sup>nd</sup> language: 16%

A few times per month:

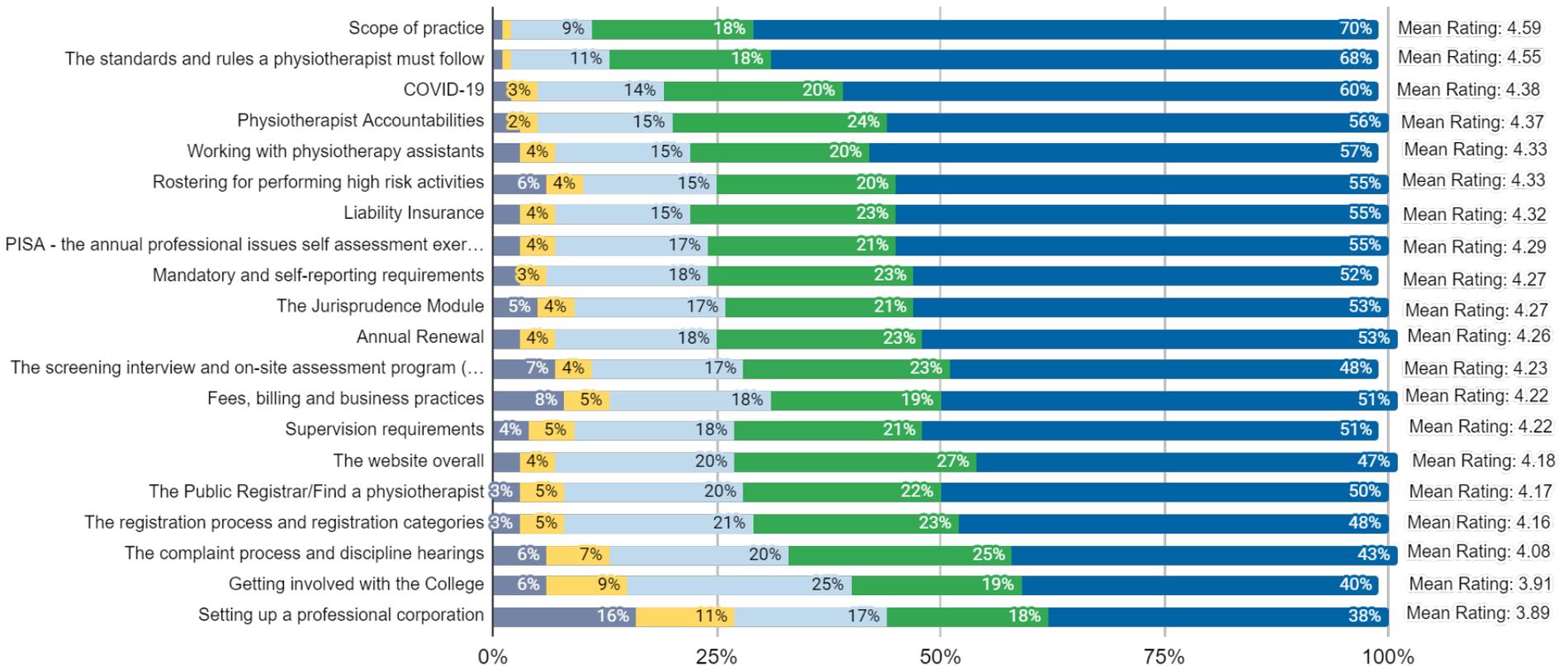
Eng. Only: 17%    2<sup>nd</sup> language: 33%

# INTEREST IN THE COLLEGE WEBSITE

- There is high interest with much of the information on the website. Interest ranges from a high of 88% to a low of 56%.

## Interest in Information on CPO Website

Don't Know Bottom 2 Box 3 4 5

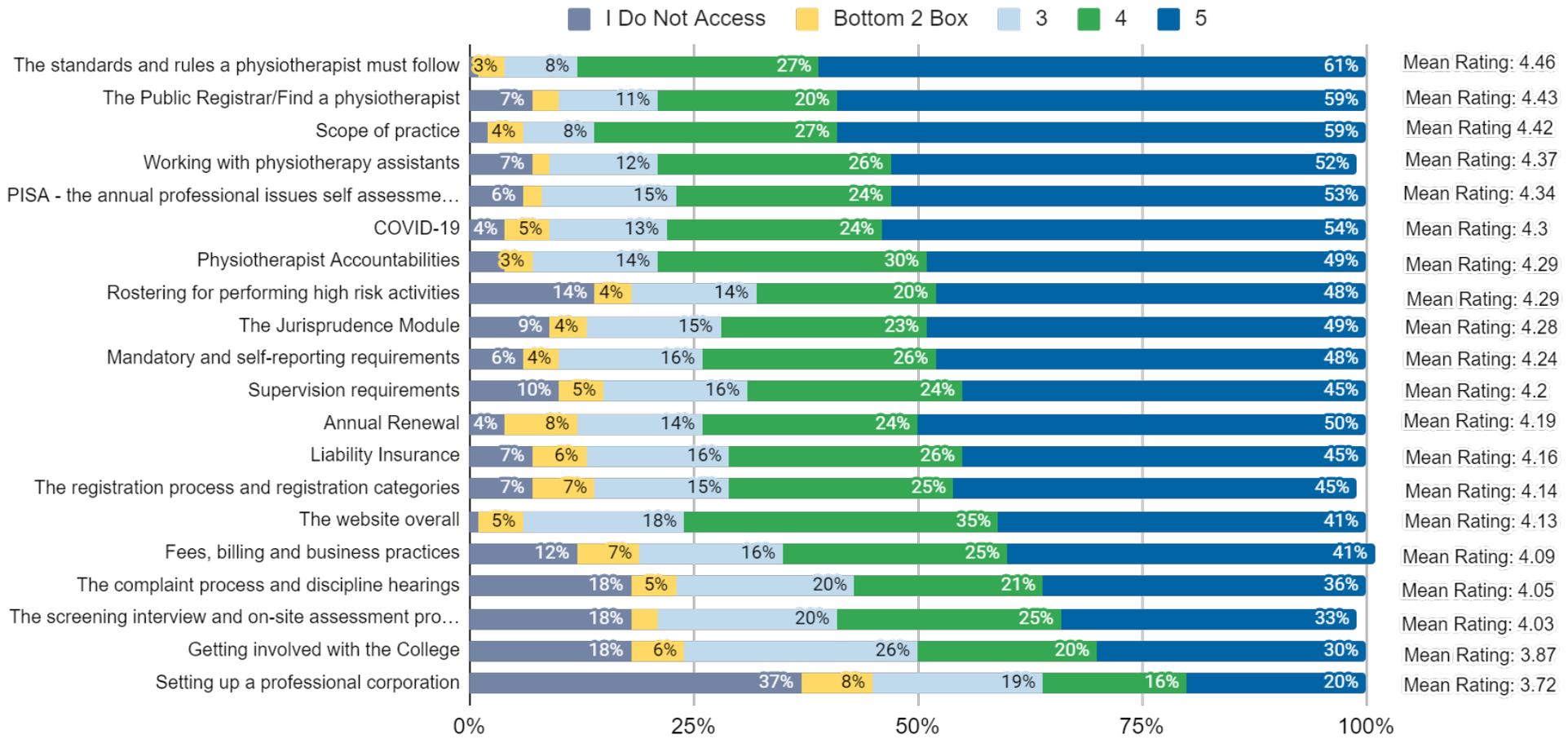


21. The College website covers a great deal of information. On a scale from 1 to 5, where 1 means not at all interested and 5 means very interested, how interested are you in the following information that is available on the **College of Physiotherapists of Ontario website**. If you are not sure, please select Don't Know.

# SATISFACTION IN THE COLLEGE WEBSITE

- There is high satisfaction with much of the information on the website. Satisfaction ranges from a high of 88% to a low of 36%.

## Satisfaction with Information on CPO Website



# GAP ANALYSIS – INTEREST VS SATISFACTION WITH COLLEGE WEBSITE

- The purpose of the gap analysis is to demonstrate areas of strength (where satisfaction is higher than interest) and areas that may need more focus (areas where interest is higher than satisfaction).
- Overall, interest and satisfaction numbers are similar and have high mean scores. This indicates that the College’s website is meeting the needs of users.
- The public Registrar/Find a physiotherapist is the only area where satisfaction is higher than interest, and this likely relates to the fact that this area is used by the general public.

| Information Available On College Website                       | Mean Rating - Satisfaction | Mean Rating - Interest | Difference |
|--|----------------------------|------------------------|------------|
| The Public Registrar/Find a physiotherapist                    | 4.43                       | 4.17                   | 0.26       |
| PISA - the annual professional issues self assessment exercise | 4.34                       | 4.29                   | 0.05       |
| Working with physiotherapy assistants                          | 4.37                       | 4.33                   | 0.04       |
| The Jurisprudence Module                                       | 4.28                       | 4.27                   | 0.01       |

20. On a scale from 1 to 5, where 1 means very dissatisfied and 5 means, how satisfied are you with the following information that is available on **the College of Physiotherapists of Ontario website**. very satisfied. If you do not access that information, please select do not access.

21. The College website covers a great deal of information. On a scale from 1 to 5, where 1 means not at all interested and 5 means very interested, how interested are you in the following information that is available on **the College of Physiotherapists of Ontario website**. If you are not sure, please select Don't Know.

# GAP ANALYSIS – INTEREST VS SATISFACTION WITH COLLEGE WEBSITE

- While many have slightly higher interest scores than satisfaction, the differences are small and therefore not meaningful with respect to measurement.
- The screening interview and on-site assessment program may be an area for focus.

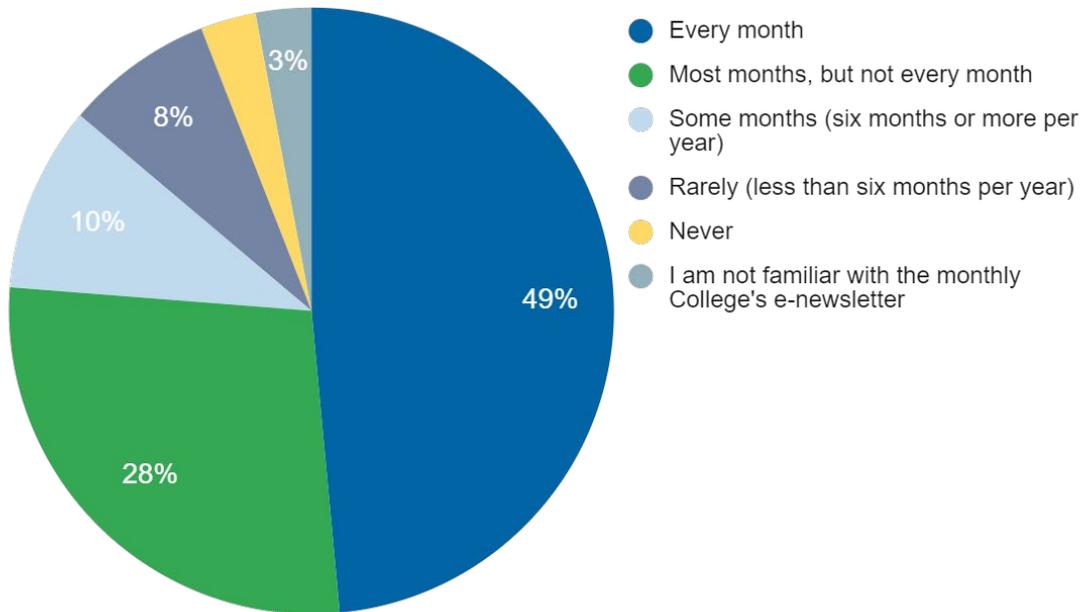
| Information Available On College Website   | Mean Rating - Satisfaction | Mean Rating - Interest | Difference |
|--|----------------------------|------------------------|------------|
| Supervision requirements   | 4.2                        | 4.22                   | -0.02      |
| The registration process and registration categories                               | 4.14                       | 4.16                   | -0.02      |
| Mandatory and self-reporting requirements  | 4.24                       | 4.27                   | -0.03      |
| The complaint process and discipline hearings                                      | 4.05                       | 4.08                   | -0.03      |
| Rostering for performing high risk activities                                      | 4.29                       | 4.33                   | -0.04      |
| Getting involved with the College  | 3.87                       | 3.91                   | -0.04      |
| The website overall  | 4.13                       | 4.18                   | -0.05      |
| Annual Renewal   | 4.19                       | 4.26                   | -0.07      |
| Physiotherapist Accountabilities   | 4.29                       | 4.37                   | -0.08      |
| COVID-19   | 4.3                        | 4.38                   | -0.08      |
| The standards and rules a physiotherapist must follow                              | 4.46                       | 4.55                   | -0.09      |
| Fees, billing and business practices   | 4.09                       | 4.22                   | -0.13      |
| Liability Insurance  | 4.16                       | 4.32                   | -0.16      |
| Scope of practice  | 4.42                       | 4.59                   | -0.17      |
| Setting up a professional corporation  | 3.72                       | 3.89                   | -0.17      |
| The screening interview and on-site assessment program (quality assurance program) | 4.03                       | 4.23                   | -0.2       |

20. On a scale from 1 to 5, where 1 means very dissatisfied and 5 means, how satisfied are you with the following information that is available on **the College of Physiotherapists of Ontario website**. very satisfied. If you do not access that information, please select do not access.

21. The College website covers a great deal of information. On a scale from 1 to 5, where 1 means not at all interested and 5 means very interested, how interested are you in the following information that is available on **the College of Physiotherapists of Ontario website**. If you are not sure, please select Don't Know.

- 49% read the newsletter every month and another 28% read most months, but not every month.
- Those who speak a second language at home are more likely to read the newsletter. Again, demonstrating interest and engagement of this group.
- Those who arrived in 2020/2021 are less likely to read the newsletter. This is somewhat surprising as they are overall more engaged. In the qualitative research, many, but not all indicated interest in the newsletter. There may be an opportunity to include additional content relevant to this group.

## Frequency of Reading College's Monthly E-newsletter



### Reads every month:

#### Language:

Eng. Only: 35%      2<sup>nd</sup> lang: 54%

#### Arrived in Ontario:

2019 or earlier: 50%      2020/21: 27%

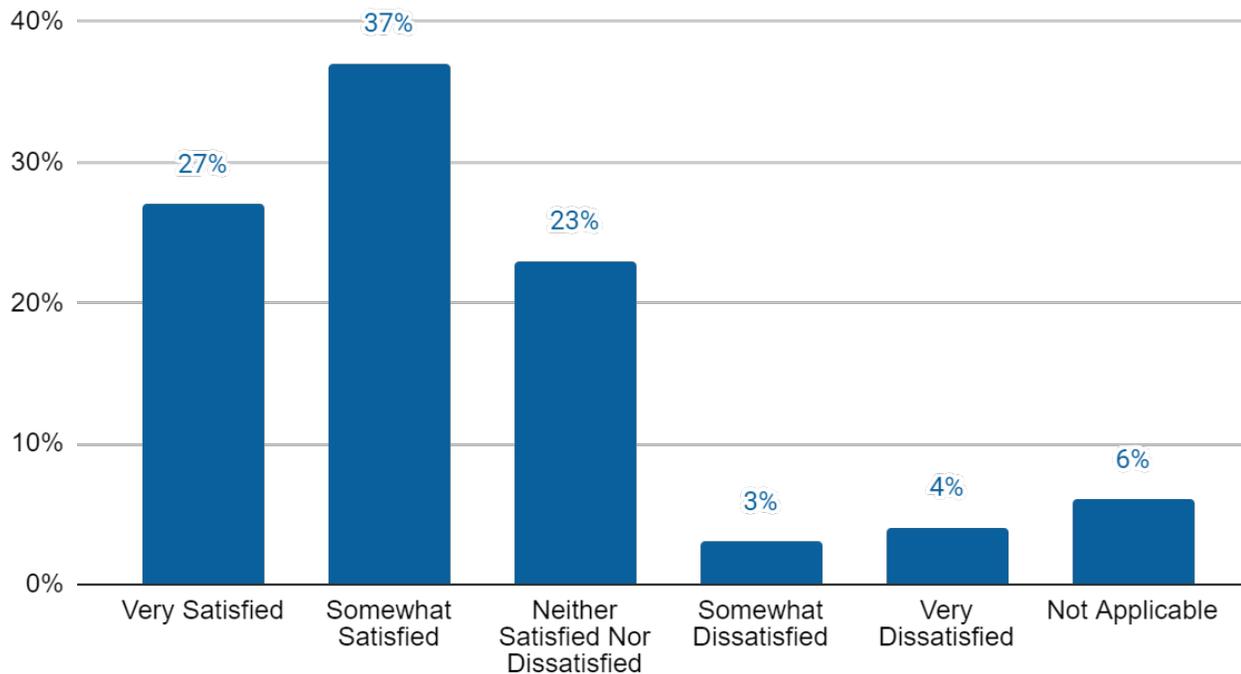
#### Country Received Physio Education:

India: 58%  
 US: 39%      Oceania: 23%      Europe: 39%  
 South America/Caribbean: 35%

# SATISFACTION WITH E-NEWSLETTER

- About two-thirds (64%) are satisfied with the E-newsletter.
- Similarly, those who arrived in 2020/2021 are less satisfied.

## Satisfaction with E-newsletter



### Top 2 Box%

#### Arrived in Ontario:

2019 or earlier: 66% 2020/21: 35%

#### Country Received Physio Education:

India: 74% and The Philippines: 76%

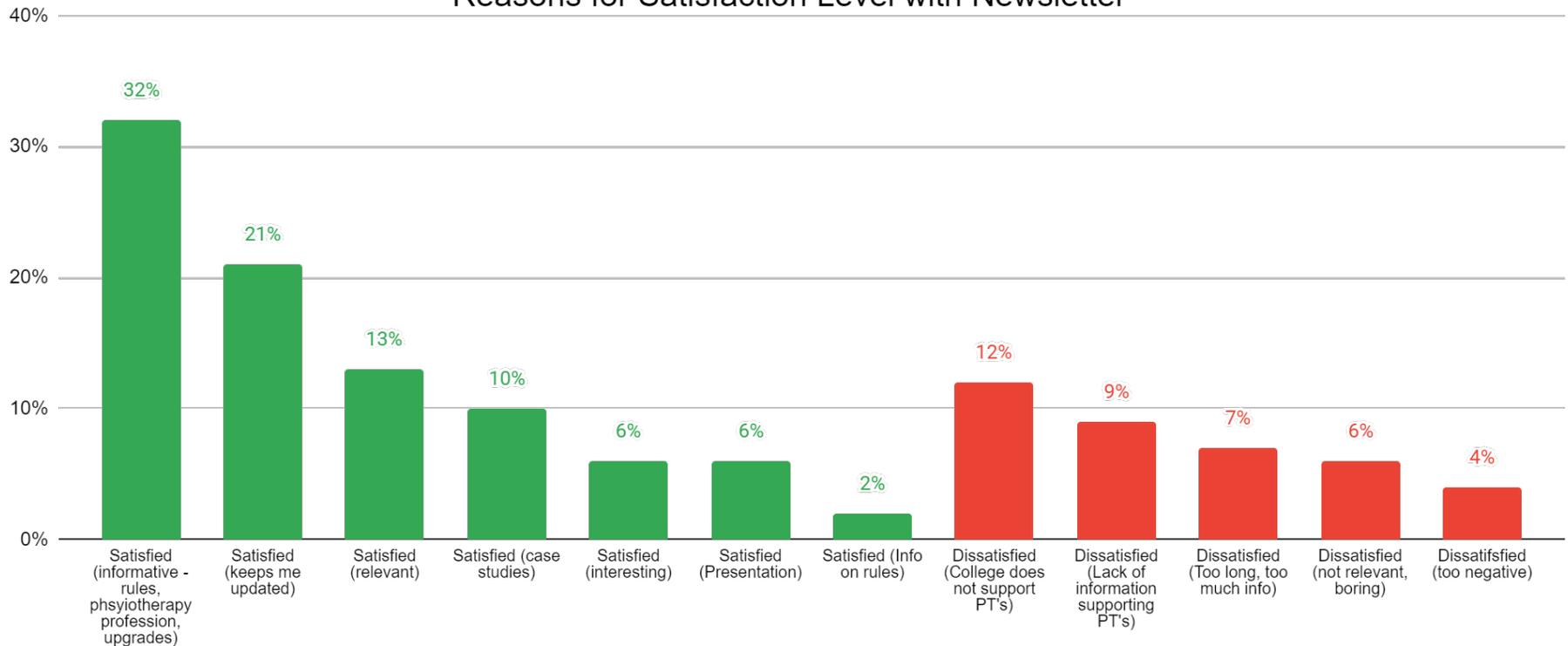
UK: 52% US: 52% Oceania: 34%

Europe: 48%

# REASON FOR OPINION ON E-NEWSLETTER

- Those who are satisfied think the newsletter is relevant and informative. It is current.
- The key reason for dissatisfaction is that it is not seen as supportive of PTs and a few say it is negative. While most had positive views of the newsletter in the qualitative research, this finding is consistent with feedback about the cases in the qualitative research.

Reasons for Satisfaction Level with Newsletter



# REASON FOR OPINION ON E-NEWSLETTER – SATISFIED

I like that I can skim through the email and click links that I am interested in.

It explains the most current situations, things that I need to be aware of as a registered physiotherapist, also it talks about the case of the month which is very informative.

Updated me with current information for practice and current Covid-19, also, I love the case of month and " Myth" and " Fact". Always I have to know what happened to my colleagues, it can happen to me.

Lots of information organized in a sequential manner, with appropriate links to more info. Reminders, updates and a nice touch with welcoming new PTs.

It appears to have good reminders and some updated information about what's going on with the profession and the college. New scientific research or practice trends would be a good addition.

I like the issues and case discussed in monthly newsletter. I makes me aware of the current trends, rules etc. I am disappointed by how college does not support its own physiotherapists.

It offers an easy to digest format of information relevant to physiotherapy practice.

Keeps me informed and it its a good summary. Can include more relevant things such as information links and events information at glance.

# REASON FOR OPINION ON E-NEWSLETTER – DISSATISFIED

Not a whole lot applies to me. I'm currently in this limbo of being a resident physiotherapist, meaning I can't apply for rostered activities.

I find that a lot of it does not pertain to my practice or is not of interest.

I don't receive the monthly newsletter in my mailbox consistently. When I do get it, the story titles are often negative. Instead of saying, "do NOT do", the stories should say, "Here's what to do." I get more updates and information from the CPA and OPA regarding the college.

I feel that some of the issues repeats several times a year.

Perspectives of PTs and challenges practising PTs face should be discussed more often.

The biggest problems physiotherapists and residents are dealing with are hardly covered. Why are we getting information about mundane things when thousands of PT's remain unregistered while the college continuously delays any kind of solution?

A bit too lengthy.

Overall, we all wish our college would advocate for the profession and physiotherapists who work so hard, as much as they do for public. I personally get disheartened sometimes after reading the case of the month.

A lot of self promotion for the college not a lot of advocacy for the profession or how to build up... it's very negative to read.

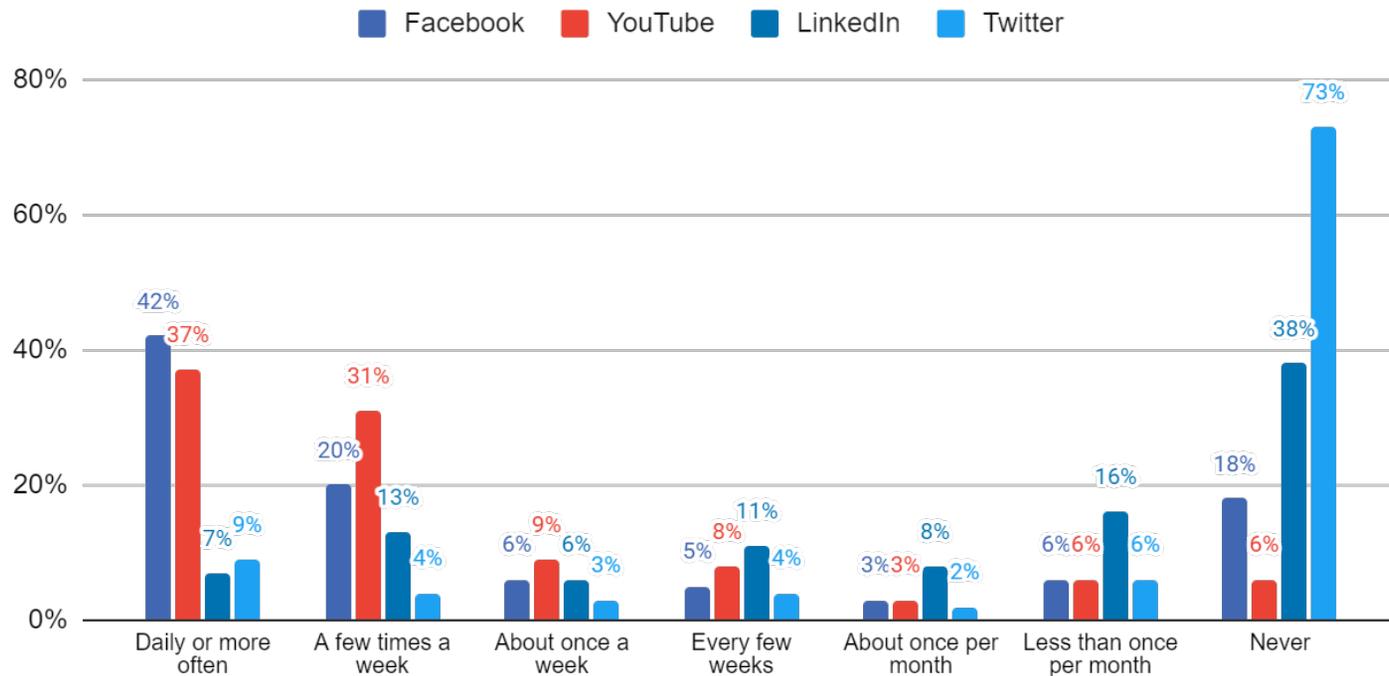
Too much focus on disciplinary issues. Recently the college seem detached from the current issues that physiotherapist and the community have.

Visually unappealing.

# USAGE OF SOCIAL MEDIA

- Facebook and YouTube are most used. 77% of respondents use YouTube and 68% of respondents use Facebook once a week or more.
- LinkedIn and Twitter are not commonly used. Only 26% of respondents use LinkedIn and only 16% of respondents use Twitter once a week or more.
- Social media strategies should focus on Facebook or YouTube.
- There may be an opportunity to encourage LinkedIn usage as tool to connect with the physiotherapist community in Ontario.

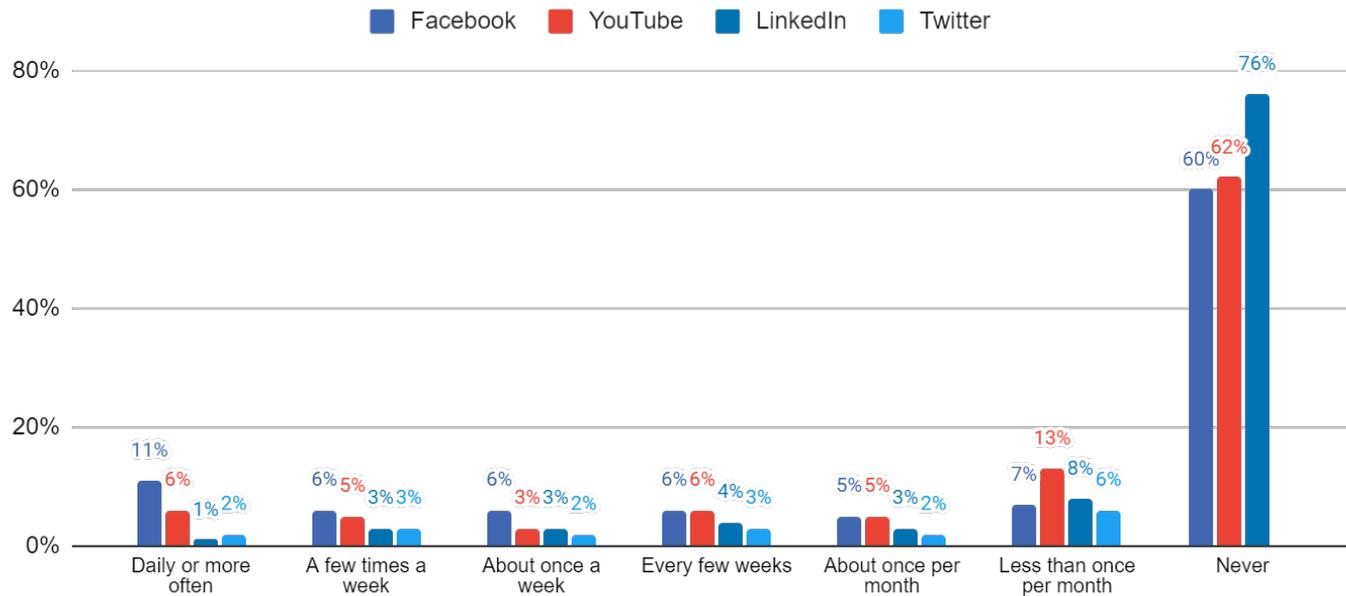
## Frequency of Social Media Usage



# FREQUENCY OF FOLLOWING THE COLLEGE ON SOCIAL MEDIA

- Most do not follow the College on social media. Only 23% follow the College on Facebook and 14% following the College on YouTube once a week or more.
- Facebook and YouTube are most commonly used. There is potentially an opportunity to increase interest in following the College on these social media platforms.

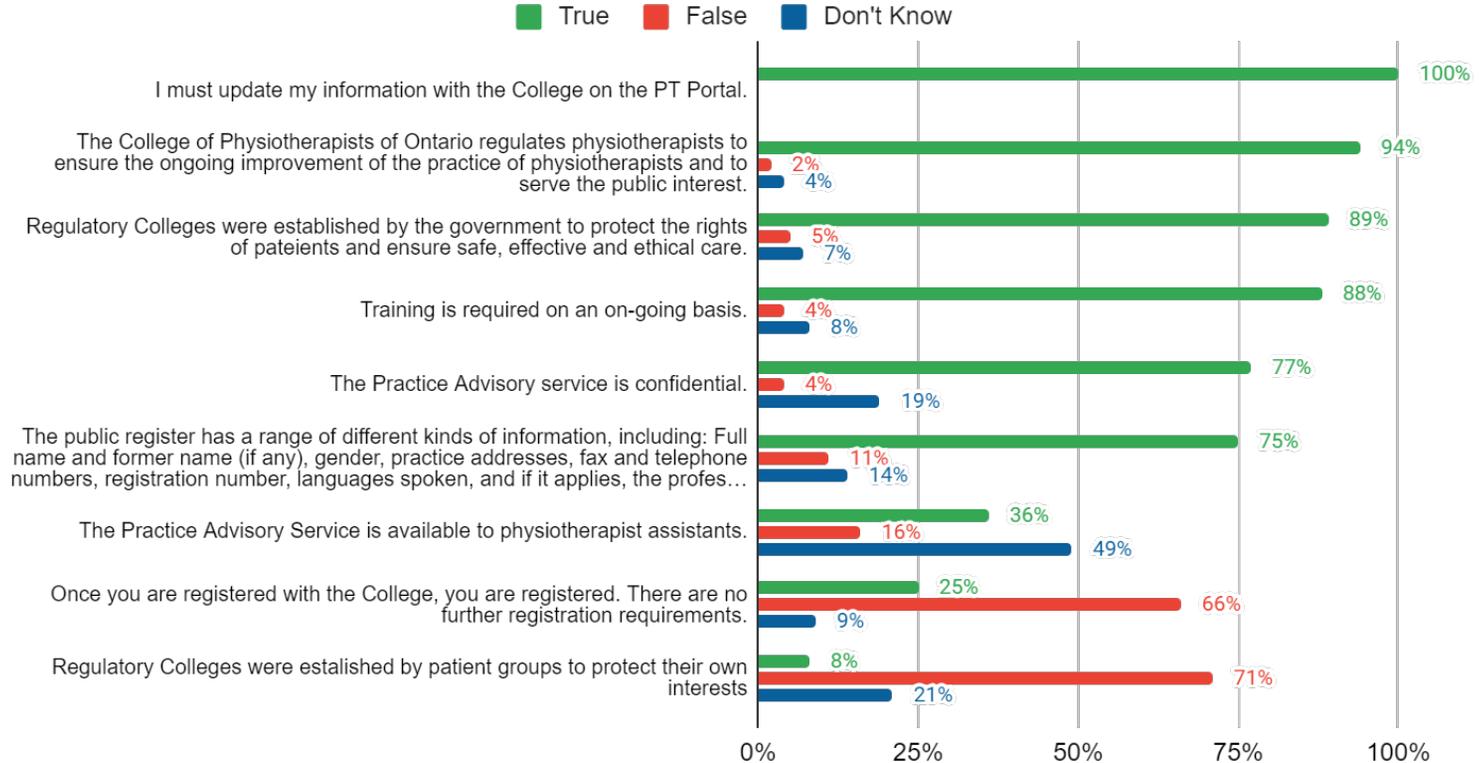
Frequency of Social Media Usage to Follow/Learn About College



# KNOWLEDGE OF COLLEGE

- Most demonstrate knowledge and can answer most questions correctly. There are a few areas where knowledge could be improved.
- Only 77% know that the Practice Advisory service is confidential. Only 75% are aware of the different information that is contained within the public register.
- Only 66% state that “Once you are registered with College, you are registered. There are no further registration requirements” is false.
- Consistent with the qualitative research, IEPTs do not understand that the practice advisory service is available to physiotherapist assistants. There is an opportunity to communicate this fact. This research supports the recommendation to consider renaming the practice advisory service.

## True or False Statements about the College



# FURTHER COMMENTS AND SUGGESTIONS

The college website could be a bit more and mobile friendly. In its current state, it's practically impossible to complete some basic tasks on a mobile device.

If college can suggest any idea to make credentialing process faster.

... rethinking how we license physiotherapists, and finding a more reasonable and fair way. The practical exam is not practical at all, and it forces Canadian universities to train their physios how to pass the exam, not how to be a physio. Physios coming from other countries, who may be fantastic, are at a disadvantage unless they can afford to pay thousands to take prep courses. It is a very broken system, and I hope some positive comes from this!

Please keep the licensing exam process simpler with more attempts.

More clarity on application process, streamline process from accepted and previously approved universities.

Mentoring is key to help new PT to come to the market and help more the health system.

Finding a preparation course to the written and clinical tests was a bit of a struggle. I couldn't find a list on line that is gathering all the courses available and where. It would have been very helpful if this kind of list exists.

Please remove CAPR as regulators we feel that they are not doing their job and taking lots of money.

I would appreciate if the college is able to come with an additional option for physiotherapist to obtain the full license because of the setbacks during COVID-19 pandemic.

Advertising standard should be more liberal - for eg - dentist can promote them self with pictures and other advertisements but not physiotherapist.

# FURTHER COMMENTS AND SUGGESTIONS

My supervising PT was internationally trained and he was very professional, helpful and fully understood what I was going through which was priceless for my professional journey in becoming PT in Ontario. I was very lucky to have his support and expertise!

When I arrived in Canada in 2001, I had difficulty in finding resources to prepare for the PCE. I am glad that there is Bridging program now to help the internationally educated.

I am seeing there are few people who are opposing for clinical exams in Facebook and Instagram. I request to college as well as to CAPR that each candidate should go through same process as we did before Covid 19. There should not be free pass and each and every international as well as Canadian physiotherapist should go through proper exam both written and clinical. Thank you

It would be helpful to look at IEPT's past experience in countries with similar healthcare systems and regulatory bodies. An interview panel with such candidates instead of the licensing exam can be considered as this just becomes redundant and expensive for the candidate. These financial resources can be used by these candidates for continuing education instead of on repetitive exams.

I'm glad to be part of this team. I can't thank you enough for constantly motivating and updating the skills of our physiotherapy profession in the best interest of our community .

It was extremely helpful to complete clinical residency in a hospital setting and to continue working at the hospital in a multidisciplinary setting with direct access to the peer support and the supervisor.

I think the practice advisor feature is a wonderful perk!

It would be very helpful to have a paid/unpaid course for new PTs to understand documentation for WSIB, MVA plans.

# APPENDIX

**Survey: IEPT**

**INTRODUCTION**

The College of Physiotherapists of Ontario is interested in your experience as a physiotherapist who was educated and/or trained outside of Canada.

We are asking you to take 15 minutes to complete this survey about your experience becoming a physiotherapist in Ontario.

The goal of this survey is to better understand the experience of internationally educated physiotherapists entering the health system in Ontario and identify potential areas of improvement. Your thoughts and opinions are important. By participating in this survey, you will help us to better understand and serve the needs of internationally educated physiotherapists (IEPTs) in Ontario.

At the end of the survey, you will have the option to include your name and email to be entered in a random draw to win one of three \$50 gift cards. The odds of winning depend on the number of entries received.

Please note this step is completely optional. If you choose not to enter the draw, do not enter your personal information and your responses will remain confidential.

Thank you for participating in this important initiative.

We ask that you complete this survey by **January 1, 2022**.

Questions? Please email [communications@collegept.org](mailto:communications@collegept.org) or call 1-800-583-5885 ext. 234.

[www.collegept.org](http://www.collegept.org)

**SECTION A: PROFILE**

1. When did you arrive in Ontario? Please enter the year.

[DO AS DROP BOX 1-20 or more or WRITE-IN]

2. In which country did you receive your education as physiotherapist? If it is more than one country, please indicate the primary country.

[DO AS WRITE-IN]

3. Do you speak a language other than English at home?

| YES | NO |
|-----|----|
| 1   | 2  |
|     |    |

4. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Written

| YES | NO |
|-----|----|
| 1   | 2  |
|     |    |

If yes, please indicate the year of exam completion: \_\_\_\_\_

5. Have you completed the Canadian Alliance of Physiotherapy Regulators (CAPR) Physiotherapy Competency Exam (PCE) – Clinical?

| YES | NO |
|-----|----|
| 1   | 2  |
|     |    |

If yes, please indicate the year of exam completion: \_\_\_\_\_

6. Please check the statement that best describes the situation in the country where you first practiced physiotherapy.

|    |   |  |
|----|---|--|
|    |   |  |
| a. | The country where I first practiced physiotherapy has a regulator that performs a similar function to the College of Physiotherapists of Ontario.   |  |
| b. | The country where I first practiced physiotherapy has an overseeing organization for physiotherapists, but this organization is NOT really similar to the College of Physiotherapists of Ontario. |  |
| c. | The country where I first practiced physiotherapy does NOT have a regulator.  |  |
| d. | None of the above: (write-in): _____  |  |

7. Which of the following best describes the practice setting(s) of your current work? Please check all that apply.

|    |                                     |  |
|----|-------------------------------------|--|
| a. | Community settings and home care    |  |
| b. | Hospital                            |  |
| c. | Long-term care and retirement homes |  |
| d. | Private practice                    |  |
| e. | OTHER: (please specify) _____       |  |

8. Thinking about when you first came to Ontario, are there any specific issue/s related to the practice of physiotherapy that you found to be difficult or challenging?

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**SECTION B: PRACTICE IN ONTARIO**

9. Please indicate which of the following programs you have completed in Canada. Please check all that apply.

|    |  |  |
|----|--|--|
| a. | The PT Bridging Program (programming: go to 6b – a)                              |  |
| b. | An exam preparation course (programming: go to 6b - b)                           |  |
| c. | A college-level program for physiotherapy assistants (programming: go to 6b – c) |  |
| d. | A course on healthcare in Canada (programming: go to 6b – d)                     |  |
| e. | An acupuncture course (programming: go to 6b – e)                                |  |
| f. | Other: (please indicate below) _____   |  |
| g. | I did NOT take any programs in Canada  |  |

Please indicate what program(s) were taken:

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10. If you indicated a program above, please explain why you selected that particular educational option(s).

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11. Did you or do you have a Provisional Practice Certificate with the College?

| YES | NO |
|-----|----|
| 1   | 2  |
|     |    |

13. Please check the statement that best describes your working relationship with your supervisor now or when you were a Physiotherapy Resident.

|    |   |  |
|----|---|--|
| a. | I work/worked at the same facility as my supervisor.  |  |
| b. | I worked/worked at the same organization/company as my supervisor, but in a different location. |  |
| c. | I worked/worked at a different organization/company than my supervision.                        |  |
| d. | None of the above: (please specify): _____  |  |

14. On a scale from 1 to 5, where 1 means strongly disagree and 5 means strongly agree, how much do you agree with the following statements describing your relationship with your supervisor now or when you were a physiotherapy resident. If any statements are not applicable, please select N/A.

|    |  | Strongly Disagree |   |   |   |   | Strongly Agree | NA |
|----|--|-------------------|---|---|---|---|----------------|----|
|    |  | 1                 | 2 | 3 | 4 | 5 | 9              |    |
| a. | It was easy to find a supervisor   |                   |   |   |   |   |                |    |
| b. | My supervisor provided helpful feedback.   |                   |   |   |   |   |                |    |
| c. | My supervisor treated me with respect.   |                   |   |   |   |   |                |    |
| d. | I connected with my supervisor often.  |                   |   |   |   |   |                |    |
| e. | Having a supervisor was helpful because it allowed me to learn more about the Canadian healthcare system |                   |   |   |   |   |                |    |

### SECTION C: THE COLLEGE OF PHYSIOTHERAPISTS OF ONTARIO

15. On a scale from 1 to 5, where 1 means strongly disagree and 5 means strongly agree, how much do you agree with the following statements describing your relationship with the College of Physiotherapists of Ontario. If any statements are not applicable, please select N/A.

|    |  | Strongly Disagree |   |   |   |   | Strongly Agree | NA |
|----|--|-------------------|---|---|---|---|----------------|----|
|    |  | 1                 | 2 | 3 | 4 | 5 | 9              |    |
| a. | After I completed the written exam, I knew the process for provisional registration with the College of Physiotherapists of Ontario. |                   |   |   |   |   |                |    |

|    |  |  |  |  |  |  |  |  |  |
|----|--|--|--|--|--|--|--|--|--|
| b. | The registration process with the College was easy.  |  |  |  |  |  |  |  |  |
| c. | The registration process with the College was quick.   |  |  |  |  |  |  |  |  |
| d. | The College <u>communicated effectively</u> the on-going obligations that I have as a member of the College. |  |  |  |  |  |  |  |  |
| e. | The College informs me about new practice requirements in Ontario.   |  |  |  |  |  |  |  |  |
| f. | The College has kept me well – informed about safety protocols during COVID-19.                              |  |  |  |  |  |  |  |  |
| g. | The College's website is easy to navigate.   |  |  |  |  |  |  |  |  |
| h. | Overall, I understand the role of the College.   |  |  |  |  |  |  |  |  |

16. Have you participated in any of the following activities offered by the College of Physiotherapists of Ontario?

|    |  | YES | NO | NOT APPLICABLE OR DON'T KNOW |
|----|--|-----|----|------------------------------|
|    |  | 1   | 2  | 9                            |
| a. | Attended an in-person event            |     |    |                              |
| b. | Attended a webinar event               |     |    |                              |
| c. | Completed an e-learning module         |     |    |                              |
| d. | Telephoned the Practice Advice Service |     |    |                              |
| e. | E-mailed the Practice Advice Service   |     |    |                              |

17. On a scale from 1 to 5, where 1 means not all interested and 5 means very interested, how interested are you in the following being offered by the College of Physiotherapists of Ontario. If you are not sure, please select *I Don't know*.

|    |  | Not at all Interested |   |   |   | Very Interested | Don't Know |
|----|--|-----------------------|---|---|---|-----------------|------------|
|    |  | 1                     | 2 | 3 | 4 | 5               | 9          |
| a. | A program that helps with networking and mentoring                                       |                       |   |   |   |                 |            |
| b. | Outreach events  |                       |   |   |   |                 |            |
| d. | Educational or learning events and programs  |                       |   |   |   |                 |            |
| e. | Additional resources to help Internationally trained physiotherapists                    |                       |   |   |   |                 |            |
| f. | Information on how to select and work with a supervisor while under provisional practice |                       |   |   |   |                 |            |

SECTION D: COMMUNICATIONS

18. What is your preferred way to contact the College?

|    |                                       |  |
|----|---------------------------------------|--|
| a. | Telephone                             |  |
| b. | Email                                 |  |
| c. | Other: (please <u>specify</u> ) _____ |  |

19. How often do you access the College's website? Check the option that best describes what you usually do.

|    |                       |  |
|----|-----------------------|--|
| a. | Once per week or more |  |
| b. | A few times a month   |  |
| c. | About once a month    |  |
| d. | Once every few months |  |

|    |                                 |  |
|----|---------------------------------|--|
| e. | Less than once every few months |  |
| f. | Never                           |  |

20. On a scale from 1 to 5, where 1 means very dissatisfied and 5 means very satisfied, how SATISFIED are you with the following information that is available on the College of Physiotherapists of Ontario website. If you do not access that information, please select / Do Not Access.

|    |  | Very Dissatisfied |   |   |   | Very Satisfied | I Do Not Access |
|----|--|-------------------|---|---|---|----------------|-----------------|
|    |  | 1                 | 2 | 3 | 4 | 5              | 9               |
| a. | Physiotherapist accountabilities   |                   |   |   |   |                |                 |
| b. | The standards and rules a physiotherapist must follow                              |                   |   |   |   |                |                 |
| c. | Scope of practice  |                   |   |   |   |                |                 |
| d. | The screening interview and on-site assessment process (quality assurance program) |                   |   |   |   |                |                 |
| e. | The registration process and registration categories                               |                   |   |   |   |                |                 |
| f. | The Public Registrar/Find a physiotherapist  |                   |   |   |   |                |                 |
| g. | Annual renewal   |                   |   |   |   |                |                 |
| h. | Fees, <u>billing</u> and business practices  |                   |   |   |   |                |                 |
| i. | Liability insurance  |                   |   |   |   |                |                 |
| j. | Setting up a professional corporation  |                   |   |   |   |                |                 |
| k. | Mandatory and self-reporting requirements  |                   |   |   |   |                |                 |
| l. | The complaint process and discipline hearings                                      |                   |   |   |   |                |                 |
| m. | Working with physiotherapy assistants  |                   |   |   |   |                |                 |

|    |  |  |  |  |  |  |  |
|----|--|--|--|--|--|--|--|
| n. | Supervision requirements                                       |  |  |  |  |  |  |
| o. | COVID-19   |  |  |  |  |  |  |
| p. | PISA – the annual professional issues self assessment exercise |  |  |  |  |  |  |
| q. | Rostering for performing high risk activities                  |  |  |  |  |  |  |
| r. | The Jurisprudence Module                                       |  |  |  |  |  |  |
| s. | Getting involved with the College                              |  |  |  |  |  |  |
| t. | The website overall  |  |  |  |  |  |  |

21. The College website covers a great deal of information. On a scale from 1 to 5, where 1 means not at all interested and 5 means very interested, how INTERESTED are you in the following information that is available on the College of Physiotherapists of Ontario website. If you are not sure, please select / Don't Know.

|    |  | Not at All Interested |   |   |   | Very Interested | Don't Know |
|----|--|-----------------------|---|---|---|-----------------|------------|
|    |  | 1                     | 2 | 3 | 4 | 5               | 9          |
| a. | Physiotherapist accountabilities   |                       |   |   |   |                 |            |
| b. | The standards and rules a physiotherapist must follow                              |                       |   |   |   |                 |            |
| c. | Scope of practice  |                       |   |   |   |                 |            |
| d. | The screening interview and on-site assessment process (quality assurance program) |                       |   |   |   |                 |            |
| e. | The registration process and registration categories                               |                       |   |   |   |                 |            |
| f. | The Public Registrar/Find a physiotherapist  |                       |   |   |   |                 |            |
| g. | Annual renewal   |                       |   |   |   |                 |            |
| h. | Fees, <u>billing</u> and business practices  |                       |   |   |   |                 |            |
| i. | Liability insurance  |                       |   |   |   |                 |            |

|    |  |  |  |  |  |  |  |  |
|----|--|--|--|--|--|--|--|--|
| j. | Setting up a professional corporation                          |  |  |  |  |  |  |  |
| k. | Mandatory and self-reporting requirements                      |  |  |  |  |  |  |  |
| l. | The complaint process and discipline hearings                  |  |  |  |  |  |  |  |
| m. | Working with physiotherapy assistants                          |  |  |  |  |  |  |  |
| n. | Supervision requirements                                       |  |  |  |  |  |  |  |
| o. | COVID-19   |  |  |  |  |  |  |  |
| p. | PISA – the annual professional issues self assessment exercise |  |  |  |  |  |  |  |
| q. | Rostering for performing high risk activities                  |  |  |  |  |  |  |  |
| r. | The Jurisprudence Module                                       |  |  |  |  |  |  |  |
| s. | Getting involved with the College                              |  |  |  |  |  |  |  |
| t. | The website overall  |  |  |  |  |  |  |  |

22. How often do you read the College's monthly e-newsletter *Perspectives*? Check the option that best describes what you usually do.

|    |   |  |
|----|---|--|
| a. | Every month   |  |
| b. | Most months, but not every month                          |  |
| c. | Some months (six months or more per year)                 |  |
| d. | Rarely (less than six months per year)                    |  |
| e. | Never   |  |
| f. | I am not familiar with the monthly College's e-newsletter |  |

23. How satisfied are you with the College's monthly e-newsletter *Perspectives*?

|    |                    |  |
|----|--------------------|--|
| a. | Very Satisfied     |  |
| b. | Somewhat Satisfied |  |

|    |   |  |
|----|---|--|
| c. | Neither Satisfied <u>Nor</u> Dissatisfied         |  |
| d. | Somewhat Dissatisfied                             |  |
| e. | Very Dissatisfied                                 |  |
| f. | Not Applicable ( <i>programming skip to 15a</i> ) |  |

Please explain why

24. How often do you use the following?

|    | Daily or more often | A few times a week | About once a week | Every few weeks | About once per month | Less than once per month | Never |
|----|---------------------|--------------------|-------------------|-----------------|----------------------|--------------------------|-------|
|    | 1                   | 2                  | 3                 | 4               | 5                    | 6                        | 7     |
| a. | Twitter             |                    |                   |                 |                      |                          |       |
| b. | Facebook            |                    |                   |                 |                      |                          |       |
| c. | YouTube             |                    |                   |                 |                      |                          |       |
| d. | LinkedIn            |                    |                   |                 |                      |                          |       |

25. And how often do you access the following social media to follow or learn about the College?

|    | Daily or more often | A few times a week | About once a week | Every few weeks | About once per month | Less than once per month | Never |
|----|---------------------|--------------------|-------------------|-----------------|----------------------|--------------------------|-------|
|    | 1                   | 2                  | 3                 | 4               | 5                    | 6                        | 7     |
| a. | Twitter             |                    |                   |                 |                      |                          |       |
| b. | Facebook            |                    |                   |                 |                      |                          |       |
| c. | YouTube             |                    |                   |                 |                      |                          |       |
| d. | LinkedIn            |                    |                   |                 |                      |                          |       |

**SECTION E: A FEW FINAL QUESTIONS**

26. Below there is a list of statements about the **College of Physiotherapists of Ontario**. Please indicate if each statement is **TRUE** or **FALSE**. If you do not know, please indicate **don't know**.

|    |  | TRUE | FALSE | DON'T KNOW |
|----|--|------|-------|------------|
|    |  | 1    | 2     | 9          |
| a. | The College of Physiotherapists of Ontario regulates physiotherapists to ensure the ongoing improvement of the practice of physiotherapists and to serve the public interest.  | X    |       |            |
| b. | I must update my information with the College on the PT Portal.  | X    |       |            |
| c. | The Practice Advisory service is available to physiotherapist assistants.  | X    |       |            |
| d. | The Practice Advisory service is confidential.   | X    |       |            |
| e. | Once you are registered with the College, you are registered. There are no further registration requirements.  |      | X     |            |
| f. | The Public Register has a range of different kinds of information, <u>including</u> : Full name and former name (if any), gender, practice addresses, fax and telephone numbers, registration number, languages spoken, and, if it applies, the professional corporation name in which the physiotherapist is a shareholder. | X    |       |            |
| g. | Regulatory Colleges were established by the government to protect the rights of patients and ensure safe, <u>effective</u> and ethical care.   | X    |       |            |
| h. | Regulatory Colleges were established by patient groups to protect their own interests.   |      | X     |            |
| i. | Training is required on an on-going basis.   | X    |       |            |

27. Thank you very much for taking the time to complete this survey. The goal of this survey is for us to better support physiotherapists registered with the College of Physiotherapists of Ontario who were educated outside of Canada. Please share any additional comments, suggestions, ideas of concerns that you think will be helpful to us.

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## Analytics – November 1, 2021 – February 28, 2022

### Collegept.org

*The website is used by all stakeholders including PTs, PT Residents, patients/caregivers, employers, PTAs). The statistics below encompass our website in its entirety including the Public Register/PT Portal.*

*College staff pull monthly statistics related to the website to see how stakeholders are accessing information and interacting with the site. These statistics are used to identify improvements and help inform broader engagement/communication tactics.*

#### General website stats:

**Users:** 160,332 (all site visitors)

**Sessions:** 397,224 (time that a user is on the site)

**Pageviews:** 1,801,114 (number of times one of our pages was loaded in a browser)

**Bounce Rate:** 43.48% (Users who are visiting a single page on the site and doing nothing else before leaving. Average bounce rates are generally 41 to 55%)

**Average Pages/Session:** 4.53 (This includes everything on the website including the Public Register/PT Portal)

**Average Session Duration:** 2:38 minutes

**Majority of web traffic is coming from Canada (77%), followed by India, USA and UK.**

#### Increased traffic associated with the following events:

- College update regarding CAPR's discontinuation of the Clinical Exam
- Perspectives – monthly newsletter

#### Top 5 Content Pages:

*Top content pages change from month to month and are often reflective of current happenings at the College (e.g. PISA, Jurisprudence, Annual Renewal). Top pages can also be influenced by ad spends and other forms of communication like Perspectives or direct emails to stakeholders.*

- Rules and Resources
- What is Physiotherapy
- Patients Landing Page (Google Ads landing page – see stats below)
- Applicants
- Jurisprudence



## **Social Media**

*The College is active on Facebook, Twitter, LinkedIn and YouTube. The posts mentioned below are top posts from Facebook and Twitter where we are most active and post 3 – 5 times per week.*

**Facebook Followers: 2,303    Twitter Followers: 2,263**

### **Social Facebook/Twitter Posts:**

- Exam Exemption Policy Metrics
- Call for Development for Clinical Exam
- Exam Exemption Announcement

## **Advertising**

*The College advertises consistently using a daily budget on Google Analytics. This budget can be adjusted as required. We also advertise on Facebook and LinkedIn as needed.*

### **Google Ads (patient focused):**

112,046 impressions (how many people see the ads)

17,351 clicks (how many people interact with the ad)

15.49% clickthrough rate (average for health & medical is 3.27%)

\$0.13 average cost per click



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

**Motion No.: 4.0**

**Council Meeting  
March 23-24, 2022**

**Agenda # 4: Consent agenda**

It is moved by

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and seconded by

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that:

1. The Council meeting minutes of December 15-16, 2021, and February 2, 2022, be approved
2. The Executive Committee minutes of November 22, 2021, December 6, 2021, January 14, 2022, January 20, 2022, January 24, 2022, and January 27, 2022, be accepted.
3. The Committee Reports for October – December 2021 be accepted.

## **Agenda # 4**

### Consent Agenda

- Draft Council meeting minutes (Dec 15-16, 2021; February 2, 2022)
  - Executive Committee minutes
  - Committee Reports



**MEETING OF THE COUNCIL OF THE COLLEGE OF  
PHYSIOTHERAPISTS OF ONTARIO**

**MINUTES**

**December 15-16, 2021**

College Boardroom & Virtually via Zoom

**In Person attendees:**

Theresa Stevens, President  
Jennifer Clifford, Vice-President  
Hervé Cavanagh, PT  
Anna Grunin, PT  
Nitin Madhvani, Public

**Guests:**

Richard Steinecke, SML  
Gary Rehan, CAPR Board Rep

**Zoom attendees:**

Sharon Gabison, PT  
Janet Law, PT  
Katie Schulz, PT  
Dennis Ng, PT  
Paul Parikh, PT  
Karen St. Jacques, PT  
Carole Baxter, Public  
Myles MacLeod, Public  
Richard O'Brien, Public  
Tyrone Skanes, Public  
Jesse Finn, Public

**Staff**

Rod Hamilton, Registrar  
Anita, Ashton, Deputy Registrar  
Justin Rafton  
Zoe Robinson

**Recorder:**

Barbara Hou  
Justin Rafton

**December 15, 2021**

**1:30 PM. Welcome**

The President welcomed all members and opened the meeting with the College's Land Acknowledgement Statement

**1.0 Motion Approval of the Agenda**

It was moved by N. Madhvani and seconded by H. Cavanagh that:

the agenda be accepted as presented with the possibility for changes to the order of items to address time constraints.

**CARRIED.**

**2.0 Canadian Alliance of Physiotherapy Regulators (CAPR) update**

G. Rehan, the College's CAPR Board representative provided Council with an organizational update. Council was informed that CAPR did not have plans to offer virtual clinical exams in the immediate future. In addition, CAPR had made the request to all of its member regulators for a loan of 1.4 million dollars in order to ensure continued viability and provision of services. G. Rehan then answered Council's queries specifically relating to CAPR's financial assistance request.

**3.0 Motion Motion to go In-Camera pursuant to Section 7(2)(b) of the Health Professions Procedural Code**

It was moved by D. Ng and seconded by T. Skanes that:

Council move in camera pursuant to section 7(2)(e) of the Health Professions Procedural Code for discussion of financial matters and personal matters of



such a nature that the harm created by the disclosure would outweigh the desirability of adhering to the principle that meetings be open to the public.

**CARRIED.**

It was moved by N. Madhvani that the Council meeting be recessed for the day ending at 4:07 pm.

**CARRIED.**

9:00 am.

**December 16, 2021**

The meeting was called to order and resumed by the President

#### **4.0 CAPR Membership and Contingency planning**

**Motion** H. Cavanagh declared a conflict of interest and exited the meeting.

CAPR is the provider of credentialing, written, and clinical examination services for all provincial physiotherapy regulators in Canada.

As a member regulator, the College received a request from CAPR to provide financial assistance in order to support its continued operations. The COVID pandemic and ongoing public health restrictions have had a significant impact on CAPR's ability to administer the clinical exam, cancelling all in-person exams in 2020 before multiple failed attempts to administer virtual exams in 2021.

The Executive Committee recommended that Council agree to pay its 2022 CAPR membership fee and registrant levy only. Staff would also be directed to begin exploring the delivery of credentialing and examination services. This was intended as a risk mitigation strategy in the event that CAPR was unable to continue to provide such services to the College.

Council deliberated CAPR's request and proposed approach. Council agreed in providing financial support through payment of its membership fee and levy.

It was moved by K. St. Jacques and S. Gabison that Council:

- Agree to pay the CAPR membership fee and per registrant levy, and ask for a guarantee that CAPR will continue to provide evaluation services (credentialing and written examinations);
- Direct staff to immediately begin exploring the delivery of credentialing and exam services by the College as an alternative, and bring forward a plan by March Council meeting, and
- Release the resources necessary for staff to do this work.

**CARRIED.**

H. Cavanagh returned to the meeting.

#### **5.0 Short-Term Alternative Examination Options**

Council discussed and considered potential alternatives to the CAPR clinical exam in the short term to work through the backlog of candidates waiting to take the clinical exam. The Executive Committee recommended two options for Council's consideration: approval of the University of Sherbrooke exam as



an alternative and commencing work to develop a clinical exam based on elements of the Quality Assurance Program.

**Motion University of Sherbrooke Exam**

**5.1** Council discussed the final examination available through the University of Sherbrooke. The examination could be made available for French speakers only.

It was moved by J. Clifford and seconded by T. Skanes that:

Council approves the University of Sherbrooke Final Comprehensive exam as an approved exam for registration in independent practice. **CARRIED.**  
N. Madhvani joined the meeting at 10:50 am.

**Motion Alternative Entry to Practice Assessment**

**5.2** In October, Council considered an option to designate the current Quality Assurance (QA) program as an exam for the purpose of registration in independent practice. Assessment consultant Leanne Worsfold was invited to the meeting and provided Council with a comprehensive presentation on exam development of an alternative clinical exam using elements of the QA program. Council further discussed the potential proposal and asked questions of the consultant.

It was moved by A. Grunin and seconded by J. Finn that:

Council approves the operational work and funding requirements to establish a clinical exam based on elements of the QA program. **CARRIED.**

**Motion 6.0 Canadian Institute of Health Information (CIHI) Data Sharing**

CIHI plays an important role in the collection, compilation and distribution on health human resource data that is used to plan and make improvements in health care, health system performance and population health across Canada. This is provided while ensuring privacy protection of registrants and ensuring confidentiality.

R. Hamilton provided Council with an updated agreement provided by CIHI for Council approval. It was noted that the proposed renewal of the College's agreement with CIHI would now continue in perpetuity and included an update to CIHI's Information Quality Framework approach.

It was moved by N. Madhvani and seconded by K. Schulz that:

Council approves the contract renewal of the CIHI data sharing agreement. **CARRIED.**

**7.0 Presidents Report**

T. Stevens, President provided an update on the following:

- Completion of councillors 1 on 1 check-in;
- Council meeting evaluation results;
  - A high-level overview of post council survey results was provided.



- External stakeholder discussions.
  - Outreach sessions with Ontario Physiotherapy Association (OPA);
  - CAPR leadership on the administration of future clinical exams;
  - Consultant Leanne Worsfold regarding alternative exam; development; and
  - Consultation with legal counsel and psychometrician on exam alternative.

M. MacLeod left the meeting at 11:50 am

#### **8.0 Investment Overview- RBC Dominion Securities**

Bill Quinn, Investment advisor provided Council with a long-term strategy overview of the College's current investment amidst the public health crisis.

#### **9.0 Registrars Report**

R. Hamilton provided an update on the following:

- Equity, Diversity, and Inclusion (EDI) College Initiatives update;
  - Internal staff workgroup created to lead internal initiatives and a staff survey;
  - Dedicated College webpage on EDI; and
  - Evaluated research on registrants' needs outside of Canada
- Operations update;
  - Melissa Collimore, Registration Manager is going on parental leave, and Melanie Liu has joined the staff to assist in the transition;
  - Elicia Persaud and Joyce Huang returned from parental leave, working in Governance and Strategic planning initiatives; and
  - New investigator Sara Mask joined the Professional conduct team.

#### **10.0 Consent Agenda**

**Motion** The consent agenda was brought forward in the materials for review and approval.

The President requested for the Inquiries, Complaints and Reports Committee (ICRC) and Registration Committee reports to be removed for further discussion.

Gary Rehan, ICRC Chair provided a verbal report informing Council that the committee is in good health.

T. Skanes, Chair of the Registration Committee presented to Council highlighting the delayed administration of the clinical exam and the Committee's decision on December 7<sup>th</sup>, 2021, approving an exemption provision in regulation, and resulting policy change.

It was moved T. Skanes and seconded by S. Gabison that:



Council approved the consent agenda including:

- The Council meeting minutes of October 14, 2021, be approved;
- The Q2 Committee Reports be approved.

**CARRIED.**

**11.0 FY 2022 Q2 Financial Management Report**

Z. Robinson, Director of Corporate Services presented on the College's financials summarizing the Statement of Operations at the end of Quarter 2, September 30, 2021.

**12.0 Council Education: Practice Advice**

F. Campbell and M. Catherine-Fraser, Practice Advisors presented on the College's Practice advice service available for the public, registrants, and stakeholders.

**13.0 College Performance Measurement Framework (CPMF) update**

Joyce Huang, Strategic Projects Manager and Justin Rafton, Policy & Governance Manager provided Council with an overview and background on the CPMF, and a review of the ministry's feedback for the Year One (2020) College submission. Some improvement initiatives highlighted for 2021 include Council/committee eligibility module; public interest rationale in briefing notes; publishing Executive Committee meeting minutes and improved remediation tracking with the new QA program.

For the 2021 CPMF, the new focus areas include Diversity, Equity and Inclusion; risk management; and the use of technology and cybersecurity. Staff will be working on compiling data for the College's Year 2 CPMF submission. The proposed submission will be brought back for review at Council's March 2022 meeting.

**14.0 Members' Motion/s**

None

It was moved by N. Madhvani that the Council meeting be adjourned. The meeting was adjourned at 3:30 PM.

**CARRIED.**

**Adjournment**

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Theresa Stevens, President



**SPECIAL MEETING OF THE COUNCIL OF THE COLLEGE OF  
PHYSIOTHERAPISTS OF ONTARIO**

**MINUTES**

**February 2, 2022**

Virtually via Zoom and YouTube

**Attendees:**

Theresa Stevens, President  
Jennifer Clifford, Vice-President  
Anna Grunin, PT  
Janet Law, PT  
Katie Schulz, PT  
Dennis Ng, PT  
Karen St. Jacques, PT joined 12:30 pm  
Carole Baxter, Public

Tyrone Skanes, Public  
Jesse Finn, Public  
Nitin Madhvani, Public  
Richard O'Brien, Public  
**Regrets:**  
Paul Parikh, PT  
Sharon Gabison, PT  
Hervé Cavanagh, PT

**Staff**

Rod Hamilton, Registrar  
Justin Rafton  
Joyce Huang  
**Recorder:**  
Barbara Hou

**February 2, 2022**

**12:00 PM. Welcome**

The President welcomed all members and opened the meeting with the College's Land Acknowledgement Statement.

**1.0 Motion Approval of the Agenda**

It was moved by K. Schulz and seconded by T. Skanes that:

the agenda be accepted as presented with the possibility for changes to the order of items to address time constraints.

**CARRIED.**

**2.0 Motion Consideration for an Emergency Regulation Submission Proposal (Second Provisional Practice Certificate)**

On January 12, 2022, the Canadian Alliance of Physiotherapy Regulators (CAPR) announced the discontinuation of their clinical exam. Under the College's General regulation, applicants who failed the clinical examination in their first attempt prior to the pandemic remain unable to practice or reapply for a Provisional Practice certificate.

To address this ongoing issue, the President informed Council that the College may have the opportunity to submit an emergency amendment to the General Regulation under the *Physiotherapy Act* for urgent consideration to the Ministry of Health. As such, the Executive Committee had directed staff to draft a proposed amendment which was now recommended for Council's approval.



Council discussed the risks and implications of proposing an amendment to the General Regulation at this time and submitting it to the Ministry of Health on an urgent basis. The amendment, if approved, would allow the College to grant a Provisional Practice Certificate to those applicants who have failed the clinical component of the examination on one previous occasion in exceptional circumstances (i.e., exam unavailability).

The proposed amendment to the General Regulation (O. Reg 532/98) under the *Physiotherapy Act* read as follows:

**23 (4.1)** *Subsection (4) does not apply to a person who has failed the practical component of the examination only one time, where there are exceptional circumstances, such as the practical component of the examination is not available for an extended period of time, and the person meets such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee.*

It was moved by T. Skanes and seconded by A. Grunin that:

Council approves a proposed amendment to the General Regulation under the Physiotherapy Act, 1991 for immediate submission to the Ministry of Health on an urgent basis.

**CARRIED.**

### **3.0 Registrars Report**

R. Hamilton provided an update on the proposed Governance Reform and Regulatory Modernization plan from the Ministry of Health. Council was asked to provide feedback as part of the consultation process.

It was moved by K. Schulz that the Council meeting be adjourned. The meeting was adjourned at 12:50pm.

**CARRIED.**

## **Adjournment**

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Theresa Stevens, President



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**November 22, 2021**

Zoom Teleconference & Office Boardroom

**Present:** Theresa Stevens, PT Chair (in person)  
Jennifer Clifford, PT  
Katie Schulz, PT  
Tyrone Skanes, Public  
Nitin Madhvani, Public

**Staff:** Rod Hamilton, Registrar (in person)  
Anita Ashton  
Zoe Robinson  
Justin Rafton  
Evguenia Ermakova

**Recorder:** Barbara Hou

**9:00AM**

**Welcome**

Reminder of confidentiality and conflict of interest

**1.0 Approval of the agenda**

**Motion**

It was moved by J. Clifford and seconded by N. Madhvani that the agenda be approved.

**CARRIED.**

**2.0 Approval of Executive Committee meeting minutes of September 16, 2021**

**Motion**

It was moved by T. Skanes and seconded by K. Schulz that the minutes from September 16, 2021 Executive Committee meeting be approved.

**CARRIED.**

**3.0 Presidents Report**

T. Stevens, President provided an update on the following:

- Canadian Alliance Physiotherapy Regulators (CAPR) request for funding;
- Legal consultation regarding the use of the Quality Assurance tool as an alternative clinical examination for registration;
- Meeting with academic community representatives for potential virtual clinical exam options.

**4.0 Registrars Report**

R. Hamilton, Registrar provided a further elaboration on the following:

- College ongoing project supporting Internationally Educated Physiotherapists
- Meeting with academic community representatives for a potential virtual clinical exam
- Legal consultation regarding the use of the Quality Assurance tool as an alternative clinical examination for registration
- CAPR request for funding



## **5.0 Canadian Alliance of Physiotherapy Regulators (CAPR) Funding Request**

Due to the public health crisis, CAPR has been financially impacted by the cancellation of its in person clinical exams in 2020 and failed attempts in administering virtual exams in 2021. Due to its financial position and to ensure viability, CAPR has requested all member regulators, including the College to provide a loan in order to ensure continuation of its operations. The Executive Committee considered the request, along with the potential options and risks for the College to provide such a loan. Staff were directed to follow up and gather further information, if available. No decision was reached and further discussion was deferred for a future meeting.

## **6.0 Canadian Institute of Health Information (CIHI) Data Sharing Motion**

CIHI plays an important role in the collection, compilation and distribution of health human resource data in Canada. This data is used for government planning purposes and to ensure improvements are made in the delivery of health care. The College's arrangement with CIHI permits system managers to obtain accurate and up to date information on physiotherapy HR resources. This has a direct benefit to the public from a resource planning perspective.

The College's current contract with CIHI expires this year ending Dec 2021. This agreement provides that the College will share registrant information. CIHI has provided an updated contract for the College consideration and approval. The updated proposal was for an agreement in perpetuity, rather than a previous precedent for a 5-year term. In addition, CIHI has modified the Data Quality Framework to that of an Information Quality Framework. The Executive Committee reviewed the information and recommended that the agreement be presented to Council for final approval.

It was moved by N. Madhvani and seconded by J. Clifford that the Executive Committee recommend that Council approve the CIHI data sharing agreement.

**CARRIED.**

## **7.0 College Performance Management Framework (CPMF) update**

In December 2020, the Ministry of Health, in conjunction and consultation with stakeholders, developed and released the CPMF for all regulatory colleges to complete each annual year.

In March 2021, upon Council approval the College submitted the 2020 CPMF Report. In October 2021, the Ministry released a summary report providing an overview of the key findings and areas for improvement at a system level. Justin Rafton, Policy & Governance Manager provided the Committee with a high-level update on the College performance and position related to the framework. Some key areas highlighted for system level improvement included governance modernization, conflict of interest rules and data protection/security. Updated framework for year 2 was anticipated by December 2021.



## 8.0 FY 2022- Q2 Financial Report

The Executive Committee reviewed the Colleges Fiscal Year 2022 Quarter 2 Financial Report. The Executive Committee recommend Council accept the FY 2022 Q2 Financial Report.

### **Adjournment**

The meeting was adjourned at 1:08 pm.

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Theresa Stevens, Chair



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**December 6, 2021**

Zoom Teleconference & Office Boardroom

|                 |                                       |                  |                                     |
|-----------------|---------------------------------------|------------------|-------------------------------------|
| <b>Present:</b> | Theresa Stevens, PT Chair (in person) | <b>Staff:</b>    | Rod Hamilton, Registrar (in person) |
|                 | Jennifer Clifford, PT                 |                  | Anita Ashton                        |
|                 | Katie Schulz, PT                      |                  | Justin Rafton                       |
|                 | Tyrone Skanes, Public                 |                  | Joyce Huang                         |
|                 | Nitin Madhvani, Public                | <b>Recorder:</b> | Barbara Hou                         |

**10:00AM**

**Welcome**

Reminder of confidentiality and conflict of interest

**1.0 Approval of the agenda**  
**Motion**

It was moved by K. Schulz and seconded by T. Skanes that the agenda be approved.

**CARRIED.**

**2.0 Canadian Alliance of Physiotherapy Regulators (CAPR) Membership and Funding Request**  
**Motion**

CAPR is the provider of credentialling, written and clinical examination services for all provincial physiotherapy regulators in Canada. As a member regulator, the College received a request from CAPR to provide financial assistance to support its continued operations. In 2020, the COVID pandemic and corresponding public health measures had a significant impact on CAPR's ability to administer in-person clinical exam. CAPR was further financially impacted by multiple failed attempts at administering virtual exams in 2021.

The Executive Committee discussed various options to provide ongoing support for CAPR's continued operation. The Committee recommended that the College pay its annual membership fee and per registrant levy for 2022, pending CAPR continuing to provide evaluation services (credentialling and examinations). Further, the Committee recommended that staff begin exploring a short-term mitigation strategy for credentialling and examination services.

It was moved by J. Clifford and seconded by K. Schulz that the Executive Committee recommend that Council agree to pay the 2022 CAPR membership fee and per registrant levy only and direct staff to begin exploring the delivery of credentialling and exam services by the College.

**CARRIED.**



**3.0 Short-term Alternative Examination Options**

Due to the ongoing delay and unavailability of a clinical exam, the Executive Committee discussed potential options and alternative paths of registration for Ontario PT residents into independent practice. The focus of the discussion was on short term solutions available to the College.

- **3.1 University of Sherbrooke Final Comprehensive Exam**

The Committee discussed the final examination available through the University of Sherbrooke. The examination could be made available for French speakers only.

**Motion**

It was moved by T. Skanes and seconded by J. Clifford that the Executive Committee recommend that Council approve the University of Sherbrooke Final comprehensive exam as an approved exam for registration in Independent practice.

**CARRIED.**

- **3.2 Alternative Entry to Practice Assessment**

In October, Council considered an option to designate the current Quality Assurance (QA) program as an exam for the purpose of registration in independent practice. The Committee further discussed this option. Staff would need to be directed to undertake further work in order to determine feasibility.

**Amended  
Motion**

It was moved by K. Schulz and seconded by T. Skanes that the Executive Committee recommend that Council approve the operational work and funding requirements to establish a clinical exam based on elements of the Quality Assurance program.

**CARRIED.**

**Adjournment**

The meeting was adjourned at 12:46 pm.

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Theresa Stevens, Chair



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**January 14, 2022**  
Zoom Teleconference

**Present:** Theresa Stevens, PT Chair  
Jennifer Clifford, PT  
Katie Schulz, PT  
Tyrone Skanes, Public  
Nitin Madhvani, Public

**Staff:** Rod Hamilton, Registrar  
Anita Ashton  
Justin Rafton  
Joyce Huang

**Recorder:** Barbara Hou

**10:00 Welcome**

**AM** Reminder of confidentiality and conflict of interest

**1.0 Approval of the agenda**

**Motion** It was moved by K. Schulz and seconded by T. Skanes that the agenda be approved

**CARRIED.**

**2.0 Status of Canadian Alliance of Physiotherapy (CAPR) funding request and membership**

In response to CAPR'S financial assistance request, Council in the Dec 15-16, 2021 meeting agreed to pay the membership fee and per registrant levy but not the requested loan. On Jan 4<sup>th</sup>, the College received a letter from CAPR notifying us that a special meeting of CAPR members has been called and is scheduled for Feb 4 to consider a resolution to terminate the membership of the CPO.

The college responded with a letter on Jan 7<sup>th</sup> reaffirming CPO's desire to continue be a member of CAPR and proposed the use of mediation to help both parties come to a resolution.

The Executive committee discussed the risks and implications of the situation. The Executive Committee directed the Registrar, Rod Hamilton to attend the February 4<sup>th</sup> CAPR Board meeting as the College's representative.

**Adjournment**

The meeting was adjourned at 11:21 am.

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Theresa Stevens, Chair



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**January 20, 2022**  
Zoom Teleconference

|                 |                           |                  |                         |
|-----------------|---------------------------|------------------|-------------------------|
| <b>Present:</b> | Theresa Stevens, PT Chair | <b>Staff:</b>    | Rod Hamilton, Registrar |
|                 | Jennifer Clifford, PT     |                  | Anita Ashton            |
|                 | Katie Schulz, PT          |                  | Justin Rafton           |
|                 | Tyrone Skanes, Public     |                  | Joyce Huang             |
|                 | Nitin Madhvani, Public    | <b>Recorder:</b> | Barbara Hou             |

**Welcome Public Interest, Conflict of interest and Confidentiality**

Theresa Stevens, Chair called the meeting to order at 3:03 pm. Members were asked to declare any conflict of interest; none were declared.

**1.0 Approval of the agenda**

**Motion** It was moved by K. Schulz and seconded by T. Skanes that the agenda be approved. **CARRIED.**

**2.0 Consideration for Emergency Regulation Submission (Second Provisional Practice Certificate)**

On January 12, 2022, the Canadian Alliance of Physiotherapy Regulators (CAPR) announced the discontinuation of the Clinical Component of their Physiotherapy Competency Exam (PCE). As such, the President informed the Executive Committee that the College may have the opportunity to submit an emergency amendment to the General Regulation under the *Physiotherapy* for urgent consideration to the Ministry of Health.

At their October meeting, Council had approved, in principle, amendments to the General Regulation to address the ongoing unavailability of a clinical examination. The changes had just undergone public consultation and would be brought back to Council in March for further consideration. The Registration Committee had initiated an exemption policy that would consider a segment of Provisional Practice Holders for Independent Practice. However, given the discontinuation of the exam, applicants who failed the clinical examination in their first attempt prior to the pandemic remained unable to register.



It was proposed that an interim solution would be to bring forward an emergency amendment to the regulation that would allow for such applicants to reapply and be considered for a second Provisional Practice certificate. The Committee discussed the potential impacts, risks and benefits of submitting an emergency regulation change.

Staff noted the level of detail required for a regulation amendment submission, and that no formal process for such an emergency amendment existed. The Committee directed the Registrar to contact the Ministry of Health for more information on the process.

### **Adjournment**

The meeting was adjourned at 4:15 pm.

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Theresa Stevens, Chair



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**January 24, 2022**  
Zoom Teleconference

|                 |                           |                  |                         |
|-----------------|---------------------------|------------------|-------------------------|
| <b>Present:</b> | Theresa Stevens, PT Chair | <b>Staff:</b>    | Rod Hamilton, Registrar |
|                 | Jennifer Clifford, PT     |                  | Anita Ashton            |
|                 | Katie Schulz, PT          |                  | Justin Rafton           |
|                 | Tyrone Skanes, Public     |                  | Joyce Huang             |
|                 | Nitin Madhvani, Public    | <b>Recorder:</b> | Barbara Hou             |

**Welcome Public Interest, Conflict of interest and Confidentiality**

Theresa Stevens, Chair called the meeting to order at 1:30 pm  
Members were asked to declare any conflict of interest; none were declared.

**1.0 Approval of the agenda**

**Motion**

It was moved by T. Skanes and seconded by J. Clifford that the agenda be approved.

**CARRIED.**

**2.0 Consideration for Emergency Regulation Submission (Second Provisional Practice Certificate)**

Further to the discussion at their January 20 meeting, the President and Committee member provided further information on the process for submitting an emergency regulation. The Registrar also provided an update on the discussions with Ministry staff on how regulation amendments are to be submitted.

The Committee again discussed the matter and recommended that work be commenced to submit a specific emergency regulation amendment which would provide the College with the authority to grant a second Provisional Practice Certificate.

Staff were directed to draft a proposal letter and associated regulation amendment for an emergency submission to the Ministry. The Committee would review the final wording before an official recommendation to Council. A Special meeting of Council would then be called in order to approve the submission.

**Adjournment**

The meeting was adjourned at 2:03 pm.



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

*Theresa Stevens*

Theresa Stevens, Chair



**EXECUTIVE COMMITTEE MEETING  
MINUTES**

**January 27, 2022**  
Zoom Teleconference

|                 |                           |                  |                         |
|-----------------|---------------------------|------------------|-------------------------|
| <b>Present:</b> | Theresa Stevens, PT Chair | <b>Staff:</b>    | Rod Hamilton, Registrar |
|                 | Jennifer Clifford, PT     |                  | Anita Ashton            |
|                 | Katie Schulz, PT          |                  | Justin Rafton           |
|                 | Tyrone Skanes, Public     |                  | Joyce Huang             |
|                 | Nitin Madhvani, Public    | <b>Recorder:</b> | Barbara Hou             |

**Welcome Public Interest, Conflict of interest and Confidentiality**

Theresa Stevens, Chair called the meeting to order at 3:00 pm  
Members were asked to declare any conflict of interest; none were declared.

**1.0 Approval of the agenda**

**Motion**

The President proposed an addition agenda item 3.0 Canadian Alliance of Physiotherapy Regulators (CAPR) update.

It was moved by T. Skanes and seconded by K. Schulz that the agenda be accepted as amended.

**CARRIED.**

**2.0 Consideration for Emergency Regulation Submission (Second Provisional Practice Certificate)**

**Motion**

At the last meeting, staff were directed to draft a proposal for an emergency change to the General Regulation. To address the discontinuation and unavailability of a clinical exam, an amendment had been proposed by the Committee for urgent consideration. The change would provide the College, through the Registration Committee, with the discretion to grant a second provisional Practice Certificate to those applicants who previous failed the clinical exam on one attempt.

It was moved by K. Schulz and seconded by J. Clifford that the Executive Committee recommend that Council approve an amendment to the General Regulation for immediate submission to the Ministry of Health on an urgent basis.

**CARRIED.**

**3.0 Canadian Alliance of Physiotherapy Regulators (CAPR update)**

The President provided the Committee with a brief overview of ongoing discussions with CAPR leadership.



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

### **Adjournment**

The meeting was adjourned at 4:05 pm.

*Theresa Stevens*

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Theresa Stevens, Chair



**Written Consent Resolution of the  
Executive Committee of the College of Physiotherapists of Ontario**

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The undersigned, as the members of the Executive Committee of the College, consent to and adopt in writing the following resolution:

**That Laina Smith be appointed to the Discipline and Fitness to Practise Committees.**

This resolution may be signed by the members of the Executive Committee in as many copies as required, each version of which shall be deemed to be an original. Regardless of the date of signature, the signed document will be deemed to bear the date below. The signed copies of the resolution may be delivered by electronic transmission.

DATED effective the 1st day of March 2022.

|                                   |
|-----------------------------------|
| Theresa Stevens, President        |
| Jennifer Clifford, Vice President |
| Nitin Madhvani                    |
| Tyrone Skanes                     |
| Katie Schulz                      |

## Registration Committee Report

| Committee or Department                                     | Registration Committee   |
|---|--|
| <b>Timeframe:</b>   | October to December 2021   |
| <b>Purpose:</b>   | To provide Council with an overview of College’s communications activities over the past quarter and to highlight areas of opportunity and risk.   |
| <b>The Public Interest:</b>                                 | The College’s Registration Committee considers applications from candidates who do not meet the requirements for licensure and makes applicant specific decisions taking into account public safety.   |
| <b>Meeting Dates (if applicable):</b>                       | <ul style="list-style-type: none"> <li>• November 2, 2021</li> <li>• November 15, 2021</li> <li>• November 22, 2021</li> <li>• December 7, 2021</li> </ul>   |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Registration Committee undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Considered 1 application for an Independent Practice Certificate of Registration</li> <li>• Successful candidates who attempted the September 2021 Virtual Exam were granted an exemption and were eligible to apply for an Independent Practice Certificate of Registration</li> <li>• Approved a policy (Registration Committee Policy for Exempting Provisional Class</li> </ul> |

|                       |   |
|-----------------------|---|
|                       | <p>Registrants [Residents] from the required Clinical Examination) that would allow some individuals who currently hold a Provisional Practice Certificate of Registration to apply for an Independent Practice Certificate of Registration</p> |
| <b>Work Ongoing:</b>  | <p>The Registration Committee continues to work on:</p> <ul style="list-style-type: none"> <li>• The Exemption Policy is to be reviewed by the Committee every 90 days</li> </ul>   |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• There is no clinical exam available at this time</li> </ul>   |

| <b>The Numbers</b>                  |   |
|-------------------------------------|---|
| 1 case considered in this timeframe | The application was approved with Terms, Conditions, and Limitations. Applicant was returning after a leave and had low practice hours. |

## Inquiries, Complaints and Reports Committee (ICRC) Report

| Committee or Department                                     | Inquiries, Complaints and Reports Committee (ICRC)  |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of College’s ICRC activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | The College’s ICRC strives to review concerns about professional misconduct, incapacity and incompetence and decides whether any action should be taken to ensure physiotherapists are able to practice safely and competently.   |
| <b>Meeting Dates (if applicable):</b>                       | <ul style="list-style-type: none"> <li>• October 7, 2021</li> <li>• October 18, 2021</li> <li>• November 5, 2021</li> <li>• November 9, 2021</li> <li>• December 3, 2021</li> <li>• December 9, 2021</li> <li>• December 18, 2021</li> </ul>  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The ICRC undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Met on 7 occasions to work through the backlog of cases.</li> <li>• Ongoing Committee Training: <ul style="list-style-type: none"> <li>○ Session on Interim Orders on November 18, 2021</li> </ul> </li> </ul> |

|                       |   |
|-----------------------|---|
|                       | <ul style="list-style-type: none"> <li>○ Session on Advice and Recommendations and No Action cases on December 3, 2021</li> </ul>   |
| <b>Work Ongoing:</b>  | <p>The ICRC continues to work on:</p> <ul style="list-style-type: none"> <li>● Backlog of cases</li> <li>● Committee policy work</li> </ul>   |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>● Increased volume in inquiries and complaints from the public</li> <li>● Increase of caseload. Over 130 open cases at the end of December with 23 that are over a year old. A new investigator was hired in December. Additional Committee meetings were held to help in reducing the backlog</li> <li>● Increase in the number of referrals to Discipline may have an impact on the Hearings Office.</li> <li>● Committee would like the supervision of PTA standard to be reviewed — given the number of concerns</li> </ul> |
| <b>Common Themes:</b> | <ul style="list-style-type: none"> <li>● Significant increase in high-risk cases, including sexual abuse and boundaries</li> <li>● Increased concerns of patients being left in treatment rooms without the ability to signal distress</li> <li>● Communication, boundaries, unprofessional language, and use of social media as a form of communication with patients</li> <li>● Providing and billing for group exercise classes as physiotherapy</li> </ul>  |

| Number of   |     |
|---|-----|
| Appointment of Investigators (75a and 75c) investigations               | 14  |
| Number of open Intake files on the date the report was prepared (Feb 8) | 79  |
| Number of cases being investigated (Feb 8)                              | 148 |
| Cases reviewed  | 64  |
| Referrals to Discipline   | 5   |
| Caution   | 1   |
| SCERP and Caution   | 2   |
| SCERP, Caution and A&U  | 1   |
| Undertakings  | 3   |
| Caution and Undertaking   | 1   |
| Advice and Recommendations  | 7   |
| No Action   | 11  |

## Quality Assurance Report

| Committee or Department                                     | Quality Assurance Committee   |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of Quality Assurance Committee activities over the past quarter and to highlight areas of opportunity and risk.   |
| <b>The Public Interest:</b>                                 | The College's QA Committee reviews reports about a physiotherapist's practice following an assessment and screening interview. The Committee identifies gaps in the PT's practice and prescribes a learning plan to address the gaps.             |
| <b>Meeting Dates (if applicable):</b>                       | <ul style="list-style-type: none"> <li>• October 21, 2021</li> <li>• December 2, 2021</li> </ul>  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <ul style="list-style-type: none"> <li>• Review of nine cases resulting in four proposed SCERPs</li> <li>• Received training about remediation options</li> <li>• Review QA Program Statistics</li> </ul>   |
| <b>Work Ongoing:</b>  | <p>The QA Committee continues to work on:</p> <ul style="list-style-type: none"> <li>• Monitoring the program statistics</li> <li>• Reviewing and approving program policies, as needed</li> <li>• Monitoring assessments that require</li> </ul> |

|                       |   |
|-----------------------|---|
|                       | accommodations due to Covid-19  |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• Availability of assessors to conduct screening interviews and assessments</li> <li>• Low response to posting for new assessor roles</li> <li>• A complaint was received about an assessor and this person will not be assigned screening interviews until the case has been decided.</li> <li>• Exemption policy for PT Residents announced in December may impact the ability of the QA Program to reach the screening interview target of 718 screening interviews by March 31, 2022</li> </ul> |

| <b>Number of</b>   |     |
|--|-----|
| Screening Interviews completed in Q2                           | 219 |
| Assessments completed in Q2                                    | 2   |
| Number of cases considered by the committee in Q2              | 9   |
| Number of cases closed by the Committee with no further action | 2   |
| Number of cases closed with advice and recommendations         | 3   |
| Number of proposed SCERPS                                      | 4   |

## Executive Committee Report

| Committee or Department                                     | Executive Committee   |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of the College's Executive committee activities over the past quarter and to highlight areas of opportunity and risk.   |
| <b>The Public Interest:</b>                                 | The College's Executive Committee is designated by Council to serve as the College's Governance Review Committee. The Executive Committee helps Council accomplish its work in the most efficient way by promoting governance excellence that is grounded in the public interest.   |
| <b>Meeting Dates (if applicable):</b>                       | November 22, 2021<br>December 6, 2021   |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Committee undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Reviewed the Fiscal Year 2022 Q2 Financial Report;</li> <li>• Proposed Canadian Institute of Health Information (CIHI) Data Sharing Contract renewal to Council;</li> <li>• As a short-term alternative examination option- proposed the Final Comprehensive Exam from</li> </ul> |



|                       |  |
|-----------------------|--|
|                       | <p>the University of Sherbrooke as an approved clinical exam for registration in independent practice;</p> <ul style="list-style-type: none"><li>• As a short-term alternative examination option-proposed an Alternative Entry to Practice Assessment (building a Clinical exam based on elements of the Quality Assurance Program) to Council</li></ul>    |
| <b>Work Ongoing:</b>  | <p>The Committee continues to work on:</p> <ul style="list-style-type: none"><li>• Addressing the Canadian Alliance of Physiotherapy Regulators (CAPR) clinical exam delay and cancellation issue</li><li>• CAPR Membership and Funding request</li><li>• Exploration of short-term mitigation strategy for credentialing and examination services</li></ul> |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"><li>• Clinical examination delay and cancellation</li><li>• College Membership and CAPR Funding request</li></ul>   |

## Finance Committee Report

| Committee or Department                                     | Finance Committee   |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of the College’s financial activities over the past quarter and to highlight areas of opportunity and risk.   |
| <b>The Public Interest:</b>                                 | The College’s Finance Committee strives to ensure the CPO’s finances are managed to enable the College to achieve its regulatory requirements.  |
| <b>Meeting Dates (if applicable):</b>                       | November 11, 2021   |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Finance Committee undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Review of Q2 Financial Management report</li> <li>• Financial model for Office space lease</li> <li>• Review of CPO Investments</li> <li>• Review of Reserve Policy</li> <li>• Funding solutions for the Clinical exam</li> </ul> |
| <b>Work Ongoing:</b>  | <p>The Finance committee continues to work on:</p> <ul style="list-style-type: none"> <li>• Preparation of the Fiscal Year 2022-2023 Budget</li> </ul>  |



**Areas of Risk:**

The following areas are being monitored and considered potential organizational risk:

- Impact of CPO managing the clinical assessment
- Impact of CAPR's ability to provide credentialing and written exam services
- Delay in registrants applying and receiving their Independent Practice Certificate

## Patient Relations Committee Report

| Committee or Department                                     | Patient Relations Committee  |
|---|--|
| <b>Timeframe:</b>   | October to December 2021   |
| <b>Purpose:</b>   | To provide Council with an overview of College’s Patient Relations Committee activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | <p>The College’s Patient Relations Committee oversees the Patient Relations Program which is intended to enhance relationships between registrants and patients. The program must have measures for preventing and dealing with sexual abuse of patients through education, standards and guidelines, training of staff and providing information to the public.</p> <p>The Committee also considers applications for funding for therapy and counseling</p> |
| <b>Meeting Dates (if applicable):</b>                       | <ul style="list-style-type: none"> <li>• October 20, 2021</li> <li>• December 20, 2021</li> </ul>  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Patient Relations Committee undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Approved one request for funding for therapy and counselling</li> <li>• Considered and provided direction for a policy regarding defining “therapy” for the purpose of funding for therapy and counseling</li> </ul>   |

|                              |  |
|------------------------------|--|
| <p><b>Work Ongoing:</b></p>  | <ul style="list-style-type: none"> <li>• The Committee continues to consider applications for funding for therapy and counseling.</li> <li>• Committee will be meeting in the new year to start to work on some program-specific initiatives. This work is being supported by Lisa Pretty, Communications Director and Mary-Catherine Saxena Fraser, Practice Advisor</li> </ul> |
| <p><b>Areas of Risk:</b></p> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• None were identified this quarter</li> </ul>   |

| <p><b>Number of applications/requests approved at the committee level</b></p> | <p><b>Number of applications approved at the staff level</b></p> | <p><b>Number of recipients of funding for therapy and counselling (as of December 31, 2021)</b></p> |
|---|--|---|
| <p>1</p>  | <p>2</p>   | <p>10</p>   |

## Discipline & Fitness to Practise Committee Reports

| Committee or Department                                     | Discipline & Fitness to Practise  |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of College’s Discipline and Fitness to Practice Committee activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | <p>The Discipline Committee is the statutory Committee that holds public hearings and considers serious allegations about physiotherapists’ practice, conduct or competence.</p> <p>Members of the Discipline Committee are also members of the Fitness to Practise Committee. Fitness to practise hearings are focused on a physiotherapist’s health condition where the condition is affecting their ability to practice the profession safely.</p> |
| <b>Meeting Dates (if applicable):</b>                       | No hearings were scheduled during this quarter  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Discipline &amp; Fitness to Practise Committee:</p> <ul style="list-style-type: none"> <li>• Participated in their third lawyer-led discipline training session of the year</li> <li>• A core group of committee members who have been identified as decision writers attended an</li> </ul>   |

|                       |   |
|-----------------------|---|
|                       | <p>HPRO reasons writing workshop</p> <ul style="list-style-type: none"> <li>• Discipline Committee newsletter covering the key concept of contested hearings was distributed</li> </ul>   |
| <b>Work Ongoing:</b>  | <p>The Discipline &amp; Fitness to Practice Committee continues to:</p> <ul style="list-style-type: none"> <li>• Hear uncontested discipline hearings remotely via Zoom</li> <li>• Engage in ongoing training</li> <li>• Make HPRO education sessions available for new Committee members</li> </ul>  |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• Committee members are unable to sit consecutive days. This is having an impact on scheduling for contested hearings</li> <li>• Two out of four public members sit on the Inquiries, Complaints and Reports Committee, the other has sat on this committee within the last year. This makes it difficult to be able to appoint panels (which require two public members).</li> </ul> |

| <b>Number of</b>  |    |
|---|----|
| Discipline hearings pending at the time the report was prepared | 13 |
| Fitness to Practise Hearings pending                            | 0  |
| Discipline Hearings completed                                   | 0  |



|                              |   |
|------------------------------|---|
| Pre-Hearing Conferences held | 0 |
| Uncontested Hearings held    | 0 |
| Contested Hearings held      | 0 |
| Hearing Days                 | 0 |
| Decisions Released           | 0 |
| Appeals                      | 0 |

## Compliance Monitoring Report

| <b>Committee or Department</b>                              | <b>Compliance Monitoring</b>   |
|---|--|
| <b>Timeframe:</b>   | October to December 2021   |
| <b>Purpose:</b>   | To provide Council with an overview of College’s Compliance Monitoring activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | The Compliance Monitoring team assists physiotherapists who have been required or directed to complete remedial activities to address concerns about their practice or conduct. The team works to ensure that physiotherapists and coaches receive the support that they require.  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>Compliance Monitoring:</p> <ul style="list-style-type: none"> <li>• Added four new Practice Enhancement Coaches to the coaching pool</li> <li>• Developed an education and training program framework for Practice Enhancement Coaches. The first of six coaching sessions took place in January 2022</li> <li>• Coaches newsletter distributed in November</li> <li>• Implemented a clinical reasoning framework to assist coaches with discussing the examination, interpretation and implementation of treatment strategies with PTs.</li> </ul> |

|                              |  |
|------------------------------|--|
| <p><b>Work Ongoing:</b></p>  | <p>The Compliance Monitoring department continues to:</p> <ul style="list-style-type: none"> <li>• Support coaches with the coaching programs</li> <li>• Recruit new practice enhancement coaches to ensure there is a diverse roster: gender, practice settings, and ethnic diversity</li> <li>• Develop new templates and resources as needs arise or are anticipated</li> <li>• Review and develop Standard Operating Procedures</li> </ul> |
| <p><b>Areas of Risk:</b></p> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• None were identified this quarter</li> </ul>   |

| <p><b>The Numbers</b></p>                                |    |
|--|----|
| Total number of files in Compliance Monitoring           | 43 |
| New Quality Assurance Compliance Monitoring Files Opened | 0  |
| Quality Assurance Compliance Monitoring Files Closed     | 1  |
| New ICRC Compliance Monitoring Files Opened              | 5  |
| ICRC Monitoring Files Closed                             | 1  |
| New Registration Compliance Monitoring Files Opened      | 3  |
| Registration Compliance Monitoring Files Closed          | 2  |
| New Discipline Compliance Monitoring Files Opened        | 0  |
| Discipline Compliance Monitoring Files Closed            | 2  |
| New Registrar's Inquiry Compliance Monitoring Opened     | 0  |
| Registrar's Inquiry Compliance Monitoring Files Closed   | 0  |

## Practice Advice Report

| Committee or Department                                     | Practice Advice Service   |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide the Council with an overview of the College’s Practice Advice service and its activities over the past quarter and to highlight areas of opportunity and risk.   |
| <b>The Public Interest:</b>                                 | The College’s Practice Advice service is a non-statutory program and service provided by the College. Stakeholders accessing the service include PTs, the public, students, insurers, academics etc. to learn about the application of the College Standards and rules. The Advisors support stakeholders by responding to live calls, emails, and telephone. The service is free and confidential.   |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Practice Advice service undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Answered approximately 2,000 calls or emails.</li> <li>• In 2021, the College initiated a review of its Practice Advisory Service in order to assess opportunities to redefine or improve the service. To date we have surveyed 45 health and non health regulators nationally and internationally. We also received feedback from over 500 users of the service to learn more about their ongoing needs. We are</li> </ul> |

|                              |   |
|------------------------------|---|
|                              | <p>currently reviewing the data and will be issuing a final report in April / May 2022</p> <p>Educational Outreach</p> <ul style="list-style-type: none"> <li>• Prepared and presented 1 hour Webinar to registrants regarding Top Practice Advice Questions</li> <li>• Presented a 1 hour Business Practice presentation to U of T students around maintaining professional boundaries.</li> <li>• Presentation to 1<sup>st</sup> year McMaster, UWO, Queens and UofO students on role of CPO (College of Physiotherapists of Ontario)</li> <li>• Presentation to Bridging Program on role of CPO</li> <li>• Presentation to Niagara College PTA (physiotherapist assistant) program on role of college</li> </ul> <p>Advisors support other areas of the College, Compliance Monitoring, Patient Relations Committee.</p> <p>Practice Advice Review</p> |
| <p><b>Work Ongoing:</b></p>  | <p>Evaluation of Practice Advice service</p>  |
| <p><b>Areas of Risk:</b></p> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ol style="list-style-type: none"> <li>1. Providing advice / information to callers who does not identify that they have an ongoing case/complaint with the CPO</li> <li>2. Ensuring callers understand that we do not provide legal advice</li> </ol>   |

## Policy, Strategy & Governance

| Department  | Policy, Strategy & Governance  |
|---|--|
| <b>Timeframe:</b>   | October – December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of College’s policy, strategy and governance activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | The College’s Policy & Governance teams strive to ensure our policy research, development and review, and governance practices promote and address areas such as equity, equality, accessibility, protection, accountability, and foster quality care.   |
| <b>Meeting Dates (if applicable):</b>                       | N/A  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Policy &amp; Governance teams undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Equity Diversity &amp; Inclusion Initiatives <ul style="list-style-type: none"> <li>○ Based on the direction of Council, both an Equity, Diversity and Inclusion statement and Land Acknowledgement were developed and presented to Council. Both documents were accepted at the October Council meeting and have begun implementation.</li> <li>○ A staff EDI working group has been formed, supported by the Policy Team to address a strategy at an operational level.</li> </ul> </li> </ul> |



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|----------------------|--|
|                      | <ul style="list-style-type: none"><li>● Consent Agenda<ul style="list-style-type: none"><li>○ Aligned with common governance practices, the use of a consent agenda was proposed and approved for trial use to expedite approval of items to ensure meeting efficiency and support discussion times for other items.</li></ul></li><li>● Election/Appointments – Eligibility Modules<ul style="list-style-type: none"><li>○ As part of the changes coming out of the 2022 governance review, Council amended the By-laws to now require registrants seeking election or appointment to complete an eligibility course on the role and mandate of the College.</li><li>○ Staff have developed an e-module to provide this training, which is anticipated to be released alongside the call for nominations in January 2022.</li></ul></li></ul> |
| <b>Work Ongoing:</b> | <p>The Policy and Governance teams continues to work on:</p> <ul style="list-style-type: none"><li>● Entry to Practice Support<ul style="list-style-type: none"><li>○ As directed by Council at their December 2021 meeting, staff have begun work to develop an alternative clinical exam, and to explore the delivery of alternative credentialing and written exam services in order to bring forward a prospective plan by March 2022.</li></ul></li><li>● College Performance Measurement Framework (CPMF)<ul style="list-style-type: none"><li>○ In October 2021, the Ministry released a <a href="#">summary report</a> on initial findings across</li></ul></li></ul>  |



the 26 health colleges.

- The Ministry released the 2021 iteration of the CPMF tool on November 23, 2021. The Ministry continues to update and refine the tool based on the Year 1 feedback and experience. As a result, many of the Standards and Evidence items changed, and all Colleges are required to provide updated information for those Standards and Evidence items. Staff have begun to compile the College's submission ahead of the March 31<sup>st</sup> deadline.
- Professional Standards Review
  - At their June meeting, Council approved a new standard review process, grouping standards by theme. Staff continue the review, including background research, environmental scanning and internal consultation on the first category of 'Business Practice Standards'.
- Ongoing governance support
  - The governance team continues to provide support to Council to ensure efficient and effective operations. This includes managing Council appointments, supporting Council evaluation processes, and supporting and continually improving Council processes.
- Strategic Planning – Project
  - A consultant has been engaged to lead Council through the development of an updated strategic plan. Staff continue to provide support as the plan begins to be

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|                              | <p>drafted, with an anticipated approval in the first half of 2022.</p> <ul style="list-style-type: none"> <li>• COVID Response           <ul style="list-style-type: none"> <li>○ Providing organizational support on the College’s COVID response, information sharing and registrant/public guidance based off the directives of government and relevant Ministries.</li> </ul> </li> </ul>   |
| <p><b>Areas of Risk:</b></p> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"> <li>• Revisions to the CPMF           <ul style="list-style-type: none"> <li>○ With the changes arising out of the revised framework, the College will need to continue to prioritize such improvement activities, especially under the governance domain.</li> </ul> </li> <li>• Legislative Change           <ul style="list-style-type: none"> <li>○ <a href="#"><u>Advancing Oversight and Planning in Ontario’s Health System 2021</u></a> was passed, which, as part of the changes, created a new authority and governance model for the regulation of Personal Support Workers (PSWs). Given such legislative change, the prioritization of governance modernization within the CPMF and the call for a review of the College governance structures, staff anticipate changes to the health regulatory model and the Regulated Health Professions Act (RHPA).</li> </ul> </li> </ul> |

## Communications Report

| Committee or Department                                     | Communications  |
|---|---|
| <b>Timeframe:</b>   | October to December 2021  |
| <b>Purpose:</b>   | To provide Council with an overview of College’s communications activities over the past quarter and to highlight areas of opportunity and risk.  |
| <b>The Public Interest:</b>                                 | The College strives to ensure our communications promote and address areas such as equity, equality, accessibility, protection, accountability, and foster quality care.  |
| <b>Highlights of Work Undertaken Over the Past Quarter:</b> | <p>The Communications team undertook the following activities:</p> <ul style="list-style-type: none"> <li>• Ongoing messaging and work related to the delay/cancellation of the PCE — Clinical and the introduction of the Registration Committee Exemption Policy</li> <li>• Ongoing work related to COVID communications</li> <li>• Preparation for PISA launch</li> <li>• Preparation for Council Elections — Online Portal Set Up</li> <li>• Internal communications activities</li> <li>• Social media advertising campaigns aimed at patients/caregivers and employers</li> </ul> |
| <b>Work Ongoing:</b>  | <p>The Communications team continues to work on:</p> <ul style="list-style-type: none"> <li>• Managing exam-related communications</li> <li>• Integrating new FAQ functionality to the website</li> </ul>   |



|                       |   |
|-----------------------|---|
|                       | <ul style="list-style-type: none"><li>• Managing online Council Elections</li><li>• Integrating research recommendations related to internationally educated physiotherapist’s experience</li><li>• Creating and sharing regular communications through Perspectives, employer and academic e-newsletters</li><li>• Internal communications activities</li><li>• Webinar and video planning</li></ul> |
| <b>Areas of Risk:</b> | <p>The following areas are being monitored and considered potential organizational risk:</p> <ul style="list-style-type: none"><li>• Social media and public relations related to CAPR, exam alternatives and regulatory reform</li><li>• Online security related to website — increased resources to ensure collegept.org is secure and accessible</li></ul>   |



## **Background about the Canadian Alliance of Physiotherapy Regulators and the College's Registration Process**

### **History**

The Canadian Alliance of Physiotherapy Regulators (CAPR) was established in the mid 1990's by Canadian PT regulators to facilitate common national regulatory policy and evaluation services. It is an Alliance consisting of members, of which we are one.

It serves four main functions:

- national policy development, shared initiatives and information coordination;
- credentialling for internationally educated physiotherapy applicants;
- national written examinations (called the PCE-Written); and
- (until recently) national clinical/practical examinations (called the PCE-Clinical).

CAPR uses an equitable funding model. All member organizations pay the same membership fee (currently \$500 per year), and the same per registrant levy (currently \$21.25 per registrant). By virtue of our size, Ontario contributes the most in dollar terms. Much of the costs of the credentialling, written and clinical examination services are funded by fee for service from the applicants.

CAPR is governed by a Board; each member regulator nominates one Board member, and they each have one vote on the board. CAPR Board members owe a fiduciary duty to CAPR, not to the organization that nominated them and even though the College's current CAPR Board representative is a former Councillor, his legal fiduciary obligation is to CAPR. The CAPR Board meetings are not public, as they are not subject to the same transparency requirements as the College. CAPR has a CEO who is subject to direction from the Board.

### **The Impact of COVID on CAPR**

During the pandemic, CAPR successfully transitioned to a virtual written examination and has continued the credentialling program. These two services continue to be available to candidates, which in turn allow applicants to register into provisional practice in Ontario and across Canada.

However, the COVID pandemic has had a significant impact on CAPR's clinical examinations. Clinical examinations are normally held twice a year in March and November. The last clinical exam was held in November 2019. The March 2020 clinical exam was cancelled due to the pandemic lock down; it was originally re-scheduled to June 2020 but that was cancelled again. The November 2020 exam was also cancelled due to the ongoing lock downs and restrictions on gathering size across Canada.

The CAPR Board decided to pursue the use of a virtual clinical exam for the March 2021 exam. However, the March 2021 exam failed for technological reasons. The Board, with input from the member regulators, decided to try a second virtual clinical exam in September 2021 using a different technology platform. The September 2021 virtual clinical exam did proceed but was determined to be unreliable and was ultimately cancelled.

In September 2021, the CAPR board decided to cancel all future virtual exams. The Board and its staff were exploring the possibility of delivering face-to-face clinical exams in 2022 but new Covid variants were making delivery options uncertain.

Subsequently, in January 2022, CAPR [announced](#) that it is discontinuing the PCE-Clinical exam indefinitely while they pursue an Innovation Agenda. The Innovation Agenda is intended to explore the most effective way to assess entry to practice competencies.

CAPR was impacted financially by the cancellation of the in-person clinical exams in 2020. It was further impacted by the failed attempts at the virtual exams in 2021, which incurred costs including fees which were refunded to the candidates, vendor contract costs, consulting fees and legal costs.

While these significant financial impacts have been managed to some degree by CAPR's use of its reserve and government pandemic supports, CAPR was operating for two years without a significant portion of its normal operating income.

The College corresponded with CAPR throughout this time to offer assistance to CAPR and to explore and consider possible alternative means identified by both parties, which would enable the ability to provide an exam for Ontario candidates.

### **Options the College Previously Considered for Addressing the Unavailability of the Clinical Exam**

The most common types of licenses issued by the College are for Provisional Practice and Independent Practice.<sup>1</sup> Candidates who have successfully passed CAPR's PCE-Written Exam and are registered to take the next available PCE-Clinical exam can apply for a Provisional Practice Certificate (PPC). PPC holders practice as Physiotherapy Residents under the supervision of a College-approved supervisor. Upon successful completion of the PCE-Clinical Exam, applicants can then apply for an Independent Practice Certificate to practice as a physiotherapist.

The requirement to pass both a written and clinical/practical examination in order to register in Independent Practice are set out in the College's [Registration Regulations](#). The Registration Regulations also provide Council the ability to decide upon the examination(s) to be used (the regulation allows the College to either set or approve examinations).

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<sup>1</sup> The College also has a Courtesy registration class which allows applicants to register as physiotherapists in Ontario for a temporary and time limited purpose, such as to teach a course or to participate in a special event.



Changing regulations is not easy to do as it requires government approval. It typically takes up to 3-5 years, and many proposed regulation changes are never passed.

The unavailability of the CAPR PCE-Clinical exam since November 2019 means that there is a cohort of physiotherapists who have passed the written exam, most of whom are in Provisional Practice practicing as PT Residents with supervision, that have no pathway to apply for Independent Practice. This cohort continues to grow as CAPR is continuing to administer the written exam.

For much of 2021, staff with direction from Council explored various options to address the unavailability of the PCE-Clinical exam and its impact on the registration pathway of Provisional Practice Physiotherapy Residents.

As of October 2021, the following options were explored:

- A Request for Proposal (RFP) for the development and administration of an alternative clinical examination;
- The Ontario PT University Programs' proposal to use the Assessment of Clinical Performance (ACP) tool as a clinical examination;
- The administration of a clinical exam, preferably in partnership with other Canadian physiotherapy regulators, that is based on CAPR's existing exam;
- Using an alternative OSCE exam such as those being used in Alberta and British Columbia;
- Using the University of Sherbrooke's end of program cumulative exam, which is offered in French;
- Using the FSBPT entry to practice exam (the FSBPT is the American equivalent of CAPR);
- Working with the Ontario academic community to create an exam for Ontario candidates;
- The Registration Committee explored the ability to exempt individuals from the obligation to attempt and successfully complete the clinical examination as a requirement for an independent practice certificate of registration;
- Using the College's quality assurance program as an alternative to the exam; and
- Proposing changes to the existing registration regulation to allow for alternative pathways to registration under certain circumstances.

Additional background about the above options and analysis of their feasibility, can be found in the materials for the [October 14, 2021](#) Council meeting.

### **Options that the College is Currently Pursuing**

During the October and December 2021 Council meetings, Council enacted the following options to address the ongoing unavailability of the CAPR PCE-Clinical Exam:



- Approved in principle changes to the registration regulation. Following the approval in principle, the changes were circulated to stakeholders for 60 days for comment, as required by statute.
- The University of Sherbrooke agreed to allow Ontario candidates to take their comprehensive exam. Council approved the Sherbrooke exam for the purpose of qualifying for registration in Independent Practice.
- Approved the work and resources necessary to develop an alternative clinical exam based on the behaviour-based interview model similar to the one used in the Quality Assurance Program.

In addition, in December 2021, the Registration Committee also approved a policy to exempt Provisional Practice physiotherapists from the clinical/practical exam requirement to apply for Independent Practice, if they meet specific requirements. The Registration Committee recently decided to expand the eligibility criteria for this policy in February 2022.

|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022                                  |
| <b>Agenda Item #:</b> | 6  |
| <b>Category</b>       | Strategic  |
| <b>Issue:</b>         | Entry to Practice Update<br><i>For Information</i> |
| <b>Submitted by:</b>  | Joyce Huang, Strategic Projects Manager            |

**Issue:**

In December 2021, Council made a number of decisions and directed staff to undertake work in response to the ongoing unavailability of the PCE-Clinical exam. This is a status update on the work items.

**Background:**

For a detailed history and background on CAPR and their role in the College's registration process, please refer to the backgrounder on page 152.

In December 2021, in response to the ongoing unavailability of the CAPR clinical exam, Council made a number of decisions and directed staff to undertake work to address this situation:

- Council approved the University of Sherbrooke final comprehensive exam as an approved exam for registration in independent practice;
- Council approved the operational work and funding requirements to establish a clinical exam based on a behaviour-based interview tool similar to the one used in the QA program;
- Council directed staff to begin exploring the delivery of credentialling and written exam services by the College in the event that these services become unavailable in the future.

Also in December 2021, the Registration Committee considered and approved an exam exemption policy that would allow current holders of a Provisional Practice Certificate to apply for an Independent Practice Certificate if they meet the requirements outlined in the policy. The eligibility criteria were expanded in February 2022.

The current status of these activities are as follows.

## Status Updates

### 1. *Sherbrooke Exam*

The College communicated the availability of the Sherbrooke Exam to perspective candidates in January 2022. To date, six candidates have expressed their interest in taking the Sherbrooke Exam. Interested candidates can register for the exam through Sherbrooke University, the deadline for registration was February 18, 2022.

The exam will be held in-person on April 21 and 22, 2022. Once the results of the exam are released, candidates who were successful will be eligible to apply for an Independent Practice Certificate. For candidates who were unsuccessful, their Provisional Practice Certificate will expire two weeks after the results are known to the College.

### 2. *Development of an alternative clinical exam*

Updates on this work is available in the briefing specific to this topic.

### 3. *Developing contingency plans for delivery of credentialing and written exam services*

Staff have completed the initial exploration to gather information and develop contingency plans for the delivery of credentialing and written exam services, should those services become unavailable in the future. Below is a high-level summary of what we learned.

#### *Credentialing*

Staff corresponded with existing vendors who provide credentialing services, as well as other regulators who manage their own credentialing services, to gather information about the operational requirements and costs associated with offering and managing credentialing services. This initial exploration is complete.

Based on information that we learned, the high-level requirements to set up a credentialing program would involve:

- Hiring a consultant to create an international physiotherapy program database/directory and mapping the programs and courses to the Canadian Essential Competencies for Physiotherapists;
- Recruiting and training staff to manage the administration of the program;
- Developing policies and procedures;
- Creating candidate materials in both official languages;
- Setting up the necessary IT infrastructure to help manage the candidates and the process; and
- Establishing a Credentialing Committee to review files and appeals on an ongoing basis.

The initial setup is estimated to take 9-12 months to complete and require an initial setup cost of approximately \$450,000.

#### *Written exam*

Staff engaged with a consultant who specializes in competency assessment design and development to identify a high-level plan for the College to develop a written exam to assess entry-to-practice competency if required. The consultant's recommended plan is based on a model where the College will provide oversight while external providers complete the work to develop and administer the exam.

The high-level steps to set up a written exam program includes:

- Hiring a project manager to oversee the work for the College, and consultants to do the development work;
- Establishing an exam blueprint based on the Essential Competencies Profile;
- Developing and translating exam questions and creating an exam form (required each time the exam is administered);
- Establishing an exam cut score (once established the cut score needs to be continually re-calibrated based on exam data);
- Setting up the necessary IT infrastructure to deliver the exam; and
- Establishing an Exam Committee to provide ongoing oversight of the exam and make decisions regarding blueprint, cut score, appeals, etc.

The initial setup is estimated to take 10-12 months to complete and require an initial setup cost of approximately \$282,000.

#### *4. Registration Committee Exemption Policy*

On December 7, 2021, the Registration Committee approved a policy that will allow some individuals who currently hold a Provisional Practice Certificate of Registration to apply for an Independent Practice Certificate of Registration. Applicants need to meet a number of [requirements](#) in order to qualify for this exemption.

The College began accepting applications under this new policy in January 2022. At the time of this writing, we have received 319 applications. Of those, 219 applicants have been granted an Independent Practice Certificate, and 100 applications are in progress.

On February 23, 2022, the Registration Committee made a decision to [expand the eligibility criteria](#) under this exemption policy. We anticipate that an additional 200-250 individuals could qualify under this expanded policy. The College made this information available to applicants on March 7, 2022 and

began accepting applications from newly-eligible Provisional Practice Certificate holders on March 14, 2022.

In addition to the Registration Team staff, staff from other teams in the College have been seconded to support the processing of the exemption policy applications to respond to the increased volume of work and best efforts are being made to ensure the College can still meet our usual processing timelines. Additional staff are being hired to support the registration team and the QA team which is overseeing the administration of the Screening Interviews.

**Public Interest Assessment:**

- *Protection:* Ensuring that the College has a robust entry to practice process is a critical step in ensuring that only qualified applicants are registered as physiotherapists, which ensures that the profession delivers safe, competent and ethical care to patients.
- *Quality Care:* Ensuring that applicants meet entry-level competency requirements help to ensure that care provided by physiotherapists are of high quality and meets the standard of care.

**Decision Sought:**

None, this item is for information only.

**Related Action Items:**

None.

|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022  |
| <b>Agenda Item #:</b> | 7  |
| <b>Category:</b>      | Strategic/Policy   |
| <b>Issue:</b>         | College's General Regulation Amendment Proposal – Consultation Review            |
| <b>Submitted by:</b>  | Justin Rafton, Manager, Policy & Governance<br>Evguenia Ermakova, Policy Analyst |

## Issue:

At their October meeting, Council approved in principle preliminary revisions to registration requirements under the College's General Regulation. The changes were initially proposed as part of a multi-pronged approach to address the ongoing unavailability of the clinical examination. As required by legislation, these changes were then circulated to members and stakeholders for feedback.

Executive Committee considered the feedback and recommends that, given the consultation response and ongoing alternative examination work, staff be directed to conduct a fulsome analysis and review of the General Regulation and return with a revised proposal for Council's consideration.

## Background:

Since the mid-1990s, the College's Physiotherapy Competency Examination (PCE) has been administered by a national PT regulatory agency, the Canadian Alliance of Physiotherapy Regulators (CAPR). The COVID pandemic has had a significant impact on CAPR's clinical/practical examinations, which are now discontinued indefinitely. For a detailed history and background on CAPR, the impact of COVID on their services, and their role in the College's registration process, please refer to the backgrounder on page 152 of the briefing package.

In response to the ongoing unavailability of a practical examination and public health crisis, the College brought forward a multi-pronged approach to address the matter in both the short and long term. One such option brought forward by legal counsel was to commence an expedited regulatory review of several clauses of the [General Regulation \(O. Reg 532/98\)](#) under the *Physiotherapy Act*.

At their October 14, 2021 meeting, Council approved proposed changes to the Regulation, specifically relating to registration processes. The changes proposed would apply specifically in exceptional circumstances, such as in a public health crisis or when an examination was unavailable to applicants. In accordance with section 95(1.5) of the Health Professions Procedural Code, the proposal needed to then be circulated to registrants and stakeholders for at least 60 days.

## The Initial Proposal

The College proposed the following amendments to Part III Registration of the General Regulation under the Physiotherapy Act, 1991.

*In exceptional circumstances:*

### 1. Permit applicant to reapply for Provisional Practice Certificate if unsuccessful on the clinical examination.

To be granted a Provisional Practice Certificate by the College, the applicant must be registered to take the next available clinical examination. If the applicant is then unsuccessful in the clinical examination, the applicant loses their Provisional Practice Certificate and must re-attempt the clinical examination. During this time, the applicant is no longer registered and cannot reapply for a Provisional Certificate. As a result, some applicants who failed the clinical examination prior to the pandemic have been unable to practice as a Resident nor complete a clinical examination.

The proposed amendment would allow the College to grant a Provisional Practice Certificate to those applicants who have failed the clinical component on one previous occasion in exceptional circumstances (i.e. exam unavailability). The applicant could also be subject to additional requirements and/or be subject to terms, conditions, and limitations placed on their certificate by the Registration Committee.

### 2. Permit registration for an Independent Practice Certificate based upon practice hours.

Under the Regulation, successful completion of a clinical examination is currently an exemptible requirement. At the time the proposal was considered, the College's Registration Committee had not passed a policy to exempt the applicant from having to complete the entry to practice examination requirement. Therefore, the original proposal intended to clarify for the Committee in exceptional circumstances when an exemption could be allowed and what alternative tools to be used to assess or confirm competency.

The proposed amendment to the Regulation would define a clear set of rules that apply to the exemption to the clinical exam requirement under defined parameters and only in cases of exceptional circumstances. This exemption would only apply to applicants if they:

- hold a provisional practice certificate;
- have completed at least 1200 clinical practice hours over the previous 12 months;
- have completed at least 600 clinical practice hours over the previous 6 months at the same facility;
- have no concerns raised by their supervisor; and
- have no conduct history internal or external to the College.

Through this exemption, the applicant could also be subject to any additional requirements and/or be subject to terms, conditions, and limitations placed on their certificate by the Registration Committee.

### 3. Create an Emergency Registration Class

The College currently has three classes of registration: Provisional, Independent, and Courtesy. The proposal is to add a fourth class of registration for Emergency Assignment. This class of licensure would apply only under an emergency situation, such as a response to a public health crisis as confirmed by the Government of Ontario. The proposal to add an emergency class is consistent with other Ontario health professions. Comparable examples can be found in related provincial legislation such as the Nursing Act and Pharmacy Act.

An Emergency Practice Certificate would limit the holder to practice for a set time and in a set circumstance/setting. The Emergency Certificate would only be valid for a 60-day period, with the ability for the Registrar to renew if the situation persists.

#### **Registration Committee Policy for Exempting Provisional Practice Registrant from the PCE – Clinical:**

On December 7, 2021, the Registration Committee approved a [policy](#) that allowed some individuals who currently hold a Provisional Practice Certificate of Registration to apply for an Independent Practice Certificate of Registration. Much of the eligibility criteria for such an exemption reflects that which was proposed as part of the regulation amendment, specifically relating to practice hours and locations. Eligible applicants have already begun to be registered through this process.

In February 2022, the Registration Committee considered and [approved the expansion of the eligibility criteria](#) under the policy. The new criteria includes:

- Residents can rely on the practice hours they have accumulated since receiving their Provisional Practice certificate of registration to meet the 1200-hour requirement, rather than just over the last 12 months;
- Residents can apply if they have had at least one College approved Practice Supervisor who has supervised them for at least 600 hours over six months, rather than just their current supervisor;
- Residents and their College approved Practice Supervisor are no longer required to work with the same employer / at the same practice location;
- College approved Practice Supervisors will now be required to submit evidence of supervision to the College when they submit the completed ACP;
- Residents are not eligible to apply under this policy if they have worked at 4 or more practice locations/employers since receiving their Provisional Practice certificate of registration;
- Residents who cannot secure a Letter of Employment from each employer will have the ability to confirm this information through other means; and
- A tentative date for the policy to be revoked has been confirmed for December 31, 2022.

The College policy came into effect on March 7, 2022 and is [posted to the website](#). Application under the expanded criteria has been open to candidates starting March 14, 2022.

### **Emergency Regulation Proposal:**

On January 12, 2022, CAPR [announced](#) the discontinuation of the practical component of the PCE. The College continues to pursue other avenues for assessing applicants' clinical competency. However, it remains that applicants who failed the practical examination before the pandemic have been unable to practice as physiotherapists through provisional practice, nor complete a practical examination in the interim. The current regulation does not allow for the College to even consider registration again under a Provisional Practice Certificate. As directed by Council at their December 2021 meeting, a new entry-to-practice clinical assessment is in development and work is ongoing. But until it is available to applicants, there is no direct pathway for applicants who failed a previous attempt of the clinical examination to get back into physiotherapy practice.

Prior to consideration of the consultation, the President received information that the College may be able to submit an emergency amendment to the Regulation for urgent consideration to deal with those individuals who no longer had a certificate and were unable to practice.

As a result, the Executive Committee considered a specific proposed amendment to the regulation related to those that had previously failed the clinical exam, brought forward in the initial proposal, which would allow the Registration Committee the discretion to grant a second Provisional Practice Certificate to those applicants.

The proposed amendment was as follows:

**23 (4.1)** Subsection (4) does not apply to a person who has failed the practical component of the examination only one time, where there are exceptional circumstances, such as the practical component of the examination is not available for an extended period of time, and the person meets such additional requirements and is subject to such terms, conditions, and limitations as may be specified by a panel of the Registration Committee.

At their February 2, 2022 meeting, Council considered this proposal and approved an emergency regulation amendment submission to the Ministry of Health on an urgent basis. The amendment proposal was submitted to the Ministry on February 4, 2022. The College is still awaiting a formal response from the Ministry as to this request.

### **Consultation:**

The College circulated the initial proposal for at least 60 days, from November 4, 2021, to January 7, 2022. The College received 219 responses from both members and stakeholders. The feedback has been collated and can be found under Appendix 1.

Of the responses collected, overall themes emerge as follows:

| N/219 | %     | Feedback Raised   |
|-------|-------|---|
| 110   | 50%   | Support for the regulation amendments as they are currently written   |
| 81    | 37%   | Need for greater flexibility and/or alternatives around practice hour and clinic placement requirements (Category 2)                              |
| 30    | 13.7% | The amendments should transcend “emergency circumstances” and become permanent, in some cases waiving the practical exam component altogether     |
| 24    | 11%   | Importance of keeping a clinical exam component as a mandatory requirement, but creating a more resilient examination than current                |
| 24    | 11%   | Regulation amendment should be expedited as much as possible  |
| 16    | 7.3%  | The scope and purpose of the Emergency Assignment classification is unclear (Category 3)  |
| 12    | 5.4%  | Provisional Practice license should be retained for those individuals who unsuccessfully challenged the clinical component 2-3 times (Category 1) |
| 7     | 3.2%  | Disagreement with regulation amendment, noting that a resolution should be achieved through other pathways  |
| 6     | 2.7%  | Remove the reference to a “practical examination” in the legislation  |

The College received a notable response rate to this particular consultation request. The majority of respondents were supportive of the College pursuing an initiative to make amendments to the General Regulation. Many respondents also acknowledged that while the amendments are a step in the right directions, there are limitations within the current regulation’s language that signify the need for further review and change. It is important to note that respondents who agreed with the amendments in principle but offered substantial changes to the legislation were not included in the 110-count of general supporters, but rather fell into other feedback themes.

While only a small fraction discouraged the College to consider amendments, many members and stakeholders noted specific issues both with the initial proposed changes, and overall inflexibility embedded throughout the current regulation’s wording and requirements. Amidst the backdrop of the ongoing practical examination delay and now discontinuation by CAPR, the inflexibility of the College’s General Regulation, and specifically the requirements on registration processes, only exacerbated the issue and further restrained the College’s ability to address the matter in a fair, safe, and expeditious manner.

Specific concerns posed by stakeholders, with respect to each of the three elements proposed for change, included:

1. Permit applicant to reapply for Provisional Practice Certificate if unsuccessful on the clinical examination.
  - To limit the ability to reapply for a second provisional practice for only those that had one prior failure was seen as counterinitiative, especially if the applications would first have to

be considered by the Registration Committee and be subject to any terms, conditions, and limitations.

2. Permit registration for an Independent Practice Certificate based upon practice hours.
  - The exemption criteria, specifically around hours of practice and locations were perceived to be overly restrictive and rigid, and didn't consider those in other work settings (i.e. academic/research). This did not seem to align with both the intent for change and the overall language already in the Regulation.
3. Create an Emergency Registration Class
  - The scope and long-term purpose of introducing such a class were unclear. It was also felt to be too short to only grant for a 60-day period.

More broadly, concerns relating to the overall wording and structure of the legislation all highlighted the need for greater flexibility within the registration requirements of the Regulation. Such comments included:

- Planning for exceptional circumstances underscores the need for greater flexibility, and it was noted that legislative rigidity was a large source of the issues at hand. To keep the General Regulation as reflexive as possible, it is important to recognize when specific criteria can be addressed through policy rather than regulation.
- The provisions relating to “additional requirements and terms, conditions, and limitations imposed by the Registration Committee” likewise should not be included in the regulation and may be left to College policy. This inclusion is especially concerning if this requirement is used to make candidates write the clinical exam after the fact.
- The amendments do not provide a sufficient definition of “exceptional circumstances.” The current wording only accounts for one example, which can be restrictive. Stakeholders recommend that the determination of “exceptional circumstances” should be at the discretion of Council and that qualifiers be set out in policy rather than regulation.
- The wording in the legislation should be changed to remove references to the “practical component of the examination” and potentially replaced with “a further examination set by the College.” This change would allow the College not to use the practical examination in any circumstance and ensure that there is flexibility in pivoting to a different criterion to practice entry.

In sum, though the College received significant support for advancing regulation amendments as written, it must be noted that a prominent theme emerging from the feedback was that of **increased flexibility throughout the General Regulation**. Regulation amendments represent long-term, enduring changes, and without regulatory flexibility, barriers may once again be created in the future when a new unforeseen event arises.

## Summary and Next Steps:

The process to enact impactful regulatory change and pursue a key regulation amendment can be a lengthy one. The proposal and submission by the College are but the first step; it may, and usually does, take years from Council approval to consideration by the Ministry, and then ongoing review and potential enactment by the legislature. As such, the development of any such proposal needs to be rigorous, well researched, and comprehensive. The proposal must have a clear purpose, that cannot be addressed through another avenue. The changes must align with the *RHPA* and be shown to be in the public interest.

From an operational perspective, the submission must be able to thoroughly respond and address an extensive list of questions to assure the Ministry and government of the diligence of such a review, and the need and defensibility of such a proposal. Here, the Ministry is looking for research and supporting information to back up the College's proposal and the need for such change. The level of detail and data cannot be understated here; the proposal needs to be fulsome in every aspect.

With that context in mind, we turn to our own potential regulation amendment. The initial expedited proposal was one part of a multi-faceted plan to address the ongoing unavailability of the clinical examination. The specific proposed amendments had not undergone a thorough review or analysis and were intended solely to address a short-term issue (unavailability of a clinical examination) using what is a long-term solution. While developed with the right goal in mind at the time, the consultation alongside initial review by College staff has since flagged certain flaws with the intent and language of key aspects of the proposal or was aimed to address issues that have since been dealt with through other means.

For example, the specificity regarding the exemption for independent practice is quite particular and detailed. This would stipulate the number of hours and practice locations that would allow the Registration Committee to consider an exemption in exceptional circumstances. This level of detail is usually not found within legislation, and stakeholders highlighted that this may be better addressed at a policy level. Furthermore, since this proposal was first brought forward in October 2021, the College's Registration Committee has already passed, and now expanded upon a policy that borrows from the language, but has less more flexible requirements than such an amendment. It could be considered duplicative, as well as rigid to then codify such an approach also into legislation.

Another example is in the College's ability to grant a second Provisional Practice Certificate. With the announcement of CAPR's discontinuation of practical examination services, Council decided to submit that amendment in an emergency fashion. As such, this proposed amendment has now been expedited and already submitted to the Ministry on an urgent basis. It would be prudent to wait and hear from the Ministry on if and how they will proceed with that proposal, and how any such feedback could better inform the proposal as a whole.

To be clear, the College did glean an exceptional amount of feedback and information through this proposed amendment consultation which could assist and best inform our next steps. Membership and stakeholders support the College's effort, highlight the need to address the regulation's shortcomings, and ensure such problems do not arise in the future. However, given both the high-level issues and specific concerns flagged, the further changes that would even need to be made specific to the three aspects of the initial proposal would be substantive enough to require a re-circulation to membership and stakeholders. It is also difficult to ascertain what those changes would be without further analysis of the Regulation as a complete document.

The General Regulation has not been amended since 2012 and the need for a significant review was flagged as early as 2017. The College has the opportunity, amidst ongoing reviews of the entry to practice program and development of its own practical exam, to further analyze the Regulation and consider changes aimed for the future. Specific to the entry to practice program, Council has directed that we look at the system as a whole, and not just focus on a particular aspect such as the examination in their review. As was identified in its 2019 report, the College's consultant Cathexis identified a number of key elements of the program that warranted further study and possible redress through regulatory means. This included provisional practice and supervision, criminal record checks, insurance requirements, good character assessments, and language proficiency. Further work is necessary to assess these elements moving forward, and whether regulatory change is necessary to facilitate such an evolution.

The College found itself in its current situation, in part, based on the rigidity of regulation. Rushing a small list of proposed changes may not meet the College's needs as both a proactive and responsive regulator, align with its strategic direction or adhere to key measures of the CPMF going forward. Through a methodical review, there may be the opportunity to introduce flexibility into the language, incorporate real change, all while preserving the duty to serve and protect the public interest.

In order to support this work, further research and needs analysis to be conducted by staff. As the current operational focus is on the development and implementation of a practical examination, providing staff with time to review the Regulation in full, consider the key themes from the consultation, and contemplate long term plans concerning the entry to practice program and registration including examinations would allow for a more fulsome proposal and well researched and defensible submission. Directing staff in such a way aligns with the initial intent for such a proposal, the support from membership and stakeholders, the strategic priorities of Council, and most importantly, the public interest.

**Decision Sought:**

None, this item is for direction only.

## Related Action Items:

| Action item description  | Required by date |
|--|------------------|
| College staff to conduct a fulsome analysis and review of the General Regulation, considering the consultation review and introducing flexibility where possible while preserving the duty to serve and protect the public interest, and return with a revised proposal for Council's consideration. | To be determined |

## Public Interest Assessment:

The General Regulation amendment allows alternative pathways to practice entry for candidates affected by emergency situations. Removing the bottleneck to registration benefits the interests of the public in ensuring that physiotherapy services are resilient and persist in the event of an extenuating circumstance. However, because a regulation amendment is considered a long-term change, it is important to consider the public interest case in taking additional time to review the proposed changes before submission. The following public interest considerations are particularly important in this recommendation:

- **Equity:** Everyone undergoing the physiotherapy licensure process must be treated with sensitivity and respect. An overarching review and needs analysis of the regulation will help to ensure that the amendments are equitable in that they do not exclude or create barriers to career development for any candidate. This aligns with the College's ongoing work around Equity, Diversity, and Inclusion, with the aim to contribute to a more equitable and inclusive health care system.
- **Equality:** Further review of the amendments will ensure that all candidates affected by the cancellation of the practical PCE have equal opportunities to progress their careers and therefore meet equal regulatory obligations.
- **Accessibility:** Reviewing and modifying the proposed regulation amendment improves public access to physiotherapy services in the long term, as the revision will create flexibility and remove barriers to entry into the profession for a greater number of skilled and qualified physiotherapists.
- **Protection:** Reviewing the proposed amendments in greater detail will ensure all risks are accounted for, protecting the public from harm.
- **Quality of Care:** Bringing forth regulatory changes in an evidence-based and data-driven manner will ensure greater confidence in the quality of care of physiotherapists registered under the proposed amendments.

## Attachments:

1. Member/Stakeholder Consultation Feedback – Collated Table (217 responses)
2. Ontario Fairness Commissioner Consultation Submission – dated January 5, 2022
3. Ontario Physiotherapy Association Consultation Submission – dated January 7, 2022

**Member/Stakeholder Consultation Feedback**  
**November 4, 2021 – January 7, 2022**

| No. | Date      | Feedback Received   |
|-----|-----------|---|
| 1   | 11/4/2021 | I am for the proposed amendments to the general regulation and amendments should be implemented urgently  |
| 2   | 11/4/2021 | I would agree with these amendments.  |
| 3   | 11/4/2021 | The proposed amendments are unfair the college have not given clear instruction to residents. In my case i was away for few months for emergency in family. And also taking time off for exam and could not work as it was hard to manage. Only in last 12 months and last 6 months clinical hours is unfair for people who wanted to prepare for exam and took time off. IT should be total no. of hours since residents got there licence. Due number of exam cancellation Residents have suffered a lot and could not work.  |
| 4   | 11/4/2021 | Hi, Please waive off the clinical exam. Please issue us our independent licenses as soon as possible as we truly deserve it. We are completely safe for the public. We want to practice as completely licensed physiotherapists and do our best. We are well trained, hard-working and have a wealth of experience. Physiotherapy is a completely safe profession and we are essential healthcare professionals. The public here is in dire need of fully licensed physiotherapists at the earliest. Regards.   |
| 5   | 11/5/2021 | I want you to grant provisional license to a who are waiting to give Clinical exam and had failed their previous attempts as those are the one been suffering the most. Rest all candidates can continue with their license till they can give exam. Thank you  |
| 6   | 11/5/2021 | I totally agree and approve as a legitimate pathway to consider resident applicants hours of resident work to allow them to apply for an independent registration.  |
| 7   | 11/5/2021 | I am concerned regarding the "have completed at least 600 clinical practice hours over the previous 6 months at the same facility". It is not uncommon for PT residents to work 2 part time jobs and 600h in the past 6 months in the same facility is 100h/month making it 25h per week. The average work week is 40h and since 25h average per week is at one facility, this may be a difficult requirement to meet, unless resident PT's are encouraged to work more than the average hours which will likely lead to burnout. This is definitely on the correct path, however residents who work more than one job may not meet this requirement. For this reason, perhaps 480h in the past 6 months at the same facility may make more sense? which works out to 20h/week at the facility. |
| 8   | 11/5/2021 | This process needs to be expedited. Thank you for the update however, why are there 2 months for comments to be made. This timeline is too long for residents who are already burnt out. This forces many residents working multiple jobs to work more hours leading to   |

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|    |           | burn out higher than ever. Please expedite this process even more. 2-4 weeks time for review is more than sufficient  |
| 9  | 11/5/2021 | The candidates are waiting since June 2020, already much time has elapsed and clinical virtual exam has not been possible, taking into consideration the amount of time that has lapsed license of independent practice given new rules should be immediately applicable, without further delay.  |
| 10 | 11/5/2021 | Please do this change to allow physio residents who have been practicing over the year to apply for full licensure based on the provided criteria as an alternative to the clinical exam as quickly as possible. Thank you.   |
| 11 | 11/5/2021 | Please do for us, I am waiting for 2 years as a resident PT even though I had more than 10 years practice as registered PT before. Last 2 years, I studied every day to wait the clinical exam and it was cancelled 3 times. For 2 years, I couldn't see my parents because I studied. I couldn't make any plan for my life - postpone my wedding because I was waiting my exam. Please do something for us and help our life be better and move forward. Thanks  |
| 12 | 11/5/2021 | After thorough review of the proposed amendments, I fully support and agree with the changes.<br>My personal experience: I have been practicing here in Canada for over 18 months under the same supervisor and for the same company, I successfully passed the written component 2 years ago in November 2019 and have also worked in Buffalo, NY and was in good standing with the State of New York Board of Professions for 18 months. I work 40-45 hours per week in an outpatient setting and have never had any issues with my supervisor or patients.<br>It is time I get fully licensed here in my home country of Canada and in my home province of Ontario so I can continue to give back (and get appropriately reimbursed) to the community in which I was raised.<br>Thank you for your continued support for all of your colleagues. |
| 13 | 11/6/2021 | As a physiotherapy resident, I believe that the proposed amendments will offer viable, alternative solutions to the crisis that we are facing regarding the continued delay in granting independent licensing of PT residents.  |
| 14 | 11/6/2021 | This seems like an acceptable use of the college's governing capacity and seems fair to all groups.   |
| 15 | 11/6/2021 | The amendments are welcome seeing the current situation and should be implemented right away. These are special times in the history of the profession and require special attention. These new physiotherapists truly want to help patients and should be given a fair choice to do so. The idea of supervision for a resident was designed for this very purpose of keeping safety of the the public in mind and I agree on the proposed points. Also very importantly, the former exam takers who failed one attempt in the past should definitely be given another opportunity to work as a resident. Having gone through a thorough degree   |

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|    |           | <p>evaluation process and a written exam, i believe all residents should be at-least treated with respect. They have proved their basic entry to practice knowledge once and if they are not being given an opportunity to appear for a clinical exam, they should not be penalized in the way they are suffering right now. I'm sure some registered PTs in the council must have been second-time exam takers in their own licensing days and would understand that failing the exam once should not strip you away from your resident license. Other provincial councils for many years have allowed residents to continue working after failing the clinical component once or twice and I'm sure Ontario can take some guidance from them in these difficult times. To sum up, the amendments should be submitted to the ministry on an urgent basis and should be implemented right away. Enough time has already passed and is causing unnecessary stress to these upcoming therapists due to no fault of their own.</p> <p>Thank you</p>   |
| 16 | 11/6/2021 | <p>It's a great thought to get the independent licence to residents who have have 1200hours for a year and 600hours in 6 months as they have enough and equivalent knowledge and practise like the clinical component... I agree to this amendment and hope this bill is passed and all residents who fit in the criteria get their independent practice lisenec</p>   |
| 17 | 11/6/2021 | <p>I am glad that College has finally come up with this great idea of considering these residents for an independent practice license, the criteria is perfect and gives these candidates a fair chance to get their independent practice.. good job college of physiotherapist of Ontario hoping this bill will be passed soon without wasting too much time.</p>   |
| 18 | 11/6/2021 | <p>These extraordinary times have brought us to back to the drafting tables in life to reevaluate the reflect upon our practices and I would like to join you in the process.</p> <p>The amendments are welcome seeing the current situation and should be implemented right away. These are special times in the history of the profession and require special attention. These new physiotherapists truly want to help patients and should be given a fair choice to do so. The idea of supervision for a resident was designed for this very purpose of keeping safety of the the public in mind and I agree on the proposed points. Also very importantly, the former exam takers who failed one attempt in the past should definitely be given another opportunity to work as a resident. Having gone through a thorough degree evaluation process and a written exam, i believe all residents should be at-least treated with respect. They have proved their basic entry to practice knowledge once and if they are not being given an opportunity to appear for a clinical exam, they should not be penalized in the way they are suffering right now.</p> <p>I'm sure some registered PTs in the council must have been second-time exam takers in their own licensing days and would understand that failing the exam once should not strip you away from your resident license.</p> <p>Other provincial councils for many years have allowed residents to continue working after failing the clinical component once or twice and I'm sure Ontario can take some guidance from them in these difficult times.</p> <p>To sum up, the amendments should be submitted to the ministry on an urgent basis and should be implemented right away. Enough time has already passed and is causing unnecessary stress to these upcoming therapists due to no fault of their own.</p> |

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|    |           | <p>I hope you will do something because CAPR has now left the choices for the colleges to decide.</p> <p>Thank you for your time reading this.</p>   |
| 19 | 11/6/2021 | <p>I am emailing you today to provide feedback regarding the proposed amendments to the general regulations, and more specifically the second amendment regarding registration for an Independent Practice Certificate based upon practice hours. I think that it would be a great step forward in proposing waiving the clinical exam for certain physiotherapy residents however, I have numerous issues with the requirements that were listed.</p> <p>A little background on my situation: I graduated from Western University in October of 2020 and began applying for jobs as soon as I had graduated. Unfortunately, I was applying for positions in the height of the second wave of COVID and struggled to find an available position despite applying to numerous hospital and clinic positions. It was extremely difficult and stressful to find a position during this time and despite having several interviews with positive feedback I wasn't having any opportunities offered to me for employment. I was able to find a full-time position at a private clinic in January 2021 after three months of searching which I worked at for 8.5 months but there were issues from day#1 with very poor work environment. I decided that I would leave the position at that point due to the poor work environment and to focus on studying for my virtual clinical exam. At the time I had submitted my preferences as November 15th and 13th being my first and second choice respectively for completing my virtual clinical exam. I made this decision because almost all of the clinicians that I had spoken to told me to take the time to focus on studying for the clinical exam and to look for a new position afterward. I had been studying for the exam for approximately 2 weeks when I heard the news that the exam had been cancelled for the 4th time for me. I was extremely disappointed but again began applying for new positions immediately and despite applying for several positions at both private clinics and hospitals I had a difficult time finding a position again. I had several rejections from positions with the most common reason being other candidates being more experienced which think had something to do with me still being a resident physiotherapist that requires supervision. Recently, I have managed to find a full-time position at a high-quality private clinic in the beaches area of Toronto starting at the end of this month which I am currently preparing for.</p> <p>Issues Regarding the Proposed Requirements:</p> <p>Have completed at least 1200 clinical practice hours over the previous 12 months</p> <p>I think that the number that you have proposed here is far too high and should be closer to 1000 hours of clinical practice or there needs to be additional options/alternatives to meet this requirement.</p> <p>I don't think that you are considering that during this pandemic it has been very difficult as a resident to find employment to get these clinical hours and I know several others that despite their best efforts to find meaningful employment may not be able to get to 1200 clinical hours over the past year. The combination of the pandemic, uncertainty of when/if the clinical exam is going to be carried out, and our resident status has made it much more difficult to find employment despite the vast majority of residents being competent people/therapists. Either the number of hours needs to be lowered, the definition of clinical practice hours needs to be broader, hours completed during in-school placements could be</p> |

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|    |           | <p>included, or other options for evaluating competency like ACP should be considered as well. Have completed at least 600 clinical practice hours over the previous 6 months at the same facility</p> <p>I do not understand why this requirement is included at all. I can understand if you were to say that the total cumulative clinical hours must be obtained at no more than two facilities to protect against physiotherapy residents that may not be competent and working at numerous facilities over the past year. However, as this requirement is currently written I feel like it punishes those of us that left positions within the last year due to legitimate reasons like poor work environment and preparing for the clinical exam. I feel like there is no need for this requirement and that this may unfairly disqualify certain people, potentially including myself, from being able to obtain a full independent practice certificate.</p> <p>In closing, I do believe that starting to propose amendments regarding waiving the clinical exam for certain resident physiotherapists is a step in the right direction. However, I believe that some of the requirements that you have listed to obtain an independent practice certificate doesn't consider the difficulty that physiotherapy residents have had finding employment during the pandemic to obtain clinical practice hours and punishes residents for leaving positions within the last year for legitimate reasons. I am asking to please reconsider some of these requirements to be more reasonable as this year has been already extremely frustrating/stressful for physiotherapy residents as is. Thank you and any information that you could help to provide regarding the steps going forward with these amendments would be greatly appreciated.</p> |
| 20 | 11/6/2021 | <p>I will not take too long.</p> <p>I appreciate that you are taking the time and effort to offer solutions to all physios affect by this pandemic. I like it a lot the idea of considering supervising hours into consideration, it's our real world with real patients practice.</p> <p>I have been a provisional physio since August/September 2021, and I have been waiting to take this practical exam since May/21. In my case, I got 2 exams canceled.</p> <p>I do not fall into any of the set of rules yet, because my provisional license still recent and when I started to work as a PT resident, I decided to work part time in order to have time to study, if I had chosen to work fulltime I would've the chance to complete the 600 hrs in 5 months and 3 weeks (working 40 hours a week). I work less than 25 hrs a week because of the study time I had to keep up with. I would like to suggest a decreased on the number of hours in 6 months (due to the studying time dedicated preparing for the practical exam). I believe 6 months working as a pt resident under supervision is enough time to demonstrate competence and to further develop skills for independence practice, but what if my facility can't give me more hours? What if I have to change jobs? Will I lose all my hours? I have been working for over 2 months now and happy to think that in 4 months I would become a full licensed physio. I am counting the days and hours for that day.</p>   |
| 21 | 11/7/2021 | <p>Hello, I am deeply disappointed by the handling of College of physiotherapist Ontario and CAPR. Its been almost 2 years now that you have not done anything to fully licenced Resident PTs. The exemption criteria for independent license doesn't do fairness for all the Residents out there. The reasons for that are follows: 1.) Its hard for resident to commit for full time job when they have prepare for Clinical component which was</p>   |

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|    |           | <p>cancelled couple times in last 12 months. 2) Also due to Covid, Resident family and they themselves have to take time off for taking care of Covid affected parents. 3) And thirdly you are only counting past 12 months which is not fair. why not from the beginning of the resident license date. 4) And unfortunately who doesn't qualify are you having any dates in mind to conduct clinical exam for who are willing to write exam now. 5) Saskatchewan is the province which is doing it fairly, if you want look at there plan to register Residents. Please consider my opinions.</p>   |
| 22 | 11/8/2021 | <p>Respected members of college of physiotherapists of Ontario, I appreciate all the cooperation and support you are trying to provide resident physiotherapist. However, I strongly feel that in proposed amendments the requirement of expected clinical hours are not fair for all residents physiotherapist. As per college, to maintain the registration one is not required to work so many resident physios including myself, choose to continue working part time or took a break so we can prepare well for practical exam and clear it in first attempt so that we do not have to go through mental and financial stress. After college proposed this new regulation I have been trying to change into full time job but it is difficult as most organization are hiring only Registered physiotherapist for full time opportunity with reason that they can not trust commitment of resident physiotherapist due to uncertainty of exam. So I would highly suggest to review this proposed requirement and offer some alternative. Thank you for providing opportunity to share our feedback, I hope you will consider it. Thank you.</p>   |
| 23 | 11/8/2021 | <p>I am writing in response to the General Regulations (532/98). I have been a Resident Physiotherapist since December 2019. Working full time hours in 2 long term care and a 2 wellness clinics. According to the Job market in Ontario there is very few clinics who offer full time hours to a Resident physiotherapist. The employers are always unfair in terms of hours and payment to resident PT. Thus its difficult for a resident to complete 600 hours in 6 months in one facility. I have worked for the same employer for 2 years but different locations as smaller long term cares have less hours for PT. No long term cares have 40 hours/week. I do have 1200 hours in the last one year with the same agencies but I work for them at different facilities. So I think its unfair to have the criteria of one facility. As the long term care and home care PTs won't qualify for it. We have been residnet PT for 2 year. Also there should be a time frame. You can give some one who got full time job at a clinic ago just passed the exam 1 year ago and has that hours but not to a resid et who passed exam 2 years ago did full time hours in clinic and long term cares .</p> |
| 24 | 11/8/2021 | <p>legitimate</p>  |
| 25 | 11/8/2021 | <p>I am writing in response to the General Regulations (532/98). I have been a Resident Physiotherapist since December 2019. Working full time hours in 2 long term care and a 2 wellness clinics. According to the Job market in Ontario there is very few clinics who offer full time hours to a Resident physiotherapist. The employers are always unfair in terms of hours and payment to resident PT. Thus its difficult for a resident to complete 600 hours in 6 months in one facility. I have worked for the same employer for 2 years but different locations as smaller long term cares have less hours for PT. No long term cares have 40</p>  |

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|    |           | hours/week. I do have 1200 hours in the last one year with the same agencies but I work for them at different facilities. So I think its unfair to have the criteria of one facility. As the long term care and home care PTs won't qualify for it. We have been residnet PT for2 year. Also there should be a time frame. You can give some one who got full time job at a clinic ago just passed the exam 1 year ago and has that hours but not to a resid et who passed exam 2 years ago did full time hours in clinic and long term cares . |
| 26 | 11/8/2021 | I think all criteria are good but the 600 hours in one facility is unfair as that would rule out a lot of residents who have been working as residents for 2 years but don't have 600 hours in one facility but do have 600 hours in the last 6 months in 2 /3 facilities.  |
| 27 | 11/8/2021 | All provinces have some or other options explored except CAPR , why not CPO? What is the relationship between CPO and CAPR.it is clearly visible to everyone now. There must be an alternative provided if you want to do something. Nothing else I want to talk. My salary is same since last 2 year because of you all. Who will pay for that?  |
| 28 | 11/8/2021 | I am a resident physiotherapist working in a clinical setting since January, 2021. Being in a limbo since one a half year, riding a roller coaster of emotional and financial instabilities, I am satisfied with the 2nd proposed amendments to general regulation, which includes "Permit registration for an Independent Practice Certificate based upon practice hours", as I am and other practitioners (Provisional License holders) I know are eligible to apply for an independent practice License under the same.                      |
| 29 | 11/8/2021 | independent practice licencng based on the clinical hours and supervisor is the best way at this given point of time and it is truly practical and reasonable assessment for safe practice.   |
| 30 | 11/8/2021 | I would like to say that the proposed amendments of college will help the residents who are waiting for the clinical exam for more than one year like me. However, number 3 proposal is not fair for the residents who are waiting too long. We are waiting to long and disappointing every time the exam cancelled. We need the full registered license ASAP to make our life normal as others. I want to see my parent and brothers who live my back country. I hope I will become a real independent physiotherapist. Thanks                 |
| 31 | 11/8/2021 | Option 2  |
| 32 | 11/8/2021 | I think first and second one is great idea but third one is not fair because all of candidates have waited long time and temporary is not enough based on current situation.  |
| 33 | 11/8/2021 | Due to covid 19 , all clinics are affected and they have lost their clients. Because of this all practitioners are also affected and lost their hours or changed the job to get more hours. 600 hours un previous 6 months at same facility in this covid times has been difficult .  |
| 34 | 11/9/2021 | Emergency amendment if its just for 60 days is not a solution i believe. Because its going to be a equal stress on practising Resident PT. Either you conduct a exam or dont. There are many options to conduct exam: 1. Wear necessary ppe n complete exam 2. Ask the  |

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|    |           | <p>supervisor to conduct a exam n send you a report. 3. Conduct a zoom meeting and take online exam. Several ways to solve this issue. Please come up with a permanent solution. Its a humble request 🙏</p>  |
| 35 | 11/9/2021 | <p>According to the situation, I personally believe that supervised hours should be taken into consideration. We work under supervision to get better every day and make sure nothing goes wrong with the patient and how to maximize the safety.</p>  |
| 36 | 11/9/2021 | <p>proposals 1 and 2 are resonable. But 3 is unfair to candidates who wait more than year. pleae do ASAP.</p>  |
| 37 | 11/9/2021 | <p>I am writing this email to provide feedback on the proposed amendments to help overcome the backlog of Physiotherapy Residents awaiting full licensure. For background, I am a PT Resident currently registered with the College, practicing in part-time positions in outpatient private practice and an acute care facility.</p> <p>All three of the propositions are a step in the right direction to hopefully avoid the long delays experienced by our cohorts from happening again in the future, and will be helpful in moving the profession forward. I appreciate that the College is considering alternatives beyond the pursuance of an exam that has continuously failed to be delivered, however I have a few concerns and questions regarding the second amendment, specifically regarding the minimum hours criteria:</p> <p>2. Permit registration for an Independent Practice Certificate based upon practice hours.</p> <ul style="list-style-type: none"> <li>- What does "clinical practice hours" include? Is this only time spent in direct face-to-face patient care? Does it include hours spent preparing for and documenting patient interactions?</li> <li>- How would we be expected to show proof of these hours?</li> <li>- Does it include hours spent in the workplace to improve patient care (obviously not including continuing education courses)? For example, hours spent learning how to use new equipment in acute care/ rehab centres, or attending in-services on relevant clinical skills, and undergoing on-the-job training for controlled acts (e.g. oxygen titration, endotracheal suctioning)?</li> <li>- From when would the "previous 12 months/ 6 months" be counted back from? Many of us decreased our work hours for weeks to months in the past year in order to prepare for the clinical exam more than once. This would make meeting the minimum number of hours very difficult for some in the given timeline. A potential solution could be to extend the timeline to include all of one's time spent practicing as a PT Resident, which would be more achievable.</li> <li>- While I understand and agree with the need to ensure that registrants are maintaining a certain level of competency within the workplace, hence the 600 hours-minimum at the same facility within the previous 6 months, this parameter may overlook several challenges that are unique to PT Residents and new clinicians. Furthermore, these challenges have been exacerbated by the pandemic.</li> <li>- For those in private practice, it often takes a long time to build a caseload as a new clinician if they were not taking over an existing caseload. Depending on how "clinical practice hours" is defined, this may leave many individuals substantially short of meeting</li> </ul> |

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|    |            | <p>the minimum requirements in the defined period. Likewise, those who practice in home health settings spend much of their day traveling between clients and see relatively fewer clients per day; depending on how "clinical practice hours" are defined, PT Residents in these positions may also be significantly disadvantaged or delayed in obtaining full licensure with these amendments.</p> <ul style="list-style-type: none"> <li>- Many new graduates, like myself, start with part-time positions at several facilities, because the hours at each job alone are not sufficient to earn a living. Especially in rehab and acute care centres, new graduates are often hired on as casual or part-time employees, and our shifts are assigned according to seniority and funding. Being of the lowest seniority as new clinicians and hires, this limits the number of hours we can work, despite wanting more hours.</li> <li>- New graduates often change jobs within the first few years of practice as we learn what we do and do not want in our jobs; depending on when and how the 6- and 12-month time periods are defined, this may pose a significant challenge to meeting this criteria.</li> <li>- Finally, my suggestion for making this criteria more achievable for the situation of PT Residents is to change the parameter of 600 hours over 6 months at the same facility to "have practiced at the same facility for at least 6 consecutive months within the candidate's registration as a Physiotherapy Resident."</li> </ul> <p>Thank you for taking the time to collect feedback from stakeholders, and for considering alternatives to the clinical exam.</p> |
| 38 | 11/10/2021 | <p>As a Resident PT , I appreciate that the college is considering these amendments . However , the practice hours requirement is too much considering the pandemic in 2020 and 2021 and taking time off for the exam . We also always have to see that there are no shady businesses happening in the clinic which reduces are choices . We haven't met our families back home since 2 years . I am 2 and half months pregnant , even if I start working full time now , I am afraid I will not be able to fulfill 12 hour requirement until my due date . This adds stress on me during pregnancy .I have been working since NOV 2020 part time . Also the college would have to verify hours and people might show things or hours that are not real just to get license . The best option is to allow for clinical internship approved by the College and assessment based on the same so there is no bias and no one is at a disadvantage . Thank you .</p>  |
| 39 | 11/10/2021 | <p>As a Resident PT , I appreciate that the college is considering these amendments . However , the practice hours requirement is too much considering the pandemic in 2020 and 2021 and taking time off for the exam . We also always have to see that there are no shady businesses happening in the clinic which reduces are choices . We haven't met our families back home since 2 years . I am 2 and half months pregnant , even if I start working full time now , I am afraid I will not be able to fulfill 12 hour requirement until my due date . This adds stress on me during pregnancy .I have been working since NOV 2020 part time . Also the college would have to verify hours and people might show things or hours that are not real just to get license . The best option is to allow for clinical internship approved by the College and assessment based on the same so there is no bias and no one is at a disadvantage . Thank you .</p>  |

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| 40 | 11/10/2021 | I am glad to see the initiative from CPO to bring about changes in the regulation based on the current world situations. All the amendments mentioned are reasonable and I support it. This will help all the physios as well as business stakeholders in providing service to the canadian population at the same time will ensure that the quality of the physio service is not compromised.  |
| 41 | 11/10/2021 | How will the 1200 hours completed consecutively in 12 months of 600 hours in the same facility apply to people who choose to birth or take parental leaves for childbirth or immediate family deaths. Can the wording be changed to respect the right to choose family to avoid any potential human rights violations?  |
| 42 | 11/10/2021 | Why there is no option of in person examinations, why that's not put forward, when physiotherapy colleges conduct in person classes, why physio license exams not conducted in person ?? If the license is given under Emergency what is the emergency mean is it by job recruitment??? Or is their any specific criteria ?   |
| 43 | 11/10/2021 | <p>I am responding to the call for feedback on proposed regulation amendments for general regulation (O. Reg 532/98).</p> <p>I will begin by explaining my personal situation. I am a graduate of a combined PhD/MPT program (at Western University). My career intentions are to be a clinical researcher and work clinically 2-3 days per week and in research or faculty teaching positions at accredited institutions 2-3 days per week. I have been successfully doing this as a Physiotherapy Resident for the last year.</p> <p>As such, I imagine I have worked between 800-1000 hours in the previous 12 months and I ask if 1200 clinical practice hours, within a 12-month time frame, is a fair standard for someone like myself who is pursuing a less conventional career path in the field of Physical Therapy in Canada (it does make me wonder... I am being punished for dedicating myself to trying to contributing to research and teaching in this field?). I support the existence of a standard for a certain number of clinical practice hours. Whether that is 1000, 1200, or 1400 hours: but I do not believe there is just cause to put this within a particular time frame (or at least, as strict of a time frame, especially for people practicing as I do).</p> <p>Further, I do wonder about the additional stipulation of 600 of those hours having to be accumulated in the most recent 6 months (and at the same facility). This limits post-graduate development. People many want to work in public and private sectors simultaneously. This should be supported by our college as we are generalists upon graduation and can then further specialize and find niche areas of practice that require our service. Similarly to my points above, this would also "rule me out" because I spent half of my time conducting research to improve Physical Therapy practice.</p> <p>I absolutely agree that no concerns should be raised by the residents supervisor for them to qualify and that there should be no conduct history.</p> <p>I would be extremely disappointed if I were to not qualify for independent practice because I accepted a faculty position in a School of Physical Therapy to teach and conduct research (my research examines cognition and pain, physiotherapists practice and assessment procedures). I have published journals like Physiotherapy Canada and Ageing Research Reviews over the last year.</p> |

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| 44 | 11/11/2021 | <p>I would like to provide my feedback on the proposed amendments.</p> <p>I think these changes are crucial to expediate full independent licensure of physiotherapy residents and that this should move ahead as soon as possible. It is very reasonable that residents working in a facility for over the proposed number of hours should be deemed capable and skilled to be independent practitioners and exempt from the examination. Their workplaces would have severed their relationship with them by this point if they were not capable therapists or if there was any concern.</p> <p>Thank you</p>  |
| 45 | 11/12/2021 | <p>It would be a great shame to allow this to go to the government before actually changing the language of the legislation that got the College into this problem in the first place.</p> <p>The first priority for change should be to change the wording in Provisional Practice - Section 23 subsection 3 which is copied here-- "The applicant must have registered to take the practical component of the examination at the next available opportunity after the application. O. Reg. 68/06, s. 1." The wording of this section needs to remove reference to the Practical Examination and simply state "a further examination set by the College" - this would allow the College in any circumstance to not to use the clinical component of the PNE as the standard for entry to practice. This makes the legislation more flexible for the College and Entry to Practice team/committee to quickly adopt a different criteria for the second part of the examination - for example a combination of a further online exam (not necessarily clinical in nature) and completing Jurisprudence. The possibilities this opens for the College to change quickly the entry to practice requirements are endless and thus this should be seriously considered.</p> |
| 46 | 11/12/2021 | <p>I agree with the proposed amendments.</p>   |
| 47 | 11/12/2021 | <p>With all due respect, the first priority for change at the CPO should be to change the wording in Provisional Practice - Section 23 subsection 3 which is copied here-- "The applicant must have registered to take the practical component of the examination at the next available opportunity after the application. O. Reg. 68/06, s. 1."</p> <p>The wording of this section needs to remove reference to the Practical Examination and simply state a "further examination set by the College" - this would allow the College in any circumstance to not to use the clinical component of the PNE as the standard for entry to practice.</p> <p>This makes the legislation more flexible for the College and Entry to Practice team/committee to quickly adopt a different criteria for the second part of the examination - for example a combination of a further online exam (not necessarily clinical in nature) and completing Jurisprudence.</p> <p>The possibilities this opens for the College to change quickly the entry to practice requirements are endless and thus this should be seriously considered.</p>  |
| 48 | 11/14/2021 | <p>The College is proposing this pathway to independent licensure only in extenuating circumstances (i.e, pandemic, etc.). Why is this method of licensing valid for candidates during this time and not all the time? If a certain number of clinical hours is acceptable to be deemed competent, should that not apply to everyone all the time? The College should</p>  |

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|    |            | also take into account research from Ontario Universities that have provided strong evidence against a high-stakes exam. If we are to be a self-regulated profession, our regulatory bodies should listen to our academic bodies.  |
| 49 | 11/14/2021 | If the regulation doesn't require physiotherapists to undertake a competency exam, why is this requirement being consistently reinforced. Why is it that only this new pandemic cohort is able to obtain their licence and deemed competent without taking the clinical exam. Why is this not an option for other therapists. If this is an adequate route, and physiotherapists are deemed competent after working a certain number of hours, why is this not good enough after the end of the pandemic. It's also become evident, especially with the publication of the study from Western university, that a clinical competency exam is unnecessary and is not valid. It sends a clear message to our community that financial gain from prospective physiotherapists is more important to the college than public safety. It's disappointing and disheartening to see as a new grad how the college treats it's members or prospective members.  |
| 50 | 11/14/2021 | Why is it okay to apply this bypass during specific circumstances such as a pandemic but not always. This new proposal is either not valid ever or always valid, regardless of the circumstances surrounding it. The PCE has been shown thoroughly and objectively to not hold any circumstantial validity and should therefore be abolished completely, regardless of the situation.  |
| 51 | 11/14/2021 | These changes should be permanent. The clinical exam is not a good enough test of a graduate's effectiveness, while real life clinical experience and approval from a supervisor would be far more indicative of a graduate's effectiveness as a clinician. Why would these changes only be for graduates during the pandemic? What will change when the pandemic is over that suddenly graduates have to endure an outdated exam that doesn't accurately examine their effectiveness as a clinician. Our profession is stuck in the past and must move forward. Other provinces have already waived the clinical exam, so why is Ontario so far behind, when Ontario should be a leader in healthcare. These changes should come into effect, but they should come into effect PERMANENTLY and for ALL Ontario graduates.   |
| 52 | 11/14/2021 | My name is Jenny Lai and I have been a Physiotherapist Resident since November 2020. I have been working at a rehab hospital in Ontario for over 1 year under a contract position. I mainly work with patients recovering from a stroke, which I find very enjoyable and rewarding. During this time, I have applied for multiple full-time positions, however, my coordinator informed me that the human resources department will not allow me to interview for a full-time position because of my PT Resident status. This is very frustrating for me, as my Resident status has become a barrier for me to obtain job security, health benefits, vacation pay, sick leave and more. Remaining as a PT Resident for over a year is unacceptable and acts as a huge professional growth barrier for my fellow colleagues and myself. I kindly urge you to find a quick solution to fully license Canadian physiotherapists in a timely manner. The proposed amendment is a step towards the right direction, however there are some requirements that should be revised.<br>1. Hold a provisional practice certificate - I agree with this clause, as a PT resident needs to |

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|    |            | <p>hold a provisional practice certificate to work and gain experience during this time.</p> <p>2. Have completed at least 1200 clinical practice hours over the previous 12 months - This requirement assumes that PT residents are working close full-time hours. Personally, I have met this requirement given that I am working full time hours at a hospital, however, many of my colleagues who are working in the private sector may struggle to meet these requirements. PT Residents working in the private sector are often hired on a part-time basis or dependent on building their client base. Because of this, the number of clinical hours should be reduced to 1000 hours in 1 year; which is well over the amount of time that would have been used to study and practice for the clinical exam administered by CAPR.</p> <p>3. Have completed at least 600 clinical practice hours over the previous 6 months at the same facility - This requirement should be exempted, as long as the PT resident demonstrates they have over 1000 clinical hours and their supervisor has not raised any concerns.</p> <p>4. Have no concerns raised by their supervisor - This is a fair requirement, as a supervisor works closely with the PT Resident and has a clear understanding of their competency.</p> <p>5. Have no conduct history internal or external to the College - This is a fair requirement to ensure the safety of the public.</p> <p>Thank you for taking the time to take my feedback into consideration. If you have any questions please feel free to contact me. Again, I plead you to license PT residents as soon as possible, as our professional growth is being stunted</p> |
| 53 | 11/15/2021 | <p>I think it's a great proposal for many candidates but once again it is not fair to me. I haven't practiced in Physiotherapy for almost 2 years because of the failure to provide a clinical examination. I am one of the candidate who failed the exam in 2019 and lost the provisional license. I had to watch other residents keep their provisional license for more than a year. I studied hard for the virtual exams and was not able to complete due to CAPR failure to prevent technical problems. Finally, I was able to complete the most recent virtual exam successfully and now this amendment is saying that I could be granted a provisional license again and that I have to do another clinical exam. It's really not fair for the people who successfully complete their virtual exam to go back again to a provisional license status. We have sacrificed so much for this career. I suggest our virtual exam be at least graded so we can get the opportunity to have an independent license. We want to move on with our lives. We cannot get married, have kids or open a clinic with a minimum wage. I have a master degree from a great Canadian university and I am working minimum wage as a Physiotherapy Assistant to make ends means. I understand that it's my fault that I failed my first clinical exam but it is not fair for me to be denied the opportunity to practice my passion for the past 2 years. I strongly suggest to mark my virtual exam. I studied hard for it and I deserve my independent practice license.</p>  |
| 54 | 11/15/2021 | <p>Thanks to College of Physiotherapists of Ontario (CPO) for putting forward proposed amendments to General Regulation that could provide stable pathway to potential physiotherapist candidates who got stuck in their careers due to COVID-19. All the proposed amendments including the pathway for Provincial Practice to Independent practice certificate is acceptable solution as number of hours requirement makes it a perfect criteria as candidate has gained enough experience of practicing independently</p>   |

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|    |            | without any concerns raised by public member and their respective mentor. The above practice hours in addition to the internship hours (Internationally Educated Physiotherapist) worked towards the graduation makes them perfectly eligible for Independent Practice Certification. The dedication and efforts by CPO for working towards the proposed amendments is highly appreciated.   |
| 55 | 11/15/2021 | Fully endorse alternate pathway to independent license based on practise hours. Do not want to lose new grads from profession or have more PT jobs filled by other HCP ( kinesiologists) as Employers become tired of waiting for the pandemic PT's to become fully licensed.  |
| 56 | 11/16/2021 | The College is proposing this pathway to independent licensure only in extenuating circumstances (i.e, pandemic, etc.). Why is this method of licensing valid for candidates during this time and not all the time? If a certain number of clinical hours is acceptable to be deemed competent, should that not apply to everyone all the time? It is clear that the College (and by default CAPR) benefits from the PCE in ways that surpass ensuring "public safety". I think that as a profession we should still be advocating for a more comprehensive, valid, and modern pathway to licensure. This is especially important when our Universities have provided strong evidence against a high-stakes exam that does not really assess competency. |
| 57 | 11/16/2021 | This is a reasoned approach to allow those impacted by the pandemic to meet registration requirements AND protect the public. I agree with this plan   |
| 58 | 11/16/2021 | I am in favour for #1 and 2 - especially based on the recent events with the PCE. Perhaps for #2 - the supervising therapist can determine if they qualify by meeting the standards for their full registration .  |
| 59 | 11/16/2021 | YES! I fully support these proposed amendments. I'm EXTREMELY disappointed that the College took so long to propose them, but now that they are in process, they should be moved forward as quickly as possible.   |
| 60 | 11/16/2021 | I think you should get rid of the practical exam. All university programs are accredited. All students must successfully complete practical examination during their program. Additionally, they have to successfully complete practical placements to graduate. The further clinical examination is redundant and a money grab. It has been especially prohibitive during the pandemic as it has held back 2 years worth of graduates. Get rid if it.   |
| 61 | 11/16/2021 | Clinical component should be mandatory, nothing can compensate for the required preparation needed for successful passing of the practical exam. In my opinion, any changes to the previous functioning will shake the entire practice of PT profession.   |
| 62 | 11/16/2021 | Hello, I do not agree to the waiver of the clinical component of the examination as that would be take away any degree of clinical competency and standardized protocol. The licensure should be dependent upon completing both of the exminations in a fair and   |

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|    |            | equitable manner and even though I agree that a provisional certification can be extended, under no circumstances, should the clinical component should be exempt   |
| 63 | 11/16/2021 | I believe that the 1200 hours would be a sufficient requirement for entry to practice physiotherapists to meet for full licensure. As Canadian physiotherapy graduates well all come from accredited programs and as such we all go through practical exams and have to pass with success to complete the program. As for the 600 hours in one location I would like to see more justification for this as many individuals have been hired during the pandemic and have had to work at multiple locations to meet those hours. Due to clinics not working at full capacity, their physiotherapists' shifts reflect this.   |
| 64 | 11/16/2021 | I think these amendments are finally a step in the right direction. Please also consider the validated tool of ACP to verify the competency of PT residents in Ontario if additional checks are required. The successful practice of a PT resident is more valid and accurate to for verify their safety with the public than a 20 year old exam proven not valid.  |
| 65 | 11/16/2021 | First of all thank you for considering our thoughts on new amendments. I am Physiotherapist Resident since May 2020 and waiting for my clinical exam since June 2020. Now when I read the proposed amendments, I would like to share my thoughts. I am working part time at different clinics and the reason behind it is due to Covid-19, majority of clinics was hiring for one day or max two days due to less influx of patients for public safety. So, I don't have experience of 1200/600 hours at same or max two facilities as I work more than 2 clinics. Secondly, due to clinical exam that was held for 4 times, I needed to take off to read and prepare myself to achieve my exam goal and I resigned the jobs every time before 4 weeks of exam time and as exam got cancelled I had to find new job again! That was frustrating and I felt it mentally challenged. So, for that reason also I don't have hours in same facility. Thirdly, for last exam was held in September 2021, again they cancelled just before a week in which I was supposed to sit so I again took time off for 3 weeks to read for that exam and during that time I couldn't work! I would like to suggest that rather than considering same facility, we should count the total number of hours we have worked since we got our provisional license. Due to several failed attempt of clinical exam by CAPR and due to Covid-19 has affected immensely to work full-time in one or two facilities in 12 or 6 months time period. Please reconsider and thank you so much for reading my feedback. I appreciate your time. |
| 66 | 11/16/2021 | I agree with these proposed amendments, think it would benefit us all as I believe our colleague Resident PTs are doing a great job and deserve this!   |
| 67 | 11/16/2021 | The first and second amendments are welcome and a much-needed change especially the second amendment as in presence of adequate clinical hours there is no need for a clinical exam, the candidate has adequately proven himself. I sincerely hope for these amendments to be applied sooner than later. Its a shame to have 1000 eligible candidates unavailable to practice in times when there is a serious lack of therapists in the province. Especially when other professions with similar scope have already amended their requirement.   |

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| 68 | 11/16/2021 | I have feedback for the following section "2. Permit registration for an Independent Practice Certificate based upon practice hours"...specifically the point on "have completed at least 600 clinical practice hours over the previous 6 months at the same facility". Many therapists work part-time at two facilities, for example at a hospital and at a clinic. Most hospitals in Ontario have part-time as a 0.6 of full time, which means you work 22.5 hours per week. If a therapist works 22.5 hours at one location, and then 15 hours at another (to total to a 37.5 hour work week), then they would never be able to meet the requirement of 600 hours at one facility in a 6 month time period. Perhaps you could amend this to say "500 hours of clinical practice over the previous 6 months at the same facility". Otherwise, this stipulation is quite limiting even if a therapist has been working the same two jobs for over 6 months. Thank you! |
| 69 | 11/16/2021 | Really like the idea of doing by practice hours to fully license PT residents. It's been a long time coming and they have all already been working for over a year for some. They have developed the skills for their practice. I think this is a great step towards solving the licensing issue. As more graduates graduate every year this will be a effective way to tackle the backlog of Residents while also ensuring their skills are up to standard.  |
| 70 | 11/16/2021 | I fully support the first and third proposed regulations but not the second one. The first and third proposed regulations can guarantee the applicants a license for temporary practice as a PT resident. The second regulation regarding clinical hours would not be fair to everyone and fraud claims may be easily happening. As the communities have been reopened, under safety measures just like we treat patients in person, I don't see why in-person clinical exams cannot be taken place. Or we can keep doing virtual exams but on a frequent smaller scale.  |
| 71 | 11/16/2021 | I think it is important to get PT residents working for a year or longer licensed ASAP. The PCE practical exam is no longer relevant. It is also important to consider practice hours in other provinces if residents have moved from one College's jurisdiction to another, when taking into account the practice hour requirement. With support of a supervisor, no complaints, and the required hours PT residents should get licensed. The backlog is too great to continue with the practical exam, and as we know, significant time away from school in a focused practice area makes preparing for a clinical exam that much more unrealistic.   |
| 72 | 11/16/2021 | I personally agree with all the proposed amendments to General Regulation. Additionally, I believe that there should be confirmation that applicants who meet this criteria currently, can apply for the exemption when the government approves the amendments (i.e., months later).  |
| 73 | 11/16/2021 | I agree with the proposed changes.  |
| 74 | 11/16/2021 | I agree that at this point the individuals who have been residents for over a year, have no complaints against them, and have a certain amount of clinical hours deserve to be licensed without the stress of writing an exam.  |

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| 75 | 11/16/2021 | We need to get more residents into full independent practice. The PCE (more importantly, CAPR) has proven to be an exceptionally poorly run, poorly organized, and disgraceful hinderance on our professional. If a resident has had multiple college complaints filed against them, then limit their ability for full licensing. But how many of these residents have now worked for two years completely professionally, effectively, and competently- with no issues at all? My guess is most of them. Give them a license and stop messing with their lives. Put yourself in their shoes. Thousands of dollars, and even more hours of stress and studying. We desperately need more physiotherapists across the province and now we're driving people out of the profession.                                       |
| 76 | 11/16/2021 | I personally agree with all the proposed amendments to General Regulation. Additionally, I believe that there should be confirmation that applicants who meet this criteria currently, can apply for the exemption when the government approves the amendments (I.e., months later).  |
| 77 | 11/16/2021 | Having to have 600 hours all in one facility seems unfair for physiotherapy residents who work at two different locations.  |
| 78 | 11/16/2021 | Amazing alternative. The residents have gone through hell and back due to the pandemic. Laws need to be changed. This is best for everyone.   |
| 79 | 11/16/2021 | Ontario should cancel the practical exam for PTs. Which is totally waste of time for everyone. All the resident pts should get full registration as soon as possible.   |
| 80 | 11/16/2021 | Good day, Thank you for the proposed amendments. They seem to be ethical, fair, reasonable, respectful, necessary and possible to implement. I am in support of the proposed amendments suggested by the College Council and it's members.  |
| 81 | 11/16/2021 | We should provide some opportunity for providing provisional license with supervision for students who have not been able to clear 3 attempts of clinical component. So that these professionals can be retrained into the Physiotherapy workforce. These professionals have cleared their written part of PCE and should be given a chance in life to write the clinical exam again if they could not clear in 3 attempts of clinical component. May be they need extra clinical supervision or guidance. Thank you  |
| 82 | 11/16/2021 | I agree with all 3 amendements. However, for amendment 2, the requirements for 1200 clinical practice hours over 12 months and 600 clinical practice hours in one location are unreasonable. Due to COVID, many residents were unlikely to start working right away and therefore will not meet this criteria. Also, residents often switch positions until they find a place they are comfortable in - which is a learning process and takes awhile, therefore they may not meet this requirement. Also due to the clinical exam, many residents were only working part time, therefore they may not be able to meet the clinical practice hour requirements and it is not their fault. Please reconsider how high the clinical practice hour requirements are and make them more realistic for the current situation. |

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| 83 | 11/16/2021 | 1. re-apply: this is absolutely necessary. 2. Independent registration based on practice hours: I believe this should completely replace the clinical exam. This in itself has better validity of clinical safety than an exam that has been proven to be not valid and has unrealistic scenarios with unrealistic time limitations. The excuse of "this is how we've always done it" is not an acceptable response for a profession that touts being evidence based. Time to modernize. Also PLEASE advise what is being done in the immediate future to get candidates registered now!! All other provinces have announced a plan! Come on Ontario, a plan is past due. This delay is embarrassing the physiotherapy profession in the eyes of other HCP.  |
| 84 | 11/16/2021 | Given the length of time that many residents have spent in practice, I think the decision to permit entry-to-practice based on practice hours is very sensible. I feel a full year in practice is a much better assessment of clinical safety than a two day exam which has been demonstrated to have poor external validity. I wholeheartedly support these proposed amendments.  |
| 85 | 11/16/2021 | The college should move forward with the hours based requirement to eliminate any further backlog for the physiotherapy residents who are joining our profession.  |
| 86 | 11/16/2021 | I strongly support the Proposed Amendments to Part III Registration of the General Regulation under the Physiotherapy Act, 1991.   |
| 87 | 11/16/2021 | It's insufficient. PT Residents have been working for over a year and providing quality care. There is no evidence that residents are unsafe therapists. The exam should be scrapped and supervision 6-12 months should be the only requirement to become a fully licensed therapist. The college are holding back the PT profession with their archaic views.   |
| 88 | 11/16/2021 | I believe it is a necessary adjustment.  |
| 89 | 11/16/2021 | Any legislation that paves a path forward for these individuals should be expedited. I am a PT in another Canadian jurisdiction and have been appalled at the lack of action from CPO throughout this whole process. To quote Teresa from the June 2021 Council meeting "we don't want to get to September and CAPR can't run the exam and we don't have a plan B..." and here we are. CPO is in breach of fairness principles and acting in service to their membership and the broader profession. Public protection and membership are not mutually exclusive when a licensing body goes 2 years without licensing a single therapist. Why do you exist if you cannot regulate your membership? The role of the college is to provide duly qualified professionals for public service. Figure it out CPO. |
| 90 | 11/16/2021 | I believe this is a must, I fully agree with these amendments  |
| 91 | 11/16/2021 | I think this is a must!! I agree with these amendments!! Let the Physio's be Physio's  |

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| 92 | 11/16/2021 | I believe these amendments are a must. Us as physiotherapy residents have been waiting since 2019 now for an avenue to become fully licensed and these proposed changes are it.  |
| 93 | 11/16/2021 | There are a group of residents who have already completed the virtual exam done by CAPR. These residents went through an incredibly stressful experience just to complete a (very poorly administered) exam the college has consistently been asking of residents. There is no mention of what will happen to these residents. These proposed amendments do not take into account everyone's situation. Some residents have left clinical practice to pursue further education (or have greatly reduced clinical practice) and some have taken alternate career routes. The major reason for most of these people is due to the lack of help in getting fully registered and just being tired of this system in which the resident always loses. Is it fair that these residents who have completed all requirements to become a Physio graduate are penalized for not working in this incredibly difficult climate? There is still so much lack of clarity, after SO MUCH time as to what direction the college is headed. Residents are restricted to staying put and putting their whole life on hold and for those residents who have taken other steps in life (such as returning to school) are still confused as to whether we can even continue our studies because we don't know what the proposed requirements will be to obtain a license we have desperately been trying to obtain for years now. At this point it is important the college makes a quick decision and it is imperative that those residents who have already been through the stressful online exam to just be given their license now, it has become too much. There was a constant call for a national exam to be done and these residents did that. It is now time to help residents enter the work force because they are sacrificing way too much now. |
| 94 | 11/16/2021 | Merci de considérer toutes nos heures clinique pour la créditation de l'examen. Je trouve seulement le nombre total heur est trop élevé considerant que mon employeur m'obligeait à travailler de la maison a un jour sur deux (appeler des patients, courriel et autres) pendant presque 1.5 ans suivant la COVID (jusqu'à tout recemment (octobre 2021)). Je crois que le travail à la maison devrait être reconnue comme des heures cliniques. Sinon, le nombre d'heure devrait être diminuer à 1100 heures env (dernier 12 mois) et à 400 heures (dernier 6mois). Je suis sur que je ne suis pas la seule dans cette situation où le travail à temps plein n'était pas possible. MERCI !   |
| 95 | 11/16/2021 | Yes, yes, and yes! We need to move forward and put in contingency plans so this doesn't happen to a future cohort.   |
| 96 | 11/16/2021 | With the ongoing unreliability with CAPR and lack of trust to the colleges especially Ontario, it is paramount that everybody should be given equal chances to provisional practices whether they failed or decided not to apply for provisional practices nor whether they are locally trained or iepts. You have given licenses to those who are unsafe to practice or lacking skills to sone, why not give to those might be more than worthy of those licenses and beneficial to the public.   |

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| 97  | 11/16/2021 | I don't understand the purpose of the 600 hours in the past 6 months requirement. Would this not be discriminatory toward individuals who have recently had a child, are experiencing a health issue, or needed to take time off work for any legitimate reason?  |
| 98  | 11/16/2021 | I think the proposed amendment to grant a full license based on practice hours is a very fair amendment. Everyone is on a provisional license meaning they have already successfully completed one competency exam, in addition to completing an accredited university degree in which they are examined very thoroughly. Most country's do not even require a competency after graduating. I think this is extremely warranted.  |
| 99  | 11/16/2021 | As an internationally educated PT and licensed in Canada, I don't endorse ANY of these amendments. Yes the clinical exams are vulnerable to biases and the format is not ideal for anyone. Perfect the exams, don't get rid with them... if I can suggest something to you guys: Expand our scope of practice! Look at the HCPC UK experience... Physios can do way more. Good luck and all my best!  |
| 100 | 11/16/2021 | I support the the proposed amendments. It is in the benefit of general public specially with the shortage of heath care practitioners.  |
| 101 | 11/16/2021 | Due to the fact that there was no clinical exam, I wanted to keep my foot in many doors to continue practicing my skills. I purposely worked at multiple locations and on multiple units in order to keep my skills up to date for when the clinical exam did come around. I work 2 days a week in private practice and then 2 days a week at one hospital, then another 2 days at a different hospital. I fit into the first criteria (1200 practice hours in the past 12 months) but I do not qualify under the second criteria (600 practice hours in 6 months at the same facility) because I am so dispersed over 3 locations. Physiotherapy is meant to be a broad profession with a large scope of practice and lots of transferable skills and we should not have to have all our clinical hours in one location. This prevents residents from seeking experience in multiple locations prior to specializing. Residents should be able to get their clinical hours from multiple settings so that they have a better foundation and more knowledge on what setting they have a passion for. Otherwise, I really like the idea of having an alternative to the practical exam. These clinical hours are MUCH more beneficial to Residents, being able to practice with a supervisor and ask questions as needed. Completing clinical hours will also assist with mental health as we don't need to stress about a one-day, make-or-break exam and rather work on our skills over a longer period of time with a supervisor. |
| 102 | 11/16/2021 | I believe that these amendments are fair and just to the provisionally licensed clinicians who are currently facing the issues with the examination process being on hold due to the pandemic. In these circumstances, with such severe circumstances, that no one could possibly foresee, I think it is necessary to take action to allow practitioners to become fully licensed without the examination process - and I believe the outlined requirements are fair and can clearly identify the clinicians ability to provide safe care. As the core reason for the competency exam is to ensure Physiotherapists can provide safe, effective care, gauging   |

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|     |            | their clinical hours and visiting their supervisors assessments and College standing, is best way to evaluate this, in my opinion. Thank you for taking the feedback of the clinicians currently working in the field towards your decisions.  |
| 103 | 11/16/2021 | Dear College of Physiotherapists of Ontario, I am writing to express my support for the proposed amendments to O Reg 532 98. These amendments will allow flexibility in responding to public health crises, like the one we are experiencing currently, and ensure that residents are able to obtain full registration and in turn provide valuable treatment and care to patients. During this time, it is more important than ever that the public has access to health care professionals to support them in their endeavour to live healthy active lives, recover from injury or surgery, and maintain or regain mobility. The proposed amendments will also help families like ours, who have had to put planning for the future on hold while we wait for any news related to full registration and next steps regarding exams. Many other professional fields have found ways to administer examinations where possible, and in some cases amend legislation to respond to these unprecedented circumstances, and these proposed amendments are long over due for the field of physiotherapy. To reiterate I am in full support of the proposed amendments. |
| 104 | 11/16/2021 | Strongly agree with the 3 proposed amendments. 1. Providing provisional practice licenses to those who were unsuccessful at their first clinical exam attempt, would increase ability to remain active in keeping skills and knowledge fresh and current given the length of time since some applicant have been waiting to retake exam. Proposal # 2 would like to see some protective measures in place that the supervised clinical practice hours can not be supervised by a family member (Reg PT) solely. 3. Emergency class also a great idea, but could be solved with the above 2 proposals.  |
| 105 | 11/16/2021 | I believe thi should have been proposed a long time ago and ensures that the physiotherapy residents are able to practice independently  |
| 106 | 11/16/2021 | What about residents who are doing home visits? Or resident who are working for CCAC LHIN where you have to go to patients home and than treat them. I have 3 resident Physio who are working in community . How will you count their hours? What about resident who are self employed?  |
| 107 | 11/16/2021 | Very important amendments that have been long awaited. This will emphasize the value of the physiotherapy profession in the eyes of the public and government. In a post-pandemic crisis, any changes to eradicate outdated and non-contextual regulations are crucial, for now and future generations. To encourage more to join the profession for the ultimate protection of the public, this needs to happen now and fast. Thank you for this action.  |
| 108 | 11/16/2021 | Agree on proposal to reapply for provisional status upon failing clinical exam to allow for ongoing practice under supervision, this may keep their clinical practice current and improve their chances to passing the clinical exam on repeat tries. Disagree on grant of independent license based on practice hours only - takes away from the merits of the  |

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|     |            | clinical exam. May as well do away with the clinical exam as everyone eventually will accumulate enough hours that way. Agree on emergency class status for situations like the pandemic so as to not too many applicants in limbo, although ongoing provisional registration is better. Emergency class registration should not automatically become independent registration upon end of the “emergency”.  |
| 109 | 11/16/2021 | I agree with the proposed amendments. Physiotherapy residents have been working and gone through many years of training, and clinical placements to reveal their competency. The Clinical PCE is outdated and doesn't accurately portray real life interactions with patients. By having residents complete hours, and making exceptions to the regulations especially in a global pandemic is a must. Our world and profession is changing and we need to implement changes that allow the physiotherapy profession to grow. Action is needed NOW and changing the General Regulation needs to be done.   |
| 110 | 11/16/2021 | Please allow Physio residents who have been practicing for more than a year and have over 1200 hours of clinical practice to get their full license. After being out in MSK practice for over a year and having taken time off twice to study for the practical, it's unfair to put us through that a third time. The amount of time and effort it takes to re-learn all of neuro and cardiorespiratory is very unrealistic when not even practicing in these realms of physio. We are young professionals trying to navigate through a pandemic as new grads and not feeling the least bit supported by our college. Every day at work the thought of this exam is looming over our heads, patients can't understand why we are still residents and question our competence - that we already question ourselves as new grads. The college should be supporting us and making us feel important. Please don't let this linger any longer. We deserve to be licensed, we are doing our best every day to show people that. |
| 111 | 11/16/2021 | This is a great solution and must be expedited in order to allow all current provisional license holders a fair pathway to full registration. Please move forward with this as soon as possible.   |
| 112 | 11/16/2021 | It is unbelievable that we're allowed to fly overseas, go to a restaurant, and attend a concert at this point but CAPR is still unable to resume in person Clinical component alleging lack of safety. Everybody agrees that there's no reasonable explanation for that and the Residents keep waiting and waiting with no perspective of having their exams done anytime soon. The amendments proposed by the CPO are a good start to change the actual scenario and provide some hope for tired and hopeless students that aim to start/resume their professional career as Physiotherapists in Ontario.   |
| 113 | 11/16/2021 | Excellent amendments. They provide an alternate route to registration in exceptional circumstances, such as the pandemic, and allow PTs to progress with their careers and serve the public better (by allowing them to practice if previously unable, to take acupuncture courses, to perform rostered acts.) Very good. A huge, progressive move in the right direction, given the questionable validity and reliability of the clinical exam.   |

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| 114 | 11/16/2021 | I think the amendments are great.   |
| 115 | 11/16/2021 | Great, most medical colleges around Canada and the world have these amendments already and have gotten many of their candidates through this pandemic. Its about time the college of physiotherapist step up. Hope you have a solution for the candidates that has been waiting over 2 years now and that you take action.  |
| 116 | 11/16/2021 | Yes it should change the regulations based on the current situation.  |
| 117 | 11/16/2021 | This is an important solution to an ongoing problem. We should also request a dismantlement of CAPR and independent review of their fees, as the exam fees cause unnecessary and undue financial pressure on applicants.  |
| 118 | 11/16/2021 | I support the proposed amendements to facilitate faster registration of PT residents  |
| 119 | 11/16/2021 | Agree with the proposed amendments but should expedited immediately to resolve this crisis by the end of 2021.  |
| 120 | 11/16/2021 | I am a physiotherapist who works at St.Michael's Hospital. Over the last 15 years I have taken on over a 15 students and feel very comfortable having any of my students work as independent practitioners. If I had any issues with regards to a students performance, skill or professionalism , it would be made known to the university. I feel that if students passed their clinical placement then the clinical component for licensure should be waived. Incorporate and/or add practical/scenario questions to the written exam if need be. Do away with the practical component.<br>I have licensed both in US and Canada and I do not see the added value of practical component for license.  |
| 121 | 11/17/2021 | I support the first clause of the amendment to allow those unsuccessful on the practical exam to reapply for a provisional practice license. I also support the second clause in support of those with enough practical hours to apply for an independent practice certificate. However, I maintain that a written exam is sufficient (in addition to the number of clinical hour requirements with no issues/complaints) to achieve a satisfactory level of competence. A clinical exam for applicants who have successfully graduated from Canadian institutions with clinical exams throughout their Master's degree should not be subjected to an additional clinical exam. There is no evidence indicating individuals who have passed the clinical exam are more competent than those who have only passed the written exam or even those who have only graduated their PT programs/had lots of direct clinical care time. As a profession that prides itself on evidence-based practice, having new graduates pay over \$2000 in exam fees after undergoing two years of evaluation is questionable. The decision to maintain the clinical component (the more expensive portion of the exam) can also be seen as having extremely biased stakeholders with the Alliance pushing for its inclusion in order to keep the financial benefits and careers associated with its existence. Finally, I |

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|     |            | support the third clause of the amendment, however it likely would not be needed to such an extent if the in-person component of the exam were cancelled.  |
| 122 | 11/17/2021 | I fully support the proposed regulations. The fact that our successful "written candidates" would lose a provisional practice license for failing a practical exam never made sense to me. A successful written exam should allow to to keep a provisional license regardless of the practical pass/fail status. Also, the practical exam does not test ANY of the issues that come up with the College Complaints i.e. ethics, billing, charting, sexual misconduct. At this point in the pandemic, all candidates who have passed the written exam should be permitted to complete the PISA (based entirely on prior complaints brought forth to the CPO) and demonstrate that they are candidates capable of managing the ethical arena of physiotherapy. I have personally witnessed a candidate struggle through the entire pandemic - 4 cancelled exams, a loss of a provisional license and an excessive loss of income. It is long past the time these candidates be provided with an avenue to gain a full license, especially if they have been working with a supervisor for years without any concerns. I 100% support these proposed changes and hope that the CPO moves swiftly to implement them. Careers are at stake - this should have happened over a year ago. |
| 123 | 11/17/2021 | I believe this is a step in the right direction. However, many clinics have resident PTs at part time so many residents work at different clinics. The hours should encompass work in total. What is the reason for considering one clinic?  |
| 124 | 11/17/2021 | The current structure for licensing PTs in Ontario needs an overhaul. The fact that the CPO has sat on this issue despite pleas from all relevant stakeholders the the CPOs current process is not evidenced-based and has held up hundreds and hundred of PTs is disgraceful. The amendments are certainly an improvement to the current situation. An emergency provision at the very least should have been put forward by the CPO well over a year ago. Clinical exams should never be needed in any instance.   |
| 125 | 11/17/2021 | The proposed amendments are fair and necessary to solve the backlog of thousands of PT residents as well as those unable to work due to previously failing the exam. These changes must be put in place in the event of future emergencies so that this may never happen again. Please do consider residents who chose to start a family during the PCE crisis so that their hours are accounted for- otherwise this becomes discriminatory.   |
| 126 | 11/17/2021 | I approve of the amendments, and further suggest the abolition of the clinical exam altogether.  |
| 127 | 11/17/2021 | Allowing all the residents based upon number of hours is a wonderful idea.   |
| 128 | 11/17/2021 | I agree with the amendment to allow re application for a provisional license if there has been a failure and emergency circumstances arise with the exam. However, approving independent licences based upon clinical hours should also have an interview. Something similar to a chart/practice review for current registrants. This would ensure that they are   |

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|     |            | doing all the documentation properly, understand the rules, ensure proper progression of treatment and make sure they're registration number is not being fraudulently abused. Some of the provisional PT's may be taken advantage of.  |
| 129 | 11/17/2021 | I agree with these amendments.  |
| 130 | 11/17/2021 | It's a welcome change. It's high time the clinical hours of Residents be considered.  |
| 131 | 11/17/2021 | As a resident Physiotherapist for the past 2 years, having attempted to do the exam 4 times with constant failed attempts on the part of the regulatory body to provide the exam. Having worked in hospital (ICU, COVID units, acute in-patient), out-patient clinic and in the community setting I strongly believe the past 2 years with various experiences is sufficient to prove my qualification as a fully registered Physiotherapist.   |
| 132 | 11/17/2021 | Please test the applicants in person with proper PPE as this is the environment they have to work in anyway. Also please set this up as soon as possible as to get them in the work force ASAP  |
| 133 | 11/17/2021 | Please test the applicants in person with proper PPE as this is the environment they have to work in anyway. Also please set this up as soon as possible as to get them in the work force ASAP  |
| 134 | 11/17/2021 | I am in full support of all 3 proposed amendments to the General Regulation. I think it is especially important that amendment #2 is pt in place as quickly as possible. Physiotherapy residents are being unfairly disadvantaged due to circumstances out of their control. These options will provide the current and future physiotherapy residents who are qualified the opportunity to receive an Independent practice certificate given the circumstances and considering it is long overdue in most cases.   |
| 135 | 11/17/2021 | I am in full support of all 3 proposed amendments to the General Regulation. I think it is especially important that amendment #2 is pt in place as quickly as possible. Physiotherapy residents are being unfairly disadvantaged due to circumstances out of their control. These options will provide the current and future physiotherapy residents who are qualified the opportunity to receive an Independent practice certificate given the circumstances and considering it is long overdue in most cases.   |
| 136 | 11/17/2021 | I approve of these amendments   |
| 137 | 11/17/2021 | Openness to other ways of ensuring health care professionals can practice is extremely important due to ressource limitations. Having options is great but it needs to be streamlined and objective for all candidates. Giving a second provisional certificate when failing the clinical component a -st time would not be reflecting to the public the same level of safe practice as the candidate waiting to complete the clinical exam the 1st time. I would say to have the unsuccessful candidate apply for the emergency certificate good for 60-90 |

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|     |            | days and have a specific set of rules and regulations with limitations and maybe a type of assessment until next successful clinical PCE. As for the candidates having practice for a set period of time under the provisional certificate, should have a standard practice assessment from their supervisor and patients prior to eligibility of the independent certificate.  |
| 138 | 11/17/2021 | I am in full support of the proposed amendments.  |
| 139 | 11/17/2021 | Eligibility for independent practice should be hours and experienced based. As many residents have worked 1-2 years waiting for the exam. That is sufficient as an apprenticeship. Additionally, cross reference with and complaints made to the college  |
| 140 | 11/17/2021 | Eligibility for independent practice should be hours and experienced based. As many residents have worked 1-2 years waiting for the exam. That is sufficient as an apprenticeship. Additionally, cross reference with and complaints made to the college  |
| 141 | 11/17/2021 | "Through this exemption, the applicant could also be subject to any additional requirements and/or be subject to terms, conditions and limitations placed on their certificate by the Registration Committee." - candidates that meet the listed criteria should NOT be subject to additional requirements unless stated previously and granted independent practice certificates as they have proven to be competent practitioners over 12 month+ span since the cancellation of the first practical examination in Nov 2019 with real world patients in comparison to those in the past that needed to show competence over a 1 day simulated examination |
| 142 | 11/17/2021 | I agree to cancel the clinical exam, and go based on hours for CANADIAN trained Physios   |
| 143 | 11/18/2021 | The 4th class(emergency registration) seems redundant Had that been in place at the start of the pandemic, all of those registrants would have been eligible for full licensure based on practice hours   |
| 144 | 11/18/2021 | Thank you for your proposed amendments to the Physiotherapy Act. I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination. I support the proposed amendments. I believe that the number of proposed clinical hours is fair. At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.   |
| 145 | 11/18/2021 | I think the amendment is a great idea is should have been completed 1 year ago before this mess go to this level. CAPR is an incompetent organization who is unable to adapt in modern times. The material alone is outdated and stale. Focusing on performance in the rule world through a practice supervisor is far better option than a test that has not changed for the last 20 years.  |

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| 146 | 11/18/2021 | Thank you for your proposed amendments to the Physiotherapy Act. I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination. I support the proposed amendments. I believe that the number of proposed clinical hours is fair. At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.  |
| 147 | 11/18/2021 | Thank you for your proposed amendments to the Physiotherapy Act. I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination. I support the proposed amendments. I believe that the number of proposed clinical hours is fair. At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.  |
| 148 | 11/18/2021 | <ul style="list-style-type: none"> <li>• Thank you for your proposed amendments to the Physiotherapy Act.</li> <li>• I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination.</li> <li>• I support the proposed amendments. I believe that the number of proposed clinical hours is fair.</li> <li>• At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.</li> </ul> |
| 149 | 11/18/2021 | Thank you for your proposed amendments to the Physiotherapy Act. I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination. I support the proposed amendments. I believe that the number of proposed clinical hours is fair. At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.  |
| 150 | 11/18/2021 | The proposed amendments look great. However, '600 hours at the same facility' should be changed as many residents take on part time jobs split between 2 clinics. It wouldn't be fair to say that a resident with 600hrs at one clinic is clinically more competent than a resident with 600hrs across 2 different clinics. I'll also add that 1200 hours seems too high, especially since many residents have chosen to reduce their hours to study for the exam. A more appropriate number would be 800.   |
| 151 | 11/18/2021 | I'm in favour of the proposed amendments. I think the approach the college is taking is reasonable and balanced. I'm against eliminating the practical exam in standard circumstances. But I am aware that these are exceptional circumstances. I'm in favour of the length of time that should pass before considering waiving the examination...this would then apply to residents who have had their exam cancelled twice or more, for example, it seems. It should still be a challenge to register without the exam. Thank you for the work you do.   |

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| 152 | 11/18/2021 | <p>I am familiar with the ongoing situation involving Physiotherapy Residents who are waiting to complete the clinical component of the national examination. I support the proposed amendments. I believe that the number of proposed clinical hours is fair.</p> <p>At our facility, we have clinical resources and program specific orientation, including a checklist of competencies that is used to evaluate the competency of the physiotherapy resident/entry level therapist.</p>  |
| 153 | 11/19/2021 | <p>All looks much better than current. Can't believe there was no contingency for a lack of exam previously. Think it's ridiculous that someone unsuccessful in passing the practical exam, especially if they have no safety issues, can't continue to work under supervision IF they have a supervisor willing to work with them</p>  |
| 154 | 11/19/2021 | <p>Thank you for your proposed amendments to the Physiotherapy Act. I am familiar with the ongoing situation involving Physiotherapy Residents who have been affected by examination delays and who continue to wait to complete the clinical component of the national exam. I have read your proposed regulation amendments and am in full support of them. With respect to the second proposed amendment, I believe that the number of clinical hours stated on your website is fair and appropriate. I would like to add that at our facility, we have clinical resources for new staff and program specific orientation that includes a checklist of competencies that is then used to evaluate the competency of the physiotherapy resident/entry level therapist. This has worked well for our facility to date, and we have not had any concerns with safety surrounding the care provided by physiotherapy residents. As a current physiotherapy resident, I am in support of these proposed amendments as the current limbo that residents have been caught in has lasted too long and I would not wish for any future residents to have to go through this same ordeal. I think it is prudent that we pass these amendments so that we might be in a better position to respond to these types of scenarios in the future.</p> |
| 155 | 11/19/2021 | <p>The college should go ahead with the proposed amendments</p>   |
| 156 | 11/19/2021 | <p>The Emergency Class license should be held for longer than 60 days. The pandemic has already been ongoing to 20+ months; this would have required the applicants and the College to renew those licenses and be an over burden of time on both sides. I can't imagine the administrative effort it would take to renew applications that often. Perhaps those types of licenses could be valid for 3 to 6 months? I also think the type of license that is based on supervised practice hours is definitely something for the College to consider for the future.</p>  |
| 157 | 11/20/2021 | <p>Regarding Provisional Practice (8): My only complaint is that this wasn't done sooner. In the absence of evidence explicitly showing the value of a second in-person or virtual "clinical" exam there is absolutely no way this exam should ever have been made mandatory by law in an "evidence-based profession". Evidence needs to come first. Always. So yes, in the absence of evidence, let us use our collected hours working as supervised residents to speak for themselves. A year is a good time-frame. I'm down with that. It is a waste of time and resources for all involved to administer a sketchy exam. Want to make safety a priority in</p>  |

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|     |            | <p>this profession? Compile a document highlighting the major safety violations of the last three or four decades. Then add in other standard safety considerations and "Red Flags" for Physios to be aware of and make this document free to all physios to review. Then make a triennial quiz, much like your jurisprudence modules, on such safety scenarios. Hey, I'm just tossing these ideas out there. But I'd rather do a safety quiz every three years for my entire career to keep sharp than do ridiculous series of unrealistic 5 and 10 minute scenarios to rapid-fire through and act as if that has any bearing on how I practice in real life.</p>   |
| 158 | 11/20/2021 | <p>I agree with the points 1 and 2. 1. Permit applicant to reapply for Provisional Practice Certificate if unsuccessful on the clinical examination. Who failed the exam should have a chance to practice, the supervisor should be more present, and report any concern, even the College should check them. They can send a monthly report to the College, for example. 2. Permit registration for an Independent Practice Certificate based upon practice hours. For me, this point makes more sense than one day exam. This will be one year working safely, with no concerns. There are a number of courses teaching how to perform during the exam, they teach the stations, step by step, this is not like a real world. 3. Create an Emergency Registration Class I cannot see a purpose for this.</p> |
| 159 | 11/21/2021 | <p>I am in full support of these amendments and would like to see provisional practice registrants be granted their full license due to the unprecedented circumstances we find ourselves under.</p>   |
| 160 | 11/22/2021 | <p>I think these amendments are absolutely necessary. Coming up on almost 2 years of no clinical exam has been detrimental to the country, to peoples mental health, careers and families. I think guidelines to create safe and effective registered physiotherapists without a "hands on" VIRTUAL exam is the best answer. Hundreds of clinical hours must outweigh a few hours long unrealistic clinical exam. So long as these guidelines are strict and followed, I think this would be totally appropriate. I live and work in a northern community of Ontario, and let me tell you, my poor little small town has certainly seen the effects of this clinical exam delay amidst the pandemic. This breaks my heart. The solution is obvious, we need to act on it.</p>                                  |
| 161 | 11/22/2021 | <p>Thank you for allowing the review of the registration changes. I am happy to see these changes and feel they are appropriate to take at this time. I feel there are appropriate safe guards.</p>  |
| 162 | 11/23/2021 | <p>I agree with the amendments and feel that it is necessary to get more independent physios registered to aid in the provision of health care services (physio).</p>  |
| 163 | 11/23/2021 | <p>I support the idea about registering on the basis of clinical hours specially for those waiting since 2 years to get registered. A mandatory online course with practice based scenario and quiz could also be considered.</p>  |
| 164 | 11/23/2021 | <p>Plz cancel the practical exam.</p>  |

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| 165 | 11/24/2021 | <p>While this is a step forward its simply not enough. Any scenario in which the college goes back to collaborating with CAPR is unacceptable. Their leaders in Katya and Denis, have showed their true colours in twitter threads. Leaders of such institutions should not be engaging in unprofessional discourse on social media sites. As a resident, I'm not scared of an exam. I'm not too lazy to take an exam. I simply believe the ongoing distress and further stress of going through an exam would be too much for me and many others. So many sleepless nights. So many hours that could be spent taking courses to enrich my PT knowledge. I can't take a proper acupuncture course because what if the exam pops up and all of a sudden I have to study for that instead. Even financially too, I cant pay for the acu course AND the capr exam if it comes back. Its so unacceptable what you and CAPR have put us through. It really makes me want to cry. Its so disheartening. All we want to to is help people, all you want to do is make money and say that youre keeping the public safe because you've assessed my 'competence' to put the bed brakes on before treating a patient.</p>   |
| 166 | 11/25/2021 | <p>Hello, First of all, my heartfelt congratulations on making very positive progress on getting this proposal in the works . I think I am not alone in conveying that you have heard the voice of thousands of potential PT candidates who are in limbo, and it is a refreshing change to see the willingness to remediate this situation after the harrowing experience that the PT candidates have gone through. So please accept my compliments for starting on this and I hope this proposal comes to fruition!. In terms of feedback, I only have one: why are you complicating things with bullet #3 under section "2. Permit registration for an Independent Practice Certificate based upon practice hours." (I have highlighted the text that I want to be considered): "- have completed at least 600 clinical practice hours over the previous 6 months at the same facility. " That is, why are you putting a constraint that the 600 hours in the previous 6 months should have been completed at a single facility. To be clear, I think that using the number of clinical practice hours is the most sensible metric to be used and kudos to everyone who thought of this idea. My point is just that adding a constraint regarding *where* the number of hours were spent is quite needless. First, I am sure there are valid reasons why a resident is working at multiple locations. Second, the fact the college guidelines allow for upto 3 supervisors means that this is a reasonable scenario to expect. So in my mind to add a constraint like this is contrary to what the college is allowing (multiple supervisors) vs what you are expecting from practicing residents in your proposal (you are practically saying, you need to be working at "only 1 facility"). Further, the 2nd bullet in the proposal does not mention anything about a restriction on what facility(ies) the hours have been accumulated. So this additional constraint makes little to no sense to me, even though I tried very hard to understand the reasoning behind this. I am only seeing this as a rather meaningless and bureaucratic hurdle, and I am sure that this is absolutely against the spirit of the proposal itself. Keeping these points in mind, I urge very strongly that you consider striking out the "at the same facility" restriction. I have followed the whole saga of the Physio clinical component exams very closely, and I hope that you will consider my humble and honest feedback and implement my suggestion of removing "at the same facility" constraint. Kind regards, Onkar Singh Cell: 519-222-7694 <a href="https://www.linkedin.com/in/onkar-singh-3088b51/">https://www.linkedin.com/in/onkar-singh-3088b51/</a></p> |

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| 167 | 11/25/2021 | <p>First of all, my heartfelt congratulations on making very positive progress on getting this proposal in the works . I think I am not alone in conveying that you have heard the voice of thousands of potential PT candidates who are in limbo, and it is a refreshing change to see the willingness to remediate this situation after the harrowing experience that the PT candidates have gone through. So please accept my compliments for starting on this and I hope this proposal comes to fruition!.</p> <p>In terms of feedback, I only have one: why are you complicating things with bullet #3 under section "2. Permit registration for an Independent Practice Certificate based upon practice hours."</p> <p>(I have highlighted the text that I want to be considered):</p> <p>-have completed at least 600 clinical practice hours over the previous 6 months at the same facility;</p> <p>That is, why are you putting a constraint that the 600 hours in the previous 6 months should have been completed at a single facility. I am sure there are valid reasons why a resident is working at multiple locations; and the college guidelines allow for upto 3 supervisors. So to add this constraint is very contrary to what the college is allowing (multiple supervisors) vs what you are expecting the work spread to be (practically saying, you need to be working at "only 1 facility". In fact, the 2nd bullet does not mention anything about a restriction on what facility(ies) the hours have been accumulated. So this additional constraint makes little to no sense to me, even though I tried very hard to understand the reasoning behind this. Frankly I am only seeing this as a rather meaningless and bureaucratic hurdle, and I am sure that this is absolutely against the spirit of the proposal itself.</p> <p>Keeping these points in mind, I urge very strongly that you consider striking out the "at the same facility" restriction.</p> <p>I have followed the whole saga of the Physio clinical component exams very closely, and I hope that you will consider my humble feedback.</p> |
| 168 | 11/26/2021 | <p>This is a good initiative to provide the independent practice license to the ones who are struggling since last couple of years. There is no sense in conducting the practical exam for them who are now already practicing without any allegations since the COVID time. Please make this process fast and help them in getting the full practice license ASAP</p>  |
| 169 | 11/28/2021 | <p>This legislation is discriminatory in its hourly requirement timeline towards those who have had gaps in their employment throughout their Residency for legitimate reasons. The legislation should be adjusted to 1200 hours or 600 hours at 1 facility throughout THE ENTIRE DURATION of their Provisional Practice License and NOT just within the last 12 months.</p>  |
| 170 | 11/29/2021 | <p>I am very disappointed with CAPR and CPO. Its been almost 2 years that, I haven't got a chance to challenge the exam. Its very stressful situation, i have prepared multiple times but not able to challenge exam. I support that that who have failed the clinical component, should get there provisional license as they also haven't got chance to challenge the exam. And regarding last 12 months experience with 1200 hours and 600 hundred hours in same facility in last 6 months is also not fair for physiotherapy residents who were preparing</p>   |

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|     |            | exam for months in last 12 months and worked part time and took time off to prepare for one of the highly competitive exam. Its unfair for so many residents who have not worked full time in last 12 months. We want a better solution for us.  |
| 171 | 11/29/2021 | Being a supervisor of one of these residents, I can definitely agree that she is more than competent to act independently as a physiotherapist with the time she has spent practicing. I do not believe the PCE is necessary for her to become registered. I agree.  |
| 172 | 11/30/2021 | I have reviewed the amendments to the physiotherapy act and I have the following comments: First of all, if an applicant fails the practical exam I have never understood why that applicant can not continue to work under supervised practice. How are they to keep learning?? They are no longer in a University program. Most of their peers would have passed and moved on and they have no one to study with. This sets them up for failure once again. I have thought that prior to the pandemic. I am a physiotherapist with 34 years of experience in orthopedics. I never had to do the PCE. I could not pass that exam as I am no longer competent in ICU, cardiac rehab, neuro, long-term care, pediatric neuro, etc, etc. I understand the standards of practice in all of these areas as a former college Assessor, but I am not competent to practice in these areas. I refer patients that come to my office that I am not competent to treat to other PTs that are competent to treat them as part of my self regulation requirement. To hold any resident hostage from moving forward in their career for 2 years while they wait to do an exam is absolutely unacceptable. I have seen two residents in my practice delay their learning in orthopedics so that they can continue to study for a general PCE that has yet to even be scheduled. Graduates from other countries that Canada recognizes (eg UK) that have worked in one area of physio (eg ICU) as a physiotherapist would have difficulty practicing ICU in Canada as that physio would lack the skills in neuro and orthopedics to pass the PCE. They may never intend to work in neuro or ortho and yet they have to pass a test in this area. This does not make sense. CAPR and the college need to be accountable to the public for failing to provide an exam to license physiotherapists for 2 years causing a shortage of physiotherapists. FCAMPT has already run a set of in-person OSCE exams with modifications ( PPE, one model, less contact, etc). Why has CAPR not been able to do this??? I understand that the Ontario Chiropractic college has not had a hold-up in licensure. From what I have read all other allied health professionals have not had the delay that physiotherapists have had. I have watched several council meetings online. I do not feel the committee understands the urgency of this matter. The backlog continues to grow. I feel the college should fully licence PT residents that meet all of the requirements in the second proposed amendment immediately. I do not understand how the clinical exam is currently an exemptible requirement and yet in this unprecedented scenario that we find ourselves in, the college registration committee has never waived the entry to practice exam for an applicant. The committee should allow this exemption with no further restrictions to the residents that meet the requirements in the second amendment. Once provided an independent license to practice each physiotherapist should be viewed and assessed like all other registered physiotherapists. Providing a 60-day emergency registration class only delays the backlog and continues to hold the current residents hostage from learning more in their current area of practice as they are trying to keep the |

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|     |           | <p>general exam content fresh in their minds. Moving forward for the new residents this does not solve the problem if a resident were to fall ill prior to their exam as traditionally the PCE was only held twice a year ( every 6 months, not 2). CAPR failed to provide an alternate exam within this 60 day period. In fact, they have failed to provide an alternate exam in 2 years!!! Moving forward it is time for the college to work with the Canadian Universities to come up with an evidence-based form of assessment for new graduates from Canada and for internationally trained physiotherapists. The current committee is clearly not moving forward in a timely manner and needs to be held accountable to the public for holding back the learning of PT residents and for causing severe mental health concerns for the PT residents held in limbo. A medical practitioner that is moving forward in their career is able to provide continuity in treatment for patients. Taking time off to study for an exam 4 times in the past 2 years has resulted in many patients needing to be transferred to another PT for treatment while the PT resident takes time off to study. The supervising therapist is now having to deal with a much larger caseload which ultimately has to affect patient care. We are all human and can only work so many hours in a day. In short drop the OSCE and do an online written exam and use the universities to come up with the clinical supervision requirements for registration of Canadian and foreign trained PT residents.</p> |
| 173 | 12/1/2021 | <p>Hello, As an Ontario resident, member of the CPO and supervisor to PT residents for over one year, I would advocate for the current PT residents who have completed +1200 practice to be allowed independent practice. I also support that those who were not successful with the PCE prior to the pandemic, be allowed to carry provisional practice license as this will keep them in touch in the profession and prepare them for completing their PCE when available. Thank you for the opportunity to provide feedback. I hope there will be a resolution soon not only to help the PT residents but also the health care system at large due to the high needs for physiotherapy care in the province.</p>  |
| 174 | 12/2/2021 | <p>23(4.1) If there is a running of the practical component of the PCE during the time designated as "emergency or exceptional circumstances" and the candidate repeatedly fails, will they still have a certificate for provisional practice? 23(8) Aside from this pandemic, what is considered an exceptional circumstance, ie personal vs public health emergency? 23(8) In a unionized setting, the performance of colleagues, particularly disciplinary action or actions that will affect one's employment, is not permitted between union members. If there are concerns regarding a candidate's performance, it is the responsibility of management to address. This has the potential to place the supervisor of an applicant (who is usually a co-worker) in a position of conflict between college expectations and union/employment rules. Emergency Assignment 24. What happens to PTs with the emergency assignment certificate after the emergency as been declared over? Will they then be expected to complete the PCE?</p>  |
| 175 | 12/2/2021 | <p>I support the amendment and this needs to happen ASAP as you are prolonging the suffering for all current and future Resident Physiotherapists.</p>   |

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| 176 | 12/2/2021 | I support the following amendments proposed by the college: 1. Permit applicant to reapply for Provisional Practice Certificate if unsuccessful on the clinical examination.<br>2.Create an Emergency Registration Class   |
| 177 | 12/2/2021 | I agree with all of the proposed amendments.   |
| 178 | 12/2/2021 | This is an appropriate response to prolonged delays in examination and in light of current literature and practice.  |
| 179 | 12/2/2021 | I agree with these attached amendments! Thank you for asking for our feedback  |
| 180 | 12/2/2021 | These are all appropriate and well overdue changes.  |
| 181 | 12/2/2021 | Provisional certificate is ok to give who failed their clinical exam in first attempt but it is not ok to give independent practice licence without clinical exam. In person clinical can be conducted as other colleges are doing e.g pharmacy college. Think about candidates who failed their clinical exam 3 times in past and can not practice as physiotherapist because of 3 failed attempts , it not fair with them if college give independent practice certificate to these candidates without clinical exam. It is better to conduct 4 clinical exam in one year with small groups so that 1000 people who are waiting for their exam can take clinical exam. 3rd regulation for emergency independent practice certificate for 60 days is ok to proceed. Thank you   |
| 182 | 12/2/2021 | As a PT Resident, I have just accepted a new position at a new clinic. I was working 20-30 hours per week at my previous clinic and will be working at least 20 hours per week at the new clinic, with the hopes to progress to full-time. The clause in the new amendments that says "have completed at least 600 clinical practice hours over the previous 6 months at the same facility" may make it impossible for me to be able to count my practice hours as a valid exception to the clinical PCE because of this job change, even though I've been a resident now for over a year. If I hadn't changed clinics, there would be no issue. This clause should not be in the amendments. If the practice supervisor has any issues, that should be cause to not allow licensure, but a change of clinic because a previous employer came looking for me and offered me a job? That shouldn't be reason to exclude a resident from full licensure. |
| 183 | 12/3/2021 | Why this step in the right direction took so long ? This is the way the leader should be acting since the pandemic started and should have thought in advance rather than waiting for so long and after such a long social backless. It's a step in the right direction - thanks finally leader are thinking in the right direction  |
| 184 | 12/3/2021 | The Clinical exam has never been an accurate measure of a PT applicants competence, especially in the case of foreign trained therapists. It is clear that there is an advantage in being trained "to the exam" by a Canadian applicant. This is unacceptable. There should be a permanent change enabling provisional practice hours to be used to finalise competency,   |

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|     |           | such as is done in other countries. This is a far more accurate assessment of a candidate's real competence. Thank you.  |
| 185 | 12/3/2021 | it would be fair for provincial certificate holder if they have completed 600 hours in 6 months at one facility. Thank you.  |
| 186 | 12/4/2021 | I think that these are great options if all of the proposed amendments go through! I am just not sure if this is helpful for international PTs, but definitely for PT residents who have now been waiting 2 years and been practicing under supervision.   |
| 187 | 12/5/2021 | Biases: I am a sole practitioner, with no agenda for hiring, so feedback is not tainted by personal gains to be made in any regulatory changes. Great to get "feet on the ground" for treating Ontarians, but only if sufficiently competent - presumably having achieved a clinical masters (or international equivalent), most, if not all graduates have demonstrated this academically and in practical placements. Proposed changes allow for this - bravo! I applaud the latitude given for consideration of individual circumstances, and feel this should have been in place previously for those that may have failed the practical - not all, but some may have been appropriate for such consideration. Looking at each case for its own merits would seem to be a responsible approach. I wonder why 600 and 1200 are the markers for "prior clinical experience", as this works out to only 20 hours worked per week? Not a show stopper for me, just an interesting place to make the cut-off - why not 30 or 40 hours per week? Why "60 day" certificates? Seems like significant work to "renew" these every 2 months - either the applicants are competent to practice safely until the next opportunity to complete the practical exam, in which case why impose the 60D time limit, or they are not sage to practice, in which case one questions why the College would expose the public to them for even 60 days of risk? Less administrative work and more time for oversight work seems possible with longer certificate periods. Finally, and as a point of context, I am still pondering why, oh why the following: As I understand it, CPO is one of the constituents of The Cdn Alliance of PT Regulators and therefore, along with the other regulator members would seem responsible for the operation of the same -not just a member, but a controlling entity of the Alliance. Why then is CPO spending this time adjusting the CPO rules for registration made necessary by what appears to be a less than stellar performance by the Alliance to which the CPO is an active member (vis a vis twice-delayed exams, poor public response (ie- none that I have seen) to external criticism, apparent lack of unified national response by Colleges)? Would more concentrated efforts to "fix the problem" at the Alliance level in a timely fashion not prove more widely-fruitful and longer lasting? I recognise I may not be privy to all that may be developing simultaneously, but as an interested member who has been watching and looking for a response from my College and the Alliance for which it is a responsible member, I feel that there has been insufficient public response, or, if there has been a response of which I am not aware, there has been inadequate publication of the same. The foregoing was offered in good faith to provide member feedback along with context, which is usually necessary for any intelligent consideration of factors that affect a given situation or environment. |

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| 188 | 12/5/2021 | I agree with the amendments, although would suggest creating a longer window for third item, the emergency class. Currently the proposal is for 60 days, but perhaps should be longer. Thank you. Nancy Durrant, PT   |
| 189 | 12/5/2021 | The College has spent so much effort and money advocating for standards in our profession. I don't think its a good idea to allow such a large population of people to bypass the most critical test of applied knowledge. You also have to factor in that their clinical placements were also impacted by COVID so they likely didnt have as many cases/independence/hands on time as previous PTs. Unfortunately not all practice settings and supervisors are created equal. Some provide very little supervision. The reality is that the provisional license doesnt limit much from a clinical standpoint. Mentorship is useful when youre a new grad so prolonged supervision is hardly a bad thing. I think what is stressing people out is the uncertainty. It would be helpful to set a time for when practical exams will resume even if the date is far off.   |
| 190 | 12/5/2021 | I think the use of emergency licence and ability to reapply for provisional license are reasonable amendments. The emergency license can allow PTs to work in more settings than provisional license. This would also allow more time before practical exams return. Allowing for another provisional license would help decrease the anxiety that may be quite high during the pandemic. Lastly, I do not think giving the license based on practice hours is a fair idea. Even without the pandemic situation, many PTs can work that many hours on their provisional license. In that case, the argument would be to allow that in all circumstances. I have been an examiner and unfortunately a certain percentage of PTs are not competent on many stations. I see the importance of exams. Medical specialties have their Royal College OSCE style exams and these exams are valuable. There are many shady clinics that I have heard about that will be willing to sign off on candidates for obtaining license. In my opinion this would crease a whole new set of problems. |
| 191 | 12/6/2021 | Well deserved for the residents affected. The ones that deserve second chances is extremely important. As are the emergency class and hours required for independent licensing. Glad to see these steps being taken to right the wrongs that have occurred over the last 1.5 years. Good on you College of Physiotherapists of Ontario  |
| 192 | 12/6/2021 | These proposed amendments are exactly what residents and licensed physiotherapists have been asking for. I hope this is put in place ASAP to show the residents they have been heard and there is positive change in the profession. This will make great impacts on the entire healthcare system making Physiotherapists more accessible   |
| 193 | 12/6/2021 | I think this should have been done a long, long time ago. There has been an unimaginable amount of hardships that residents have had to deal with. It's about time for the colleges to be making a change as every other profession has made. The one's waiting the longest should be at the top of the list for the proposed amendments. Emergency class and independent license based on hours are huge steps in the right direction which is finally providing some fairness to the competence the residents have been practicing with.  |

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| 194 | 12/6/2021 | Why is the emergency registration class only 60days. The pandemic has been around for almost 2 years, it isn't going away anytime soon. There shouldn't be a limit at all for this emergency registration class. We be given an "Independent license to practice" = competence to practice independently. Only to take it away after 60 days. Really makes 0 sense when the college is supposed to be making the rules as to who is and who is not competent to practice. How can someone only be competent for 60days?  |
| 195 | 12/8/2021 | Against it   |
| 196 | 12/9/2021 | Thank you for giving me opportunity to give feedback. Just before I start want to clarify I am not against PT resident nor anyone but just believe in fairness and protect College and the Ontatio Public.The update received from college was really concerning so thought to provide feedback. I am in independent practice since 3 years, have worked in all kind of settings ( RH, Community, clinic) all through the pandemic and and have seen the work of PT residents. Currently Provincial practise holders are the candidates from all background and may have passed in 1, 2 or 3rd attempt. I have seen some even cannot communicate well with patients forget about treatment, finally patients change therapist or dont show up.If you give them Ind practise without exam, it's like giving student PT Provincial practice certificate without written exam. If you give PT rresident Ind Prac certificate without exam then people will be at risk and also College along with entire future of PT profession. Current Provincial practise holders might have given written even from abroad we are not sure. If you give them ind certification, the  |
| 197 | 12/9/2021 | It's really appreciated the changes you are bringing in but few criteria is very hard to fulfill by applicant like applicant suppose to work with supervisor for 600 hours ,most of clinics can't afford to keep 2 physiotherapist at the same clinic so it's likely impossible for residents to work with their supervisors ,and it's already challenging for most of PT residents to find a supervisor so please reconsideration this critiria as most of us could not eligible as we have been waiting and being optimistic that our college will bring a solution to resolve this issue but we are still at the same situation and carrying same amount of stress. If you still planning to conduct an exam please please think that 3 times our exams had been cancelled previously we went through too much stress by asking our employer to taking some time off for preparation because of that too some of us end up with reduced working hours It will be fair enough if you think about all candidates what I mean that who already unsuccessful in their 1 st & 2nd attempts and also who haven't appeared for clinical exam yet. So please bring a solution considering all groups of candidates. |
| 198 | 12/9/2021 | Following changes needed - in the wording Section 23 (4.1) be amended to remove reference to 'practical examination' and edited for clarity: Subsection (4) does not apply to a person an applicant who has failed practical component of the examination, or any component thereof as determined by Council, only one time where there is exceptional circumstances where Council, at its sole discretion, has determined that exceptional circumstances exist and the person applicant fulfils such additional requirements and is   |

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|     |           | <p>subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee. For purposes of this subsection, "exceptional circumstances" includes, but is not limited to, situations the examination or any component as determined by Council is not available within a reasonable period of time. Section 23 (8) be amended to remove reference to 'practical examination', edited for clarity and state that criteria for waving requirement of the exam or any component of the exam should lie within the purview of the Council and reflect best practices in professional regulation at the time: Paragraph 2 of subsection 19(1) does not apply in respect of the practical component of the examination, or any component thereof as determined by Council, where the person has fulfilled whatever conditions or requirements that have been specified by Council at its sole discretion and such other engaged in clinical practise under a certificate of registration authorizing provisional practice for at least twelve months and 1200 practice hours, with at least six months and 600 practice hours of which are with one employer or in one setting where the applicant's supervisor also works, without any concerns arising, where there are exceptional circumstances, such as the practical component of the examination is not available for an extended period of time, and where the person meets such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee.</p>   |
| 199 | 12/9/2021 | <p>Thank you for giving me opportunity to give feedback. Just before I start want to clarify I am not against PT resident nor anyone but just believe in fairness and protect College and the Ontatio Public.The update received from college was really concerning so thought to provide feedback. I am in independent practice since 3 years, have worked in all kind of settings ( RH, Community, clinic) all through the pandemic and and have seen the work of PT residents. Currently Provincial practise holders are the candidates from all background and may have passed in 1, 2 or 3rd attempt. I have seen some have difficulty communicating with patients treatment Is another thing, finally patients change therapist or dont show up.If you give them Ind practise without exam, it's like giving PT student Provincial practice certificate without written exam. If you give PT resident Ind Prac certificate without exam then people will be at risk along with College and entire future of PT profession. Current Provincial practise holders might have given written even from abroad we are not sure given that it's done virtually. PT resident are not losing anything with the change as they are already in practice since pandemic plus they also got Provincial certificate good for them, Plus the ind certificate without exam will be bonus for them. Rather you guys should think about people who have tried clinical in the past once or twice and waiting for years to pass the exam, these people should get first chance to do exams. Let's talk about exams. I am working in the real world of Physiotherapy practise in the pandemic. If you see everything is back to normal just like before pandemic, just with masks, distancing and hand Hygiene almost PTs are seeing patient, then why the alliance is not clinical again like before. If you see BC, Alberta or even Quebec everyone has alternative exam in place temporary. Then why only ontario has this in place just with practise hours and no exam. I understand exam from college is lot of work but at least it will be fair for everyone, as I said the alliance can start exams again with precautions. Now even more people are getting vaccinated even with booster available don't think pce clinical will be an issue to start again in person Let's say you pass this policy, Then it will be unfair</p> |

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|     |            | <p>for 1.candidate who gave his last clinical attempt in November 2019 and did not pass 2. Candidate who spent all money, life in Canada and couldn't complete 5 attempts in clinical 3.candidate who didn't successfully complete 3 written attempts 4. Current Independent PT who have spent life, career, time, energy taken loans to pass the clinical 5. Public will be concerned when they hear 6. Candidates whose credentials alliance have not accepted and had to change career. PT seeing them without passing exam All above people will definitely have impact and will think why college did that. For better future of PT profession as a whole community, best approach would be alliance starting in person exams again or college taking exams as the other province have done and giving first priority to candidates who have already attempted clinical once or twice in the past and not for PT residents who are already earning well and can manage. By doing this nobody will blame college in future and will be fair for everyone. Who knows hearing this lots of PT from other province will plan moving to Ontario to get ind practise, not to say we have so many PTs in the past years have got license in Quebec to avoid pce written/ clinical and then move ontario and get licensed. I just wanted to be fair. Finally you guys know the best for the profession as you are more experienced as President and CEO and practise advisors This was my feedback Thanks for reading all this and hope it helps</p> |
| 200 | 12/9/2021  | <p>If a PT with provisional license is able to obtain their Independent license after 12 months and 1200 hours worked, will they have to do an exam whenever the next examination is offered? Would there be an evaluative component to their Independent licensure that goes beyond the PT supervisor role (which does not use a standardized outcome measure to evaluate PTs with provisional licenses)? As a PT supervisor to a PT resident at this time, I would not feel comfortable being the gate-keeper to whether this PT resident should be fully licensed after 1 year as I may not be able to evaluate all PT assessment/treatment as well as ortho/cardioresp/neuro components that the PNE would have.</p>  |
| 201 | 12/9/2021  | <p>Clinical component of the exam should not be removed from the regulation. It can be delayed or postponed . The candidates should be provided temporary licenses until the exam is not happening.</p>   |
| 202 | 12/10/2021 | <p>Emergency class - who would be applying to this? PT residents? need to clarify who would be applicable for this type of license.</p>   |
| 203 | 12/10/2021 | <p>I agree with the amendments. Once the pandemic is over and the clinical component of the exam is up and able to run I would hope it will continue as I feel it is a valuable stepping stone to ensure competency of the physiotherapists to protect the public. I understand the need for the amendment but feel the candidates that completed their program during the pandemic may also be the ones that need a double check to ensure competency as the schools had to make changes to programs and actual clinical placements were impacted. Thanks.</p>   |
| 204 | 12/12/2021 | <p>Thank you for the opportunity to provide feedback on the amendments. I would recommend that the first amendment (to permit applicant to reapply for provisional</p>  |

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|     |            | <p>practice certificate if unsuccessful on the clinical exam) be altered to permit candidates who have failed the clinical component on more than one occasion to apply. I believe that the amendment as written will unfairly disadvantage internationally trained physiotherapists, particularly with the recent loss of funding for the bridging program for internationally trained PTs at University of Toronto. Being unaccustomed to the Canadian health care context and testing style, it is more common for these PTs to fail the exam more than once, and they may require additional opportunities to be successful. The 2nd amendment as written appears reasonable. It is very confusing that presently, the Registration Committee Policy for Exempting Provisional Class Registrants from the required Clinical Examination includes a criterion which renders candidates who who not practice at the same location as their supervisor ineligible for the exemption. This criterion appears completely arbitrary and unnecessary, considering that the College supervision requirements allow supervision of PT residents working at a different site. This feedback may ultimately need to be shared in a different forum, but I strongly oppose this criterion and recommend that it be modified as soon as possible as it excludes a large number of potentially suitable candidates from this exemption. The 3rd amendment appears potentially useful but it is lacking explanation of situations in which it may be applicable. For example, could it potentially be invoked to allow registration of candidates who are ineligible for other exemptions to registration requirements, in an emergency situation? Thank you again for this opportunity.</p> |
| 205 | 12/14/2021 | <p>In general, the proposed amendments look good. However, I believe the practical exam should be offered at this time. For fully vaccinated applicants, examiners and actors, it should be safe as all other indoor activities are permitted (restaurants, sports events, theatre, etc). The virtual exam clearly was not successful; it is time to resume offering the practical exam- in person. Let's get these applicants through the process and registered!</p>  |
| 206 | 12/15/2021 | <p>This is a good first step to allow at least some of the cohort of residents to become fully licensed. More work needs to be done and a full evaluation of the usefulness of the practical exam must be done to determine if this is really needed in the future.</p>   |
| 207 | 12/15/2021 | <p>I think that after 1200 hours of working that a 60 day emergency license can be granted, possibly extended a maximum of two times. i.e., a further 120 days total. However, I strenuously disagree that a full license should be granted simply because someone has worked for one year under a provisional license. The Canadian written and practical exams are very thorough and include testing across all physiotherapy disciplines- neuro, ortho, medical, geriatrics, cardioresp, paed's etc. Someone who has worked for an employer for one year will have had exposure and gained experience in all likelihood to one type of physiotherapy only. As such a full license would imply clinical competence in all areas, but the individual would not have demonstrated those diverse skills. The fail rate for the practical exam is much higher than the written for obvious reasons- theoretical knowledge does not always mean practical skill or competency. I sympathize with those affected by the delays. However, forgoing the clinical competency requirement for licensing would undermine the professional designation physiotherapists have worked so hard to achieve and maintain. Physicians wouldn't do that. If nurses or pharmacists have done so then we should not use that as justification for lowering the standards of our own profession. There</p>  |

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|     |            | <p>must be a way to implement practical exams, likely in a different scheduling way. Perhaps instead of twice a year en masse, the exams can be held monthly in more manageable numbers to address COVID guidelines. Please keep in mind that physiotherapists are and have been working during this pandemic. If we can safely work with direct patient care, the College can manage to safely implement in person practical exams. They need to do so and address the unfair exam backlog and not give in the easier option of forgoing the exam altogether. If it requires booking practical exams in groups on a monthly or even weekly basis then the College needs to do the right thing for the professional standards and for those applicants waiting and put in the extra time and clear the backlog. If we as regulated professionals can manage day in and day out to work in direct patient care under exceptional circumstances, the College members can do the same and implement the practical exam process again.</p>   |
| 208 | 12/15/2021 | <p>On balance, these are acceptable moves forward given the current situation. To say it's perhaps been a bit too delayed in coming is irrelevant at this time, let's just focus on moving forward with the amendments as described. Larger picture however, I encourage the College and Board to consider the ongoing value of an in-person practical exam component as a final barrier to entry for new clinicians. Most specifically is that it is increasingly clear that these in-person requirements are vulnerable to any number of threats - be it threats related to public health crises like another pandemic, environmental disasters and barriers to travel, economic or political barriers including for example union strike actions or geographic travel restrictions, it just seems that the questionable value of the in-person component is not balanced by the risks, burden, and threats to the ongoing ability to provide a predictable annual or semi-annual in-person exam all on a single day, which is to say nothing about the inequitable and undue burden placed on those young clinicians who are not close to a major urban centre. It is clear by now that if the goal of the PCE is to protect the safety of the public, there are far better ways to do so than to use a single-day mock practical exam. I encourage the College and Board to engage in some facilitated critical reflexivity around just what the PCE is meant to accomplish, in whose interest, and to what end.</p> |
| 209 | 12/15/2021 | <p>After reviewing the registration amendments for the emergency circumstances, I have 2 things to highlight.</p> <ol style="list-style-type: none"> <li>1. The criteria for an applicant to work 6 months “at the same place” seems irrelevant. I feel it would be unfair if the workplace or applicant would unexpectedly have to change the work timeline (ie. applicant moving, another worker returning earlier from a maternity leave...)\</li> <li>2. 60 days may seem a little short for an emergency certificate specially that we see that this pandemic is with us for over 20 months now. How involved/a hassle would the renewal process be?</li> </ol> <p>Thank you for considering these points and thank you for addressing the issue that is plaguing our new grads.</p>  |
| 210 | 12/20/2021 | <p>I am writing to provide feedback regarding the proposed amendments for becoming a fully licensed PT based on practice hours instead of the clinical exam. I appreciate the college</p>  |

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|     |            | <p>proposing a solution to facilitate the licensure of physiotherapy residents, however, I have feedback for one of the eligibility criteria in particular.</p> <p>One eligibility criteria requires that the resident and supervisor worked at the same location for 600 hours. Does this require an exact overlap of 600 hours between the resident and supervisor? If it does not, I am wondering what the rationale is for requiring the supervisor to work at the same location. I am aware of many residents who work at the same location as their supervisor but hardly have an overlap of hours (i.e., their supervisor works opposite hours, only works part time etc.). Essentially, the resident and supervisor may only have an overlap of 2-3 hours per week in some cases. Furthermore, supervisors do not provide direct supervision to residents regardless of clinic location as they have their own caseloads. As per the CPO website, it's the duty of the supervisor to ensure the resident has the knowledge, skills and judgement to deliver safe patient care regardless of location as long as they can show there is adequate supervision. I am currently a PT Resident with a supervisor at an alternate location and had weekly in-person meetings since I received my Provisional Practice Licence. My supervisor is able to show there was adequate supervision and is also willing to write a letter indicating that I had direct access to her during the entire time I was practising.</p> <p>Once again, I appreciate the steps the college has taken to begin licensing its PT Residents, however, this one specific eligibility criteria will prevent many residents from becoming licensed. I have exceeded 1200 practice hours over the last 12 months and have not had the opportunity to challenge the clinical exam due to constant delays. Now I feel as if I am at a disadvantage for choosing a job in which my supervisor worked at a different location. Thank you for taking the time to consider this feedback.</p> |
| 211 | 12/20/2021 | <p>First of all I would like to thank-you for continuing to engage in this serious matter of physiotherapy licensing. I believe it is a very important issue, not only due to the backlog of licensing that is preventing Ontarians from receiving the care they need, but beyond that. Creating the most effective licensing process, and reducing any unnecessary barriers, is vital for maintaining the health of our profession as a whole.</p> <p>To that end, I believe that the proposed amendments, while a step in the right direction, are not sufficiently open to achieve that goal. Namely, I believe the clinical hour requirements are much higher than necessary. I believe you could significantly reduce it, and still be able to screen for any supervisor concerns or conduct history violations. In particular, I do not see any benefit to such a large amount of hours needed at the same facility. There are many unique circumstances that could prevent somebody from meeting this requirement. I do not believe working part-time at multiple facilities should negatively impact a candidate's licensing process.</p> <p>Thank-you for receiving feedback on this consultation. It is my hope that this feedback will be taken seriously in determining the future of the licensing decisions.</p>  |
| 212 | 12/22/2021 | <p>I propose the following amendments to be fair, clear and responsive, depending on collaborative leadership and focus on the profession and its responsibility to Ontarians: Section 23 (4.1) be amended to remove reference to 'practical examination' and edited for clarity: Subsection (4) reads: does not apply to an applicant who has failed the examination, or any component thereof as determined by Council, only one time where</p>   |

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|     |            | <p>Council, at its sole discretion, has determined that exceptional circumstances exist and the applicant fulfils such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee. For purposes of this subsection, "exceptional circumstances" includes, but is not limited to, situations the examination or any component as determined by Council is not available within a reasonable period of time. Section 23 (8) be amended to remove reference to 'practical examination', edited for clarity and state that criteria for waving requirement of the exam or any component of the exam should lie within the purview of the Council and reflect best practices in professional regulation at the time: Paragraph 2 of subsection 19(1) reads: does not apply in respect of the examination, or any component thereof as determined by Council, where the person has fulfilled whatever conditions or requirements that have been specified by Council at its sole discretion and other such terms, conditions and limitations as may be specified by a panel of the Registration Committee.</p>   |
| 213 | 12/29/2021 | <p>I would firstly like to thank the College of Physiotherapists of Ontario for providing many Physiotherapy Residents with the opportunity to apply for an Independent Practice Certificate of Registration amidst a global pandemic. I appreciate the efforts to facilitate registration and to alleviate the stresses and uncertainties that many individuals are experiencing. I believe we are moving in a positive direction.</p> <p>My name is Lovisa Cheung. I graduated from the University of Toronto Physical Therapy program in October of 2020 and am currently working part-time as a Physiotherapy Resident. I am also currently a full-time PhD student in the Rehabilitation Sciences Institute at the University of Toronto, in the second year of my studies.</p> <p>Regarding the Exam Exemption, I currently fulfill all eligibility requirements EXCEPT one - the requirement of delivering patient care for 1,200 hours during the past 12 months. Over the past year, I have been engaging in full-time research/graduate studies (as a PhD student) while working part-time (two days a week) delivering patient care (as a Physiotherapy Resident). Therefore, I have not accumulated the 1,200 hours that would grant me eligibility for the Exam Exemption.</p> <p>I was wondering, respectfully, if there may be any consideration for individuals who engage in physiotherapy-based clinical research and/or teaching? To my knowledge, there are approximately 5-10 individuals who may be in a similar situation as myself. Several suggestions that the Committee might consider include: (1) removing the 12 month time frame from the 1,200-hour eligibility requirement; or (2) allowing individuals to satisfy either "1,200 hours during the past 12 months" OR "600 hours at the same site as the Supervisor" (instead of AND).</p> <p>Thank you so much for the consideration and I look forward to hearing back.</p> |
| 214 | 1/2/2022   | <p>The proposed amendments to General Regulation seem to be a step in the right direction for current physiotherapy residents, as well as upcoming PT Residents. The proposed amendment to allow individuals to apply for registration after obtaining a certain number of hours (amongst other criteria) is a good way for current and future PT Residents to obtain registration. Thus, this would better serve the community by allowing them all to obtain registration. The fact that the amendment requires a supervisor to be involved is a great way to show the CPO that such individuals (PT Residents) are providing good services to the</p>  |

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|     |          | community, rather than harm. In addition, the proposed amendments will allow for appropriate registration upon graduation by being supervised and obtaining a certain number of clinical hours of practice. This is an improved method of providing registration to individuals post-PT graduation as well. Throughout PT school, students are supervised as well. Students pass clinical placements based on the ACP which has been shown to be valid. Thus, through placements clinical instructors are able to identify the capability of such students in becoming registered practitioners. If there were any issues regarding competency, it would be identified before graduation and corrected. Thus, by the time individuals are PT Residents, they have effectively demonstrated the physiotherapy competencies.   |
| 215 | 1/4/2022 | <p>Re: Proposed Amendments to the General Regulation (O. Reg 532/98)- Permit registration for an Independent Practice Certificate based upon practice hours. Dear College of Physiotherapists of Ontario, I am speaking on the behalf of physiotherapy residents. The 2021 proposed amendments need to consider Physiotherapy Residents who were registered for the June 2020 exam and have not been able to complete the exam within the past one and a half year. We, the physiotherapy residents had to undergo 4 cancellations of the Physiotherapy Competency Examination (PCE), and a great portion of physiotherapy residents did not work or worked reduced hours, sacrificing working as physiotherapy residents in order to prepare for a clinical exam that was never delivered. A significant amount of time was spent on preparing for both an in person and virtual examination. Due to this, we are currently trying to accumulate enough practice hours to meet the eligibility criteria. We kindly ask that you please strongly consider extending the timeline of this temporary policy by another year in order to allow us physiotherapy residents to accumulate enough hours of practice to meet the eligibility requirements. Furthermore, please strongly consider the increase of the time frame beyond 12 months, to accumulate the 1200 hours of practice. An example of this from the College of physiotherapists of Ontario, in regards to independent practice: "An applicant for a certificate of registration authorizing independent practice shall satisfy the Registrar that he or she has practised physiotherapy for at least 1,200 hours in the five years immediately preceding the application" as per Physiotherapy Act 1991, ONTARIO REGULATION 532/98 GENERAL. Another example of this, is with the Nova Scotia College of physiotherapists, where it does not state a time frame to achieve the 1200 hours as per PDF: <a href="https://nsphysio.com/images/Policies/Interim_Alternate_Competency_Evaluation.pdf">https://nsphysio.com/images/Policies/Interim_Alternate_Competency_Evaluation.pdf</a> In addition, please strongly consider reducing the current 1200 hour requirement (over a 12 month period) for working as a physiotherapy resident in order to be considered for an independent practice license as many residents like myself sacrificed working in order to prepare for the physiotherapy competency examination. Thank you for your consideration. Sincerely, Physiotherapy Resident</p> |
| 216 | 1/6/2022 | <p>Dear College of Physiotherapist of Ontario, First off, I am pleased that the College of Physiotherapist of Ontario (CPO) will be proposing amendments to Part III Registration of the General Regulation under the Physiotherapy Act, 1991 to allow physiotherapy residents an alternative pathway to independent registration based on a clear set of rules that include practice hours. There is a growing backlog of physiotherapy residents in Ontario who are</p>  |

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|     |          | <p>collectively disappointed and concerned that they have not been given an opportunity to obtain their independent practice certificates at no fault of their own. This backlog must be immediately addressed and should be the top priority of the CPO at this point in time as some employers do not hire residents which will create a shortage of physiotherapist which will affect access to care for the general public. Furthermore, the continued uncertainty may drive qualified hard working residents to ultimately seek other career paths. The proposed alternative pathway would allow some residents to be registered, but I believe a significant number of residents may not qualify due to the requirement of obtaining 1200 clinical practice hours during the previous 12 months. A significant portion of physiotherapy residents sacrificed working in order to better prepare for the physiotherapy competency examination. Furthermore, the ongoing COVID19 pandemic lead to employers reducing the hours of working physiotherapists and physiotherapy residents and some of them may also have been laid off work which will affect their ability to accumulate working clinical hours. Therefore, I feel it would be fair to reduce the 1200 hours requirement to a more modest level so more qualified residents can have a timely pathway to full independent registration. Also, it would be more fair if the CPO considered the total number of hours worked as a physiotherapy resident towards their practice hours rather than hours obtained during the previous 12 months. The previous 12 month requirement creates an unnecessary barrier to registration and should be expanded to include the length of time a physiotherapy resident has worked as a physiotherapy resident. There may be a situation where a resident worked less hours in their 13th month compared with their 1st month and this may negatively affect their application. As a practicing physiotherapist, I went through the clinical examination process but I cannot imagine how much stress the current group of physiotherapy residents must have gone through preparing for four different examinations during the pandemic and this includes adjusting to the new virtual format only to be repeatedly disappointed when the Canadian Alliance of Physiotherapy Regulars (CAPR) failed to administer the virtual exam for the majority of candidates. I am concerned that a clinical exam will not occur in the near future due to the uncertainty of CAPR and ongoing concerns of their competence regarding their ability to adapt to the pandemic. Also, the CPO also does not have any history of administering the exam and the ongoing pandemic and escalating COVID19 cases may limit the capacity of delivering an exam and hands on practicing with other residents may go against public health recommendations in regards to COVID19 safety. Therefore, this alternative pathway to independent registration will be relied on heavily but I am concerned that a significant number of residents will not qualify for it. In summary, I would urge the CPO to carefully consider modifying the proposed amendments to significantly reduce the 1200 hour requirement and to strongly consider the working hours a resident has accumulated during the total time they have been a resident and not just over the previous 12 months. Sincerely,</p> |
| 217 | 1/6/2022 | <p>Thank you for the proposed changes. Although you have included the most important would you please also include a clause for those who have not applied for provisional license prior to the first PCE clinical . What I was thinking about is as below<br/> - Permit provisional license to a candidate registered for either their second or third attempt on clinical Exam, If they have not applied for provisional license after successfully completing the written PCE.</p>  |

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|  |  | <p>Is it also possible to request for a waive of clinical exam for 3 or 6 months of internship under a supervisor accepted by the college.(ref :<a href="https://www.cewilcanada.ca/CEWIL/About-Us/Work-Integrated-Learning.aspx">https://www.cewilcanada.ca/CEWIL/About-Us/Work-Integrated-Learning.aspx</a>) or be in groups to do community projects like content development or public health education ?</p> <p>Hoping you would give feedback about these points . hope they are helpful syggestions.</p> <p>Thanking you,</p> |
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FAIRNESS COMMISSIONER

COMMISSAIRE À L'ÉQUITÉ

OFFICE OF THE FAIRNESS COMMISSIONER

595 Bay Street, Suite 1201, Toronto ON M7A 2B4

January 5, 2022

Thank you for the opportunity to provide feedback to the proposed amendments to Part III (Registration) of the General Regulation made under the Physiotherapy Act, 1991, which the College of Physiotherapists of Ontario (the CPO or the college) made available to stakeholders following the meeting of its Council on October 14, 2021. We have also provided this response via the College's submission portal.

As you know, on June 14, 2021, I forwarded to the CPO my perspectives on how the college's registration practices could be improved, with a particular emphasis on applicants whose professional journeys had been impacted by the Covid-19 pandemic. I would ask that the comments that I offer in this letter be interpreted in the context of this earlier correspondence. I will focus my comments on three discrete issues.

### **1. The Proposal to Permit Applicants to Reapply for Provisional Practice Certificates if They Have Been Unsuccessful on their Clinical Examinations**

Over the past few months, our office has continued to receive numerous letters from applicants to the profession whose provisional practice certificates have been revoked because they failed to successfully pass their clinical examinations. In some cases, these outcomes seem particularly harsh given the overall Covid-19 context and since they only missed passing the test by several marks. This situation has created tremendous financial and emotional hardship for the individuals involved and I know that CPO officials are alive to this issue.

At the outset, our office strongly encourages the college to take whatever steps are necessary to create a more flexible registration environment to allow these individuals to retain their provisional status either through the creative application of shorter-term policy adjustments and/or through regulatory changes. Given that some of these individuals have been unable to work in their fields for more than two years, we would ask that the college treat this matter with the urgency that it deserves.



In the context of pursuing a proposed regulatory solution, I would also recommend that the CPO adopt an approach that is as flexible as possible. While our office supports the college's proposal to allow a candidate to re-take a clinical examination in order to retain their provisional status, I would also encourage the college, and its registration committee, to foster an environment where they can apply discretion in an intelligent fashion to give worthy candidates, who are close to passing the clinical examination, the ability to continue with their professional work until they can successfully re-write the test.

In that respect, I would like to specifically address the college's proposal to add a new section 23(4.1) to the regulation to qualify the application of section 23(4). Under this construct, section 23(4) would preserve the rule that a person who has failed the clinical examination is not entitled to apply for a certificate of registration authorizing provisional practice (i.e., the successful completion of the test would continue to be a "non-exemptible" requirement). The new section 23(4.1) then provides a lengthy list of technical exceptions to this rule.

(4) A person who has failed the practical component of the examination is not entitled to apply for a certificate of registration authorizing provisional practice. O. Reg. 68/06, s. 1.

(4.1) Subsection (4) does not apply to a person who has failed the practical component of the examination only one time, where there are exceptional circumstances, such as the practical component of the examination is not available for an extended period of time, and the person meets such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee.

I would make the observation that it was the non-exemptible nature of the requirement in section 23(4) which contributed to current unfortunate situation. Based on this experience, this would seem to be an appropriate opportunity to remove this inflexible concept from the regulation.

In my view, an approach more in keeping with progressive registration practices, would be to revisit the wording of these two provisions to give the college discretion to decide how it wishes to address individual cases where individuals have not passed the clinical examination through, for example, prescribing a list of factors



for the appropriate decision makers to consider and a palate of options to help move these candidates, many of whom are internationally trained, through the registration process.

As part of this approach, I would also encourage the CPO to reconsider its strict pass/fail approach in individual circumstances to give otherwise meritorious candidates the opportunity to contribute to the profession in Ontario. Another option would be to discount (or right size) the passing grade on the clinical examination for this special cohort of around 100 individuals.

Along the same lines, I would also note that some of the individuals in this group have been unable to practice on a provisional basis since failing the clinical examination in November 2019. After this prolonged absence from the profession, it is likely that many of them have lost some of the skills that they acquired in their academic programs or in professional practice in other countries.

This issue is significant, because pursuant to the wording contained in the new proposed section 23(4.1) of the regulation, a candidate is only permitted to fail the clinical examination once in order to avail themselves of the curative elements of this provision. It should be noted that members of this cohort, have already failed the examination once, and because of lack of practice, risk failure a second time.

Thus, if this provision is retained, the college should consider removing this proposed limitation for this cohort, and perhaps others, to allow the candidates to fail the examination more than once in order to give them an equitable chance to re-join the profession.

The college may also wish to consider adopting a formal mentorship program where these individuals can be guided into professional practice, to provide additional support in order to facilitate a successful entry into the workforce. The mentorship program run by the College of Audiologists and Speech-Language Pathologists is one that the CPO may wish to review.

Finally, should the CPO ultimately determine that these individuals should re-write the clinical examination, our office would request that the college allow them to move to the front of the line when the next round of clinical examinations can be offered.



## **2. Permit an Alternative Pathway for Transition from a Provisional Practice Certificate to an Independent Practice Certificate Based on Practice Hours**

The OFC supports a proposed regulatory strategy that would enable provisional class registrants to transition into full independent practice. To its credit, the CPO has already enabled this outcome through its policy authority, on the condition that the decision is reviewed every 90 days. The amendment will help to entrench this pathway and provide the college with additional flexibility to respond in a timely manner should applicants not be able to attend for examinations in the future.

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I would note that the proposed amendment states that “through this exemption, the applicant could also be subject to any additional requirements and/or be subject to terms, conditions and limitations placed on their certificate by the Registration Committee”.

Given that the structure of the General Regulation is already prescriptive in nature, our office wonders why these issues could not simply be left to college policy. There would be a particular concern, for example, if this provision was used to reinstate the requirement that applicants in this category be required to write the clinical examination after the fact.

Finally, the OFC would encourage the CPO to communicate with other provincial regulators to ensure that the labour mobility of registrants who have entered the profession through these pathways will be preserved despite the fact that they have not completed a clinical examination.

## **3. Creation of an Emergency Registration Class**

The OFC also supports in principle the college’s proposal to create an Emergency Registration Class. This approach should provide the CPO with an enhanced ability to move applicants through the assessment and registration system and to, thereby, help achieve the province’s labour mobility and client service goals.



I would like to acknowledge the college's efforts to actively pursue these laudable regulatory objectives. If there is anything that our office can do to facilitate these processes, please let us know.

Sincerely,

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**[Original signed by]**

Irwin Glasberg  
Fairness Commissioner for the  
Province of Ontario



January 7, 2022

Ms. Theresa Stevens, President

Mr. Rod Hamilton, Registrar

College of Physiotherapists of Ontario  
375 University Avenue, Suite 800  
Toronto, Ontario  
M5G 2J5

Via email

Subject: Consultation on Amendments to Regulation 532/98

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Dear Ms. Stevens and Mr. Hamilton,

The Ontario Physiotherapy Association (OPA), with over 6,000 member physiotherapists, physiotherapist assistants and students, is committed to working with the College of Physiotherapists of Ontario (CPO) and other stakeholders to find and implement the most expeditious path forward to allow full registration of candidates affected by delays due to the pandemic, and those in the future, so that Ontarians can have timely access to safe and competent care.

It is important to recognize that the regulations currently allow the College's Registration Committee sufficient discretionary authority to exempt candidates from certain registration requirements. It is, therefore, encouraging that the CPO Registration Committee has begun the process of exempting certain candidates. However, it is also important to recognize that this is the first of many steps that are required in a broader, multipronged approach to create an expedited pathway to registration for the close to 1,000 (and increasing) affected candidates.

We also note that, as per discussions at the CPO Council meeting, the process to complete the proposed regulatory amendments will not address the current crisis due to the time it usually takes to pass regulations. Therefore, OPA has reviewed the proposed regulation amendments with a focus on the long-term changes needed for entry-to-practice pathways in Ontario that meet the needs for public safety, introduce needed flexibility to be responsive to events such as, but certainly not limited to, the pandemic, and allow for probable changes in entry to practice processes in the future. As a result, our feedback is focused on addressing these areas of the regulation and any proposed



changes that would create, or are reasonably perceived to create, barriers to fair, timely, and safe entry-to-practice for applicants that are not necessary for public protection.

In addition, any changes to the regulation should ensure that there is an appropriate balance between the mandate of the full Council to ensure the safety of the public and the role of the Registration Committee to interpret and apply regulations and policies, developed and approved by full Council, in making decisions regarding the registration of individual or cohorts of candidates. This balance is not enabled currently by the regulation and this situation will be further cemented should the proposed regulations go forward without the necessary changes.

*We strongly believe should the proposed regulations go forward with no changes, the foundation will be set for another crisis in registration for independent practice in the future.*

## General Recommendations

### 1. The definition of examination for the purpose of entry-to-practice

The major barrier to registration in the current situation is the explicit inclusion of the requirement for passing a 'practical component' of an examination as a condition for independent practice. **The proposed amendments do not remove explicit references to a 'practical component'** under Section 23 (1) Section 23 (2), 4, Section 23 Subsections (4), (5) and (6) and adds a reference to a 'practical component' in the new proposed subsections (4.1) and (8).

*OPA strongly recommends that the definition of an exam be left to the purview of the College Council and that the amended regulation remove any explicit reference to 'practical component' in all existing sections/sub-sections listed above and in any proposed new subsections, and be replaced with 'the examination or any component thereof as determined by Council'.* This will ensure public safety, greater responsiveness and flexibility for unforeseen events, such as but not limited to a pandemic, and allow the needed flexibility in regulation to respond to changing circumstances and requirements as the CPO and profession continue to assess the pathway for entry-to-practice.

### 2. The determination of exceptional circumstances

In reference to section 23, subsections (4.1) and (8) the inserted qualifier of "exceptional circumstance" offers only one example, such that the "practical component of the examination is not available for an extended period of time". This is unnecessary and only further restricts, in regulation, a circumstance in which the College would allow for this exemption.



*OPA recommends that in regulation, the determination of exceptional circumstance be at the discretion of the Council, and that any further qualifiers, should they be required, be set out in policy (i.e., not in regulation).* This will allow the College to be responsive to a variety of internal and external circumstances that may require this exemption to be applied that may not be currently foreseeable. In addition, inclusion of the example continues to at least imply that a practical examination will be a part of the definition of an examination into the future, which is restrictive and concerning as per the rationale provided in our first point.

### 3. The roles of Council and Registration Committee

It is the role of Council to ensure public safety and to propose and approve regulations and policies to fulfill this mandate, including those associated with the entry-to-practice processes for independent practice. The role of the Registration Committee, as defined in RHPA Schedule 2 Health Professions Procedural Code, is to determine whether an applicant referred by the Registrar may be registered and the determination of any terms, conditions or limitations. Both roles are critical to ensure timely, fair, and safe entry-to-practice by applicants.

*OPA strongly recommends that any amendments to the regulation must ensure that the roles for both Council and the Registration Committee are appropriate and balanced.*

### 4. The criteria for exemptions

The proposed addition of a subsection 23 (8) has introduced language into regulation that outlines very specific additional criteria to permit the issuance of an Independent Practice certificate of registration to individuals who currently hold Provisional Practice certificates of registration, but are unable to obtain an Independent Practice certificate because there isn't a process by which one may do so (i.e., clinical exam unavailable).

There is insufficient rationale provided as to how and why these criteria were established. They create barriers for some (e.g., those who have multiple supervisors/employments that are otherwise completely acceptable within the policy of provisional practice, or in circumstances where an applicant or applicant's supervisor experiences an interruption in employment due to circumstances, such as illness or parental leave) and may disproportionately impact internationally educated candidates who often have multiple positions to achieve full-time employment as they begin their careers in Ontario.

*OPA strongly recommends that such criteria be established by the College in policy and not in regulation where it is more restrictive and inflexible to respond to a variety of readily foreseeable and completely acceptable scenarios where such an exemption should apply.*



## Specific Recommended Changes to Draft Amendments to Regulation

*In light of the general points made above, OPA strongly recommends the following changes to the proposed amendments (red font denotes changed or additional language, whereas the strike out denotes removal of proposed language):*

Section 23 (1); Section 23 (2), 4; Section 23 Subsection (4), (5) and (6) be amended to remove and replace 'practical examination' with '***the examination or any component thereof as determined by Council***'.

Proposed Section 23 (4.1) be amended to remove reference to 'practical examination' and edited for clarity:

Subsection (4) does not apply to a ~~person~~ **an applicant** who has failed ~~practical component of~~ **the examination, or any component thereof as determined by Council**, only one time ~~where Council, at its sole discretion, has determined that~~ **exceptional circumstances exist** and the ~~person~~ **applicant fulfils** such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee. **For purposes of this subsection, "exceptional circumstances" includes, but is not limited to, situations where the examination or any component as determined by Council is not available within a reasonable period of time.**

Proposed Section 23 (8) be amended to remove reference to 'practical examination', edited for clarity and state that criteria for waving requirement of the exam or any component of the exam should lie within the purview of the Council and reflect best practices in professional regulation at the time:

Paragraph 2 of subsection 19(1) does not apply in respect of the ~~practical component of the examination, or~~ **any component thereof as determined by Council**, where the ~~person~~ **applicant** has **fulfilled whatever conditions or requirements that have been specified by Council at its sole discretion and such other** engaged in clinical practice under a certificate of registration authorizing provisional practice for at least twelve months and 1200 practice hours, with at least six months and 600 practice hours of which are with one employer or in one setting where the applicant's supervisor also works, without any concerns arising, ~~where there are exceptional circumstances, such as the practical component of the examination is not available for an extended period of time, and where the~~ ~~person~~ **meets such additional requirements and is subject to such terms, conditions and limitations as may be specified by a panel of the Registration Committee.**



**ONTARIO  
PHYSIOTHERAPY  
ASSOCIATION**

The OPA continues to offer all our available resources to assist the College to move this critical work forward and implement solutions that expedite the path forward to allow full registration of all competent candidates to provide safe and competent care to Ontarians. We would be pleased to meet with you to discuss these recommendations if you should have any questions or comments.

Sincerely,

A handwritten signature in blue ink that reads "M. Gardiner Millar".

Paulette Gardiner Millar  
President

A handwritten signature in black ink that reads "D. Sauvé".

Dorianne Sauvé  
Chief Executive Officer



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

**Motion No.: 8.0**

**Council Meeting  
March 23-24, 2022**

**Agenda # 8: Annual Budget FY 2023**

It is moved by

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and seconded by

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that:

Council approves the Fiscal year 2023 annual operating budget.



|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022                          |
| <b>Agenda Item #:</b> | 8  |
| <b>Issue:</b>         | FY 2023 Budget                             |
| <b>Submitted by:</b>  | Zoe Robinson, Director, Corporate Services |

**Issue**

The annual operating budget for fiscal year 2023, covering the period April 1, 2022 to March 31, 2023, requires approval by Council.

**Background**

*Process*

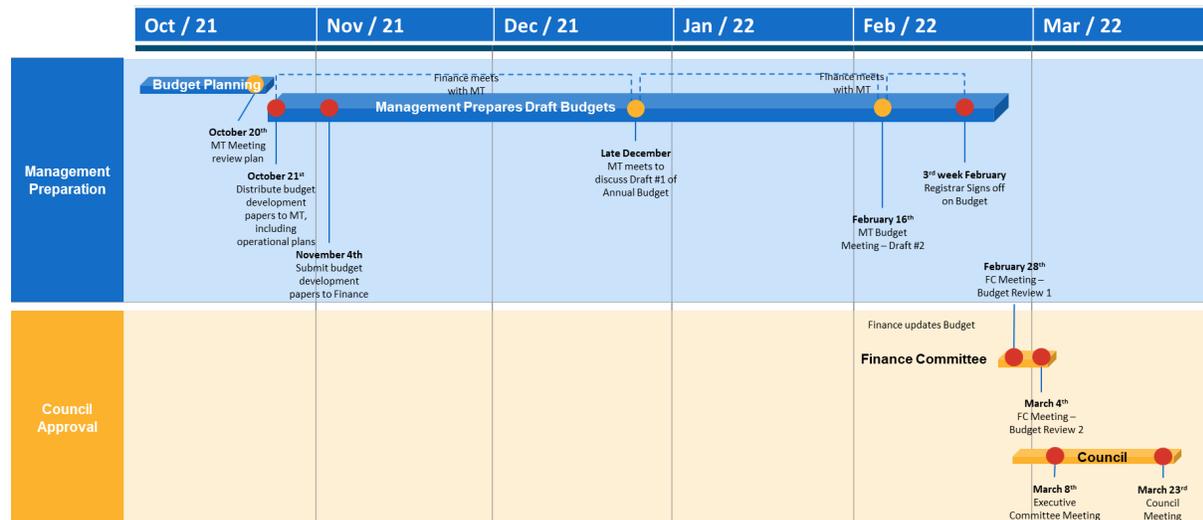
Development of the College of Physiotherapists of Ontario’s (“CPO” or “College) budget is a 6-month process which is outlined in Figure 1. The College uses a **zero-based** approach to developing the annual operating budget. Zero-based budgeting requires individuals to determine the costs to deliver programs and services that will be included in the budget; percentage increases based on prior year’s results is not used unless there is no other option to determine the costs. Managers review what is to be delivered and supported, research the costs to provide the services, and completes a budget worksheet which includes detailing their assumptions for how they arrived at estimates for the budget line items. The worksheets are reviewed by department supervisors and the finance department then integrated into a master budget.

The finance department reviews the detailed department budget information with each budget preparer, who may or may not be a manager, and their supervisor to confirm the information provided. The Registrar reviews the budget and provides direction on what is included. The finance department presents the annual operating budget to the management team so there is transparency, an opportunity to discuss, and accountability for the budget.

While management is responsible for preparing the budget, the Finance Committee conducts a detailed review of the budget as part of its duties and responsibilities. The Finance Committee recommends the budget to Council. The Executive Committee also reviews the budget and provides comments. The final stop in the approval process is Council.



Figure 1 - Budget Preparation Times



The budget is prepared on an accrual basis where the revenues and expenses are recognized according to the timing of activity and not the receipt of cash or payment of bills. Accrual accounting includes non-cash items such as amortization (i.e. depreciation expense on fixed assets). The inflows and outflows of cash is presented in cash flow statements, excludes non-cash items, and presents the movement of cash according to when cash is received or disbursed.

The finance department consolidates the information provided by the College’s departments into a master budget. The master budget provides information on the monthly costs and annual costs for each item. The budget is structured into major categories (Revenue and Expenses), high-level (i.e. parent) general ledger accounts, and detailed general ledger accounts which include detailed information. For presentation purposes, the finance department provides a variety of presentations of the budget, but report using the parent general ledger account headings most often.

For Example:

Revenue

- Parent Account: a/c 4001 – Registration Fees
- Detail Account: a/c 4011 – Independent Practice Certificate – full fees
- Detail Account: a/c 4012 – Independent Practice Certificate – pro-rated fees

Developing the budget was a complicated process this year due to the work on the Registration Committee exemption policy and development of the Ontario Clinical Exam (OCE). The Finance Department worked with the program managers to develop business and financial models that are embedded in the master budget.



Budgeting is not an exact science. Costing for programs and activities is based on a series of assumptions from which estimates are derived. The budget is a plan and is likely to change as the fiscal year progresses, assumptions change, and new estimates are created. While the approved budget does not change once it is approved, forecasts are created based on this new information.

**Summary**

The Fiscal Year 2023 budget, covering the period April 1, 2022, to March 31, 2023, is projected to have a deficit of \$1.289 million. CPO has the cash flow to manage this loss in FY 2023 but must consider the long-term financial projections and consider how to support the college’s long-term financial sustainability.

Table 1 provides a summary of the significant impacts on the College’s FY 2023 budget. The budget deficit is significantly impacted by four (4) factors:

- Impact of Covid-19 on decreased revenues
- The direction from Council to develop a clinical exam.
- The increased case load within professional conduct.
- Increased staff requirements to support the college’s expanding regulatory work.

Table 1 - Summary Significant Items Impacting FY 2023 Budget

| Item   | Amount    | Notes  |
|--|-----------|--|
| <b>Impact of Covid-19 on revenues</b>                    | \$250,000 | <p>This represents the revenue the College is not receiving in the coming fiscal year. It is calculated as the difference between payment of IPC full fees at renewal and the payment of pro-rated fees upon being awarded an IPC.</p> <p>The College projects revenue from IPC (Independent Practice Certificate) registration fees (full-fees at renewal) will return to normal pre-covid patterns beginning in FY 2024.</p>   |
| <b>Direction from Council to develop a clinical exam</b> | \$371,711 | <p>This is a <b>net</b> figure for OCE and represents a <b>loss</b> for the OCE over the fiscal year. The net amount is based on revenues of \$312,000, operating expenses of \$525,000 and development costs of \$158,000 in FY 2023, where Net = Revenues – (operating expenses + development costs).</p> <p>OCE losses in FY 2023 are offset by revenues from the Registration Committee exemption process over FY 2022 and FY 2023.</p> <p>The initial investment in the OCE development costs will be repaid by the end of Fiscal Year 2023 and the</p> |



|   |                    |  |
|---|--------------------|--|
|   |                    | annual OCE operating cost of the OCE will be covered by the OCE fees going forward.  |
|   |                    | Note: The Council has not set a fee for the OCE and the OCE included in this budget is an amount proposed by the Finance Committee.          |
| <b>Increased case load within professional conduct</b>  | \$297,274          | <b>Increase</b> in legal fees when compared to forecast for FY 2022.   |
|   | \$111,000          | Accrued complaints and discipline expenses for cases referred to the Discipline Committee.   |
| <b>Increased staff requirements for regulatory work</b> | \$202,800          | <b>New</b> salaries and benefits for Professional Conduct Administrator, Compliance Monitoring Administrator, and Registration Administrator |
| <b>Estimated Total</b>                                  | <b>\$1,232,785</b> |  |

*Impact of Covid-19 on Revenues*

The College has experienced disruptions to its finances, especially its income, because of Covid-19 since March 2020. Physiotherapists have been unable to complete their registration for Independent Practice Certificates (“IPC”) since March 2020 because they have been unable to complete the clinical component of the exam.

College operations have been and will be impacted further because, based on Council direction, the CPO is required to develop a clinical exam to replace the PCE – Clinical Exam, formerly offered by Canadian Alliance of Physiotherapy Regulators (CAPR).

The College’s general regulation requires that holders of a provisional practice certificate complete a clinical exam prior to applying for an independent certificate.

The impact of Covid-19 on the College’s finances is less revenue has been generated from IPC registration fees in FY 2021 and FY 2022 since new physiotherapists have not been able to register for the IPC and, therefore, not added to the IPC renewals each year. Fees are lost from IPC pro-rated fees and payment of full fees at renewal. An estimated \$430,000 in revenue has been unrealized over the past two years. This impacts cash flow and the College’s operating reserve (i.e. unrestricted net assets).

This trend will continue in FY 2023 as an estimated \$250,000 in unrealized revenue impacts the FY 2023 budget. The lost revenue in FY 2023 is based on the difference between the payment of full fees at renewal and the payment of pro-rated fees upon being awarded an IPC.

*The direction from Council to develop a clinical exam*

Council has directed the College to develop a replacement clinical examination for the PCE.

College must invest money, time, and human resources to develop and operate a clinical exam, the Ontario Clinical Exam (OCE). The investment amounts to approximately \$684,000 in FY 2023 for



operational and development costs. Operational costs include three (3) administrative staff (Exam Manager, Exam Coordinator, Exam Administrator) and six (6) examiners. The estimated cost of the required HR support is \$503,259 and additional operational costs of \$22,000.

The development costs are estimated at approximately \$158,452 in FY 2023. Development costs include consultant fees, psychometrician fee, subject matter expert (SME) consultations, development of IT technology platform, and exam item writers. Approximately \$41,000 on OCE development costs were paid prior to March 31, 2022, the end of FY 2022<sup>1</sup>.

A fee will be charged for applicants to take the OCE and, based on the principle of cost recovery, the Finance Committee has proposed a fee of \$1,950. Current projected estimate is 160 candidates will complete the OCE by March 31, 2023 and generate \$312,000 in revenue. The estimated loss on the OCE in FY 2023 is approximately \$371,711. Based on the proposed fee, the examination program will have recovered the initial investment and be cost neutral in FY 2024.

#### *The increased case load within professional conduct*

The College's regulatory work has increased over the past year and requires additional resources to ensure the regulatory work is managed efficiently and effectively.

The number and seriousness of the cases in Professional Conduct increased between January 1, 2021 and December 31, 2021 when compared to the same period in 2020:

- +124 cases at intake (↑ 60%);
- +48 matters considered at ICRC (↑ 87%);
- +13 cases referred to Discipline (↑ 118%);
- +17 sexual abuse / boundary complaints (↑ 242%).

Due to the number of high-risk cases being received, Professional Conduct is required to estimate the need to retain legal counsel to assist at ICRC and later prosecute at discipline. A variety of lawyers have informed their fees are increasing this year after two years of no increases. The projected increase cost in legal fees for ICRC and discipline matters is approximately \$297,274.

The budget includes an accrual of \$111,000 for new cases referred to the Discipline and Fitness to Practice Committee.

#### *Increased staff requirements to support the college's expanding regulatory work*

The College's regulatory work is expanding with increasing case loads, increasing referrals to compliance monitoring, and increased number of physiotherapists to be registered. To support the increasing work to fulfill the college's regulatory obligations, additional staff are required. Additional staff include

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<sup>1</sup> Total OCE development costs are approximately \$200,000.



Professional Conduct Administrator, Compliance Monitor Administrator, and a Registration Administrator. The increased staff represents an additional \$202,800 to the FY 2023 budget.

### Other Items

### Revenue

The College's estimated revenues for FY 2023 are \$6,969,708.

Table 2 - Summary of Revenues - FY 2023

| GL ACCOUNT NUMBERS                             | FY 2021<br>Actual | FY 2022<br>Forecast | FY 2023<br>Budget | Variance<br>FY2023 to FY2022 (\$) | Variance<br>FY2023 to FY2022 (%) | Percentage of Budget |
|--|-------------------|---------------------|-------------------|-----------------------------------|----------------------------------|----------------------|
| <b>Income</b>                                  |                   |                     |                   |                                   |                                  |                      |
| 4001 - Registration Fees                       |                   |                     |                   |                                   |                                  |                      |
| 4011 - Independent Practice \$575              | 5,619,189         | 5,561,752           | 5,571,750         | 9,998                             | 0%                               | 79.9%                |
| 4012 - Independent Practice - Prorated         | 46,997            | 54,896              | 247,790           | 192,894                           | 351%                             | 3.6%                 |
| 4013 - Prof Corp Fees \$250                    | 110,750           | 111,250             | 103,250           | -8,000                            | -7%                              | 1.5%                 |
| 4014 - Provisional Practice Fee \$75           | 38,850            | 45,975              | 34,500            | -11,475                           | -25%                             | 0.5%                 |
| 4021 - Cross Border Registration Fee \$100     | 600               | 0                   | 400               | 400                               | -                                | 0.0%                 |
| 4007 - Registration fee credits                | -29,602           | -53,326             | -42,860           | 10,466                            | -20%                             | -0.6%                |
| Total 4001 - Registration Fees                 | 5,786,785         | 5,720,547           | 5,914,830         | 194,283                           | 3%                               | 84.9%                |
| Total 4008 - Admin Fees                        | 118,125           | 169,150             | 162,200           | -6,950                            | -4%                              | 2.3%                 |
| Total 4002 - Interest Income                   | 125,559           | 102,708             | 138,277           | 35,569                            | 35%                              | 2.0%                 |
| 4030 - ETP Assessment Fees                     |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| 4031 - Reg Com Exemption administrative charge |                   | 0                   | 442,400           | 442,400                           | -                                | 6.3%                 |
| 4032 - OCE Fees                                |                   | 0                   | 312,000           | 312,000                           | -                                | 4.5%                 |
| Total 4030 - ETP Assessment Fees               | 0                 | 221,600             | 754,400           | 532,800                           | 240%                             | 10.8%                |
| Total 4010 - Miscellaneous Income              | 0                 | 1,885               | 0                 | -1,885                            | -100%                            | 0.0%                 |
| <b>Total Income</b>                            | <b>6,030,469</b>  | <b>6,215,890</b>    | <b>6,969,708</b>  | <b>753,817</b>                    | <b>12%</b>                       | <b>100.0%</b>        |

The main driver of revenue is registration fees from Independent Practice Certificates and represents 80% of the College's overall revenues. Revenue from IPC full fee renewals remain flat when compared to FY 2022 and FY 2021 because the College did not experience historic increases in the number of IPC members due to the inability of members to complete the PCE – clinical exam.<sup>2</sup> The budget estimates \$247,790 in revenue from IPC pro-rated fees, a significant increase from FY 2022. The IPC registration fee is \$575.

Revenue from the Registration Committee exemption administrative charge and the Ontario Clinical Exam fee represent 11% of the college's overall revenues.

While the OCE is projected to operate at a loss in FY 2023, unanticipated revenue will be generated through administrative charges for an exemption process approved by the Registration Committee. The Registration Committee approved an exemption pathway for some individuals with a Provisional Practice Certificate (PPC) to obtain an IPC. An administrative charge of \$800 was set by the Registration Committee. This is intended to cover access to the Jurisprudence Module and the expenses for administrative aspects of the program. One of the requirements of the exemption policy is for the successful applicant to complete a screening interview by an assessor. The administrative charges also cover the costs of staff to process the exemption application.

The Registration Committee expanded the eligibility criteria in February to capture a wider range of PPC holders. This expanded eligibility criteria will be implemented in March 2022. The exemption policy is

<sup>2</sup> IPC renewals increased between 3% to 4% per year prior to March 2020.



tentatively scheduled to sunset on December 31, 2022. After this date, all PPC holders will be required to complete the OCE. The Registration Committee exemption policy is projected to generate an estimated unanticipated net revenue of \$146,000 in FY 2022 and \$311,800 in FY 2023. This net revenue will offset the estimated loss of the OCE in FY 2023.

Expenses

The College's estimated expenses for FY 2023 are \$8,258,940.

Table 3 - Summary of Expenses - FY 2023

| GL ACCOUNT NUMBERS                         | FY 2021 Actual   | FY 2022 Forecast | FY 2023 Budget   | Variance FY2023 to FY2022 (\$) | Variance FY2023 to FY2022 (%) | Percentage of Budget |
|--|------------------|------------------|------------------|--------------------------------|-------------------------------|----------------------|
| <b>Expense</b>                             |                  |                  |                  |                                |                               | 0.0%                 |
| Total 5000 - Committee Per Diem            | 109,802          | 182,081          | 162,165          | -19,916                        | -11%                          | 2.0%                 |
| Total 5050 - Committee Reimbursed Expenses | 29,666           | 41,346           | 130,040          | 88,694                         | 215%                          | 1.6%                 |
| Total 5100 - Information Management        | 323,866          | 263,129          | 433,046          | 169,917                        | 65%                           | 5.2%                 |
| Total 5400 - Office and General            | 980,452          | 861,500          | 781,429          | -80,070                        | -9%                           | 9.5%                 |
| Total 5500 - Regulatory Effectiveness      | 53,232           | 141,363          | 120,266          | -21,097                        | -15%                          | 1.5%                 |
| Total 5600 - Communications                | 95,226           | 91,034           | 117,640          | 26,606                         | 29%                           | 1.4%                 |
| Total 5700 - Professional fees             | 401,453          | 338,369          | 656,613          | 318,243                        | 94%                           | 8.0%                 |
| Total 5800 - Programs                      | 75,289           | 246,914          | 1,085,705        | 838,791                        | 340%                          | 13.1%                |
| Total 5900 - Staffing                      | 3,579,710        | 3,924,007        | 4,608,991        | 684,983                        | 17%                           | 55.8%                |
| Total 6001 - Amortization                  | 202,672          | 199,795          | 163,045          | -36,750                        | -18%                          | 2.0%                 |
| <b>Total Expense</b>                       | <b>5,851,370</b> | <b>6,289,539</b> | <b>8,258,940</b> | <b>1,969,401</b>               | <b>31%</b>                    | <b>100.0%</b>        |

Salaries and benefits represent 54% of the total expenses. The Entry-to-Practice activities, including costs related to the registration committee exemption process and the Ontario Clinical exam, represent 10% of the total expenses.

Major expenses for FY 2023 are provided in Table 2.

Table 4 - Key Expense Items - FY 2023

| Item        | Description                                     | Amount    | Note  |
|-------------|---|-----------|---|
| <b>CAPR</b> | The CAPR levy is budgeted to be paid in FY 2023 | \$239,316 | <p>The College typically pays this levy each year for CAPR membership.</p> <p>Payment for 2022 was delayed as the CPO seeks clarification on the types of services it will receive from CAPR once the levy is paid.</p> <p>The payment of the levy is contingent on the decision regarding this</p> |



| Item                            | Description   | Amount                     | Note  |
|---------------------------------|---|----------------------------|---|
|                                 |   |                            | College's membership in CAPR  |
| <b>Office Lease<sup>3</sup></b> | The budget includes an assumption the office at 375 University Ave will be subleased by October 2022, the beginning of Q3. Savings will be accrued related to the sublease payments however expenses will be incurred to secure new office space in a more flexible space.  | \$286,367                  | The assumption the 375 University Avenue office will be sublease will save the college \$194,036 compared to FY 2022.<br><br>If the CPO is unable to secure a sublease during FY 2023, an additional \$229,777 in expenses will be added. |
| <b>Professional Conduct</b>     | The case load for Professional Conduct is increasing and the number of high-risk cases is increasing as well.<br><br><ul style="list-style-type: none"> <li>• As of end of December 2021 compared to FY 2021: <ul style="list-style-type: none"> <li>○ +124 cases at intake (↑ 60%);</li> <li>○ +48 matters considered at ICRC (↑ 87%);</li> <li>○ +13 cases referred to Discipline (↑ 118%);</li> <li>○ +17 sexual abuse / boundary complaints (↑ 242%).</li> </ul> </li> </ul> <p>Legal expenses are also expected to increase with the higher case load and high number of severe cases.</p> | \$564,716                  | Cost of legal fees, an increase of \$297,274 from FY 2022.<br><br>Note: Fees charged by various counsel have increased.   |
| <b>Entry to Practice</b>        | The RCE and OCE programs are new programs and expenses to the college<br><br>The expenses for the RCE include assessor fees.<br><br>The expenses for the OCE include development and implementation costs. 9 new staff will be required to manage the OCE program:  | \$130,600<br><br>\$525,259 | New costs. Assessors hired as independent contractors<br><br>New costs. ETP program is shared in Table 4.   |

<sup>3</sup> The office space at 375 University Avenue has been on the sublease market since late November 2021. As of mid February 2022, 13 enquiries have been made the Colliers International, the leasing company handling our account. CPO is also discussing with other health regulatory colleges interest in sharing space.



| Item                                  | Description   | Amount      | Note  |
|---------------------------------------|---|-------------|---|
|                                       | <ul style="list-style-type: none"> <li>Exam Manager</li> <li>Exam Coordinator</li> <li>Exam Administrator</li> <li>Examiners (x6)</li> </ul>  | \$199,858   | New costs to develop the OCE.   |
| <b>Staffing</b>                       | <p>Increase in the number of FTEs from 30.84 to 36.16. Increase in FTEs relates to:</p> <ul style="list-style-type: none"> <li>Staff returning from leaves in FY 2022 and working the entire fiscal year in 2023.</li> <li>New staff for increasing regulatory workloads:               <ul style="list-style-type: none"> <li>Professional Conduct Administrator</li> <li>Compliance Monitor Administrator</li> <li>Registration Administrator</li> </ul> </li> </ul> <p>A cost-of-living-adjustment for 3%<sup>4</sup> is included in the budget. A COLA was not provided in FY 2022.</p> | \$4,608,991 | <p>Salaries and benefits increase \$619,725 to \$4,428,610 when compared to FY 2022.</p> <p>Increase costs include salaries, benefits, and withholding taxes paid by the college. Additional costs for staff development, consultant fees, and staff recognition are included as well in this line.</p> |
| <b>Council and Committee Expenses</b> | The budget plans for Council and committee meetings to be held virtually, hybrid, or in-person. Council expenses have been budgeted for in-person meetings.   | \$130,040   | Increase of \$88,694 when compared to FY 2022.  |
| <b>Information Management</b>         | <p>The budget includes:</p> <ul style="list-style-type: none"> <li>Completing the updating of the college's electronic file management system. \$42,132</li> <li>Conducting a cyber security audit. \$11,300</li> <li>Expenses to maintain and keep current the college's Dynamics 365 database (aka Atlas). \$80,908</li> </ul>  |             | <p>Other expenses include leases for computers (15 new computers to replace older models), various software, college's IT network maintenance and support, licensing for MS 365.</p> <p>Increase in the IT Management budget is \$146,071 when compared to FY 2022.</p>                                 |

<sup>4</sup> COLA calculations took into consideration several factors: (1) inflation over 2020 & 2021 combined; (2) inflation as of December 31, 2021; (3) economic forecasts to December 31, 2022. All data is pulled from the Bank of Canada. The average inflation between January 2020 and January 2022 was 3.1%. Statistics Canada reports that annual CPI rose 3.4% over 2021, peaking at 4.8% in December 2021 (source: <https://www150.statcan.gc.ca/n1/daily-quotidien/220119/dq220119b-eng.htm>). RBC reports that inflation is projected to decrease over 2022 to 2.3% by December but the annualized inflation for 2022 is projected to be 3.4% (source: [http://www.rbc.com/economics/economic-data/pdf/economy\\_can.pdf](http://www.rbc.com/economics/economic-data/pdf/economy_can.pdf))



Entry-to-Practice Program

Table 5 provides a summary of the revenue and expense structure for the Registration Committee exemption process and the OCE.

Table 5 - Entry-to-Practice Financial Details

| ETP project - FY 2022 & 2023                  | FY 2022           |                   | FY 2023           |                    | Totals            |                    | ETP Project (RCE & OCE)<br>Total FY 2022 & FY 2023 | Notes   |
|---|-------------------|-------------------|-------------------|--------------------|-------------------|--------------------|--|---|
|   | RC Exemption      | OCE               | RC Exemption      | OCE                | RC Exemption      | OCE                |  |   |
| Assessment Fees                               | \$800             | \$1,950           | \$800             | \$1,950            | \$800             | \$1,950            |  |   |
| # of PT                                       | 277               | -                 | 553               | 160                | 830               | 160                | 990  |   |
| Examiner Fees                                 | 200               | 115,000           | 200               | 115,000            | 200               | 115,000            |  |   |
| Exams completed per day                       |                   | 1                 |                   | 1                  |                   | 1                  |  |   |
| Number Days bw Oct 1, 2022 and March 31, 2023 |                   | 6                 |                   | 6                  |                   | 6                  |  |   |
| # examiners                                   |                   | 6                 |                   | 6                  |                   | 6                  |  |   |
| Revenue                                       |                   |                   |                   |                    |                   |                    |  |   |
| Fee / Administrative Charges                  | \$ 221,600        | \$ -              | \$ 442,400        | \$ 312,000         | \$ 664,000        | \$ 312,000         | \$ 976,000   |   |
| Total Revenue                                 | \$ 221,600        | \$ -              | \$ 442,400        | \$ 312,000         | \$ 664,000        | \$ 312,000         | \$ 976,000   |   |
| COGS  |                   |                   |                   |                    |                   |                    |  |   |
| Assessor / Examiner Fees                      | \$ 75,400         | \$ -              | \$ 130,600        | \$ -               | \$ 186,000        | \$ -               | \$ 186,000   | RCE assessors @ \$200 per screening interview + bonus |
| Total COGS                                    | \$ 75,400         | \$ -              | \$ 130,600        | \$ -               | \$ 186,000        | \$ -               | \$ 75,400  |   |
| <b>Gross Surplus</b>                          | <b>\$ 146,200</b> | <b>\$ -</b>       | <b>\$ 311,800</b> | <b>\$ 312,000</b>  | <b>\$ 478,000</b> | <b>\$ 312,000</b>  | <b>\$ 790,000</b>                                  |   |
| Operational and Administration Expenses       |                   |                   |                   |                    |                   |                    |  |   |
| Staffing - Administration                     | \$ -              | \$ -              | \$ -              | \$ 227,059         | -                 | 227,059            | \$ 227,059   | Exam Manager, Coordinator, Administrator              |
| Staffing - Examiners                          | \$ -              | \$ -              | \$ -              | \$ 230,000         | -                 | 230,000            | \$ 230,000   | 6 Examiners   |
| Administration                                | \$ -              | \$ -              | \$ -              | \$ -               | -                 | -                  | \$ -   |   |
| Information Technology                        | \$ -              | \$ -              | \$ -              | \$ 22,000          | -                 | 22,000             | \$ 22,000  | Annual Fees for IT platform                           |
| Examiner Training / Testing                   | \$ -              | \$ -              | \$ -              | \$ 46,200          | -                 | 46,200             | \$ 46,200  | Hourly rates for examiners to test system and train   |
| Miscellaneous                                 | \$ -              | \$ -              | \$ -              | \$ -               | -                 | -                  | \$ -   |   |
| Total OPAD expenses                           | \$ -              | \$ -              | \$ -              | \$ 525,259         | \$ -              | \$ 525,259         | \$ 525,259   |   |
| <b>Net Operating Surplus</b>                  | <b>\$ 146,200</b> | <b>\$ -</b>       | <b>\$ 311,800</b> | <b>-\$ 213,259</b> | <b>\$ 478,000</b> | <b>-\$ 213,259</b> | <b>\$ 264,742</b>                                  |   |
| Development Costs                             |                   |                   |                   |                    |                   |                    |  |   |
| iComp BBI Exam development costs              | \$ -              | \$ 23,381         | \$ -              | \$ 52,733          | -                 | 76,114             | \$ 76,114  | iComp   |
| Project consultant                            | \$ -              | \$ 18,025         | \$ -              | \$ 23,975          | -                 | 42,000             | \$ 42,000  | JO Corp (IT), ACS (Exam development - psychometrics)  |
| Meeting costs - SME                           | \$ -              | \$ -              | \$ -              | \$ 8,829           | -                 | 8,829              | \$ 8,829   |   |
| Examiner training                             | \$ -              | \$ -              | \$ -              | \$ -               | -                 | -                  | \$ -   |   |
| Legal costs                                   | \$ -              | \$ -              | \$ -              | \$ 2,915           | -                 | 2,915              | \$ 2,915   |   |
| IT development                                | \$ -              | \$ -              | \$ -              | \$ 70,000          | -                 | 70,000             | \$ 70,000  | IT SAAS   |
| Total Development Costs                       | \$ -              | \$ 41,406         | \$ -              | \$ 158,452         | \$ -              | \$ 199,858         | \$ 199,858   |   |
| <b>Net Surplus</b>                            | <b>\$ 146,200</b> | <b>-\$ 41,406</b> | <b>\$ 311,800</b> | <b>-\$ 371,711</b> | <b>\$ 478,000</b> | <b>-\$ 413,117</b> | <b>\$ 64,883</b>                                   |   |
| <b>Total Cost per FY</b>                      | <b>\$ 116,806</b> | <b>\$ 116,806</b> | <b>\$ 814,311</b> | <b>\$ 911,117</b>  | <b>\$ 911,117</b> | <b>\$ 911,117</b>  |  |   |
| <b>Total Net Surplus (loss) Per FY</b>        | <b>\$ 104,794</b> | <b>-\$ 59,911</b> | <b>\$ 64,883</b>  | <b>\$ 64,883</b>   | <b>\$ 64,883</b>  | <b>\$ 64,883</b>   |  |   |

The losses of the OCE in FY 2023 are covered by the net revenues of the RCE. Table 6 outlines how the OCE is cost neutral beginning in FY 2024 with the proposed OCE fee of \$1,950.

Table 6 - OCE Repayment Schedule

| OCE Fee<br>(Proposed) | FY 2023     | FY 2024   | FY 2025  | FY 2026    | FY 2027    | Total 5y (OCE) | FY 2022 & FY 2023<br>Net Revenue from RCE |
|-----------------------|-------------|-----------|----------|------------|------------|----------------|---|
| \$ 1,950              | -\$ 412,117 | \$ 62,235 | \$ 4,803 | -\$ 12,584 | -\$ 44,551 | -\$ 402,213    | \$ 478,000                                |

Cash Flow

Table 6 provides a summary of cash flow for FY 2023.



Table 7 - Cash Flow Estimates - FY 2023

| Item  | Amount                     |
|---|----------------------------|
| O/B – Cash Operating Accounts as March 31, 2022           | \$6,737,354                |
| Total Cash Inflow   | \$7,136,860                |
| Total Cash Outflow  | <u>\$8,073,475</u>         |
| <b>Net Change in Operating Cash</b>                       | <b>\$(936,614)</b>         |
| <b>C/B – Cash Operating Accounts as of March 31, 2023</b> | <b><u>\$5,671,299</u></b>  |
| O/B – Investments as of March 31, 2022                    | \$5,200,000                |
| <b>Net Change in Investments</b>                          | <b>\$104,000</b>           |
| <b>C/B - Investments (estimate) March 31, 2023</b>        | <b><u>\$5,304,000</u></b>  |
| O/B – Total Cash + Investments as of March 31, 2022       | \$11,937,354               |
| <b>Net Change in Cash + Investments</b>                   | <b>\$(832,615)</b>         |
| <b>C/B - Total Cash March 31, 2023</b>                    | <b><u>\$11,104,739</u></b> |

Operating Reserve (Unrestricted Net Assets)

The college’s operating reserve policy requires the CPO to maintain 25% to 50% (i.e. 3-6 months) of the annual operating budget in unrestricted net assets. Table 7 indicates the operating reserve will drop to 4.87 months of annual operating expenses available by March 31, 2023.

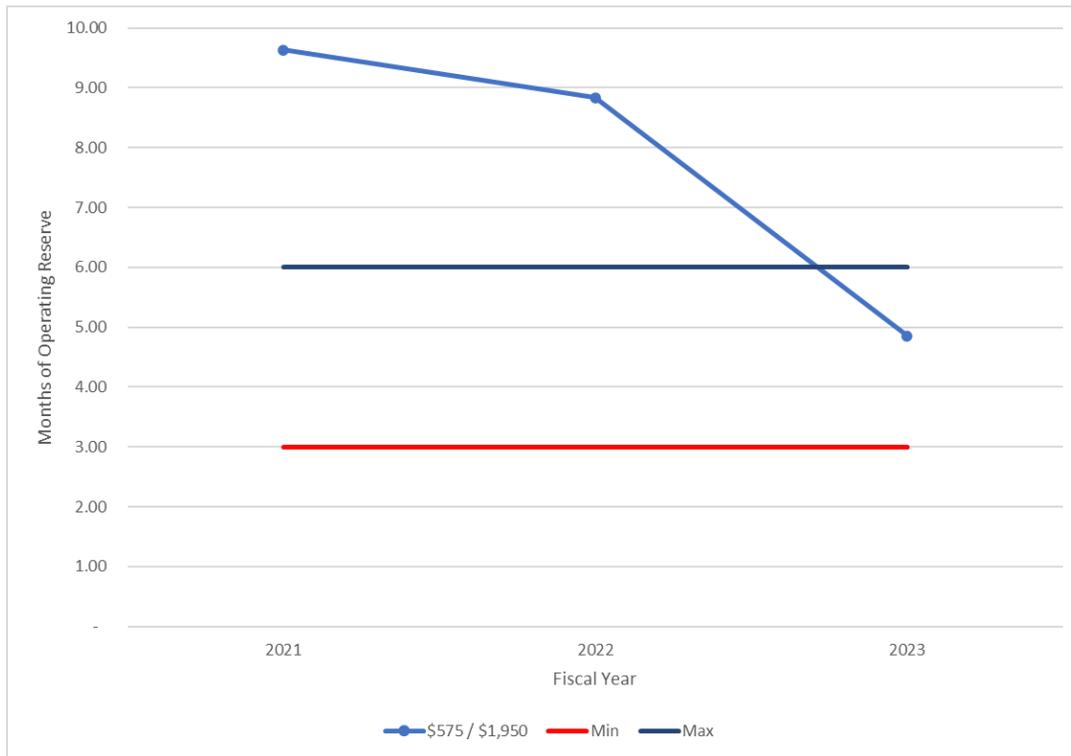
Table 8 - Operating Reserve Estimates - FY 2023

| Item                                 | FY 2021 - Actual | FY 2022 - Projected | FY 2023 - Projected |
|--------------------------------------|------------------|---------------------|---------------------|
| IPC Registration Fee                 | \$ 575           | \$ 575              | \$ 575              |
| OCE Fee                              | \$ -             | \$ -                | \$ 1,950            |
| Operating Budget                     | \$ 5,861,370     | \$ 6,289,539        | \$ 8,258,940        |
| Unrestricted Net Assets - Beginning  | \$ 4,411,446     | \$ 4,703,296        | \$ 4,629,648        |
| Surplus                              | \$ 179,098       | -\$ 73,648          | -\$ 1,289,232       |
| Change in Invested in Capital Assets | \$ 112,752       | \$ -                | \$ -                |
| Unrestricted Net Assets - End        | \$ 4,703,296     | \$ 4,629,648        | \$ 3,340,416        |
| # Months Covered (operating reserve) | 9.63             | 8.83                | 4.85                |
| % Annual Operating Budget            | 80%              | 74%                 | 40%                 |
| 3 months limit                       | \$ 1,465,342.50  | \$ 1,572,384.68     | \$ 2,064,734.95     |

Figure 2 presents the trend of the operating reserve between Fiscal Year 2021 and FY 2023.



Figure 2 - Forecast Operating Reserve to FY 2026.



**Capital Budget**

The capital budget includes the purchase of a mobile camera system to allow Council meetings to be broadcast over YouTube when the College moves out of its current office location. The current office location has a hard-wired camera system in the boardroom.

- Mobile Camera System = \$25,000

As a capital expense, the mobile camera system will be depreciated over 5 years and expenses recorded through annual amortization.

**Conclusion**

The College projects a deficit of \$1,279,232 for FY 2023. The deficit is driven by lower revenues due to the impact of Covid-19 and higher expenses because of the development of the Ontario Clinical Exam, higher legal costs for ICRC and discipline matters, and increasing staff to meet the College’s growing regulatory work.

The College can withstand this deficit due to stable levels of cash flow. The operating reserve will move within the operating reserve policy’s allowable range by the end of FY 2023.



## **Public Interest Consideration**

The College, in fulfilling its public protection mandate, is required by statute to carry out certain programs. Budget planning ensures that the College allocates sufficient resources to support the statutory and other programs necessary to fulfil its mandate. Budget forecasting ensures that the College is financially viable in the long-term and continues to fulfill its public protection mandate into the future.

## **Decision Sought**

That the Council approve the Fiscal Year 2023 annual operating budget.

## Appendix:

1. FY 2023 Budget with comparisons to FY 2021 and FY 2022.

# APPENDIX 1

College of Physiotherapists of Ontario  
Annual Operating Budget  
for the period ending March 31, 2023 (FY 2023)  
prepared: March 14, 2022

| GL ACCOUNT NUMBERS                                  | FY 2021 Actual   | FY 2022 Forecast | FY 2023 Budget   | Variance FY2023 to FY2022 (\$) | Variance FY2023 to FY2022 (%) | Percentage of Budget |
|---|------------------|------------------|------------------|--------------------------------|-------------------------------|----------------------|
| <b>Income</b>                                       |                  |                  |                  |                                |                               |                      |
| 4001 - Registration Fees                            |                  |                  |                  |                                |                               |                      |
| 4011 - Independent Practice \$575                   | 5,619,189        | 5,561,752        | 5,571,750        | 9,998                          | 0%                            | 79.9%                |
| 4012 - Independent Practice - Prorated              | 46,997           | 54,896           | 247,790          | 192,894                        | 351%                          | 3.6%                 |
| 4013 - Prof Corp Fees \$250                         | 110,750          | 111,250          | 103,250          | -8,000                         | -7%                           | 1.5%                 |
| 4014 - Provisional Practice Fee \$75                | 38,850           | 45,975           | 34,500           | -11,475                        | -25%                          | 0.5%                 |
| 4021 - Cross Border Registration Fee \$100          | 600              | 0                | 400              | 400                            | -                             | 0.0%                 |
| 4007 - Registration fee credits                     | -29,602          | -53,326          | -42,860          | 10,466                         | -20%                          | -0.6%                |
| <b>Total 4001 - Registration Fees</b>               | <b>5,786,785</b> | <b>5,720,547</b> | <b>5,914,830</b> | <b>194,283</b>                 | <b>3%</b>                     | <b>84.9%</b>         |
| <b>Total 4008 - Admin Fees</b>                      | <b>118,125</b>   | <b>169,150</b>   | <b>162,200</b>   | <b>-6,950</b>                  | <b>-4%</b>                    | <b>2.3%</b>          |
| <b>Total 4002 - Interest Income</b>                 | <b>125,559</b>   | <b>102,708</b>   | <b>138,277</b>   | <b>35,569</b>                  | <b>35%</b>                    | <b>2.0%</b>          |
| 4030 - ETP Assessment Fees                          |                  | 0                | 0                | 0                              | -                             | 0.0%                 |
| 4031 - Reg Com Exemption administrative charge      |                  | 0                | 442,400          | 442,400                        | -                             | 6.3%                 |
| 4032 - OCE Fees                                     |                  | 0                | 312,000          | 312,000                        | -                             | 4.5%                 |
| <b>Total 4030 - ETP Assessment Fees</b>             | <b>0</b>         | <b>221,600</b>   | <b>754,400</b>   | <b>532,800</b>                 | <b>240%</b>                   | <b>10.8%</b>         |
| <b>Total 4010 - Miscellaneous Income</b>            | <b>0</b>         | <b>1,885</b>     | <b>0</b>         | <b>-1,885</b>                  | <b>-100%</b>                  | <b>0.0%</b>          |
| <b>Total Income</b>                                 | <b>6,030,469</b> | <b>6,215,890</b> | <b>6,969,708</b> | <b>753,817</b>                 | <b>12%</b>                    | <b>100.0%</b>        |
| <b>Expense</b>                                      |                  |                  |                  |                                |                               |                      |
| 5000 - Committee Per Diem                           |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 5001 - Chairs Training - per diem</b>      | <b>-822</b>      | <b>0</b>         | <b>3,570</b>     | <b>3,570</b>                   | <b>-</b>                      | <b>0.0%</b>          |
| <b>Total 5002 - ICRC - per diem</b>                 | <b>13,771</b>    | <b>37,965</b>    | <b>36,172</b>    | <b>-1,793</b>                  | <b>-5%</b>                    | <b>0.4%</b>          |
| <b>Total 5003 - Council - per diem</b>              | <b>29,517</b>    | <b>41,677</b>    | <b>57,561</b>    | <b>15,884</b>                  | <b>38%</b>                    | <b>0.7%</b>          |
| <b>Total 5005 - Discipline Committee - per diem</b> | <b>11,841</b>    | <b>40,201</b>    | <b>22,208</b>    | <b>-17,994</b>                 | <b>-45%</b>                   | <b>0.3%</b>          |
| <b>Total 5006 - Executive - per diem</b>            | <b>31,806</b>    | <b>40,159</b>    | <b>17,198</b>    | <b>-22,961</b>                 | <b>-57%</b>                   | <b>0.2%</b>          |
| <b>Total 5010 - Patient Relations - per diem</b>    | <b>235</b>       | <b>651</b>       | <b>2,820</b>     | <b>2,169</b>                   | <b>333%</b>                   | <b>0.0%</b>          |
| <b>Total 5011 - QA Committee - per diem</b>         | <b>15,241</b>    | <b>9,770</b>     | <b>9,548</b>     | <b>-222</b>                    | <b>-2%</b>                    | <b>0.1%</b>          |
| <b>Total 5012 - Registration Comm. - per diem</b>   | <b>1,801</b>     | <b>4,661</b>     | <b>7,556</b>     | <b>2,896</b>                   | <b>62%</b>                    | <b>0.1%</b>          |
| <b>Total 5017 - Finance Committee - per diem</b>    | <b>6,413</b>     | <b>6,998</b>     | <b>5,532</b>     | <b>-1,466</b>                  | <b>-21%</b>                   | <b>0.1%</b>          |
| <b>Total 5000 - Committee Per Diem</b>              | <b>109,802</b>   | <b>182,081</b>   | <b>162,165</b>   | <b>-19,916</b>                 | <b>-11%</b>                   | <b>2.0%</b>          |
| <b>Total 5013 - Patient Relations - Expenses</b>    | <b>0</b>         | <b>0</b>         | <b>1,583</b>     | <b>1,583</b>                   | <b>-</b>                      | <b>0.0%</b>          |
| <b>Total 5051 - Chairs Training - expenses</b>      | <b>-819</b>      | <b>0</b>         | <b>11,486</b>    | <b>11,486</b>                  | <b>-</b>                      | <b>0.1%</b>          |
| <b>Total 5052 - ICRC - expenses</b>                 | <b>8,197</b>     | <b>3,494</b>     | <b>25,732</b>    | <b>22,238</b>                  | <b>636%</b>                   | <b>0.3%</b>          |
| <b>Total 5053 - Council - expenses</b>              | <b>12,753</b>    | <b>26,524</b>    | <b>72,083</b>    | <b>45,559</b>                  | <b>172%</b>                   | <b>0.9%</b>          |
| <b>Total 5055 - Discipline Committee - expenses</b> | <b>3,096</b>     | <b>0</b>         | <b>3,258</b>     | <b>3,258</b>                   | <b>-</b>                      | <b>0.0%</b>          |
| <b>Total 5056 - Executive Committee - expenses</b>  | <b>3,151</b>     | <b>12,145</b>    | <b>7,932</b>     | <b>-4,213</b>                  | <b>-35%</b>                   | <b>0.1%</b>          |
| <b>Total 5062 - QA Committee - expenses</b>         | <b>502</b>       | <b>1,743</b>     | <b>2,747</b>     | <b>1,004</b>                   | <b>58%</b>                    | <b>0.0%</b>          |
| <b>Total 5063 - Registration Comm. Expenses</b>     | <b>78</b>        | <b>0</b>         | <b>2,217</b>     | <b>2,217</b>                   | <b>-</b>                      | <b>0.0%</b>          |
| <b>Total 5075 - Finance Committee - expenses</b>    | <b>2,707</b>     | <b>-2,560</b>    | <b>3,002</b>     | <b>5,562</b>                   | <b>-217%</b>                  | <b>0.0%</b>          |
| <b>Total 5050 - Committee Reimbursed Expenses</b>   | <b>29,666</b>    | <b>41,346</b>    | <b>130,040</b>   | <b>88,694</b>                  | <b>215%</b>                   | <b>1.6%</b>          |
| 5100 - Information Management                       |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 5101 - IT Hardware</b>                     | <b>30,651</b>    | <b>8,978</b>     | <b>21,001</b>    | <b>12,023</b>                  | <b>134%</b>                   | <b>0.3%</b>          |
| <b>Total 5102 - Software</b>                        | <b>51,495</b>    | <b>84,176</b>    | <b>116,609</b>   | <b>32,433</b>                  | <b>39%</b>                    | <b>1.4%</b>          |
| <b>Total 5103 - IT Maintenance</b>                  | <b>72,202</b>    | <b>85,176</b>    | <b>138,264</b>   | <b>53,088</b>                  | <b>62%</b>                    | <b>1.7%</b>          |
| <b>Total 5104 - IT Database</b>                     | <b>169,518</b>   | <b>84,798</b>    | <b>157,172</b>   | <b>72,374</b>                  | <b>85%</b>                    | <b>1.9%</b>          |
| <b>Total 5100 - Information Management</b>          | <b>323,866</b>   | <b>263,129</b>   | <b>433,046</b>   | <b>169,917</b>                 | <b>65%</b>                    | <b>5.2%</b>          |
| 5400 - Office and General                           |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 5200 - Insurance</b>                       | <b>10,688</b>    | <b>9,633</b>     | <b>11,068</b>    | <b>1,436</b>                   | <b>15%</b>                    | <b>0.1%</b>          |
| <b>Total 5300 - Networking</b>                      | <b>194</b>       | <b>114</b>       | <b>780</b>       | <b>666</b>                     | <b>585%</b>                   | <b>0.0%</b>          |
| <b>Total 5301 - Conference and Travel</b>           | <b>0</b>         | <b>4,803</b>     | <b>11,057</b>    | <b>6,255</b>                   | <b>130%</b>                   | <b>0.1%</b>          |
| <b>Total 5402 - Bank &amp; Service Charges</b>      | <b>188,201</b>   | <b>101,734</b>   | <b>161,100</b>   | <b>59,366</b>                  | <b>58%</b>                    | <b>2.0%</b>          |
| <b>Total 5403 - Maintenance &amp; Repairs</b>       | <b>2,851</b>     | <b>2,506</b>     | <b>0</b>         | <b>-2,506</b>                  | <b>-100%</b>                  | <b>0.0%</b>          |
| <b>Total 5405 - Memberships &amp; Publications</b>  | <b>19,716</b>    | <b>25,527</b>    | <b>25,002</b>    | <b>-525</b>                    | <b>-2%</b>                    | <b>0.3%</b>          |
| <b>Total 5406 - CAPR Fees</b>                       | <b>211,646</b>   | <b>161,489</b>   | <b>239,316</b>   | <b>77,827</b>                  | <b>48%</b>                    | <b>2.9%</b>          |
| <b>Total 5407 - Office &amp; Kitchen supplies</b>   | <b>4,208</b>     | <b>5,549</b>     | <b>1,200</b>     | <b>-4,349</b>                  | <b>-78%</b>                   | <b>0.0%</b>          |
| <b>Total 5408 - Postage &amp; Courier</b>           | <b>9,854</b>     | <b>6,002</b>     | <b>4,080</b>     | <b>-1,922</b>                  | <b>-32%</b>                   | <b>0.0%</b>          |
| <b>Total 5409 - Rent</b>                            | <b>467,973</b>   | <b>480,403</b>   | <b>286,367</b>   | <b>-194,036</b>                | <b>-40%</b>                   | <b>3.5%</b>          |
| <b>Total 5411 - Printing &amp; Filing services</b>  | <b>34,112</b>    | <b>20,459</b>    | <b>2,819</b>     | <b>-17,640</b>                 | <b>-86%</b>                   | <b>0.0%</b>          |
| <b>Total 5412 - Telephone &amp; Internet</b>        | <b>32,755</b>    | <b>35,380</b>    | <b>28,640</b>    | <b>-6,740</b>                  | <b>-19%</b>                   | <b>0.3%</b>          |
| <b>Total 5413 - Bad Debt</b>                        | <b>-1,745</b>    | <b>7,902</b>     | <b>10,000</b>    | <b>2,098</b>                   | <b>27%</b>                    | <b>0.1%</b>          |
| <b>Total 5400 - Office and General</b>              | <b>980,452</b>   | <b>861,500</b>   | <b>781,429</b>   | <b>-80,070</b>                 | <b>-9%</b>                    | <b>9.5%</b>          |
| 5500 - Regulatory Effectiveness                     |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 5502 - Strategic Operations</b>            | <b>10,401</b>    | <b>27,459</b>    | <b>10,000</b>    | <b>-17,459</b>                 | <b>-64%</b>                   | <b>0.1%</b>          |
| <b>Total 5503 - Council Education</b>               | <b>21,629</b>    | <b>38,698</b>    | <b>0</b>         | <b>-38,698</b>                 | <b>-100%</b>                  | <b>0.0%</b>          |
| <b>Total 5504 - Elections</b>                       | <b>3,450</b>     | <b>3,300</b>     | <b>0</b>         | <b>-3,300</b>                  | <b>-100%</b>                  | <b>0.0%</b>          |
| <b>Total 5505 - Policy Development</b>              | <b>17,753</b>    | <b>71,906</b>    | <b>25,000</b>    | <b>-46,906</b>                 | <b>-65%</b>                   | <b>0.3%</b>          |
| <b>Total 5506 - Entry to Practice Project</b>       | <b>0</b>         | <b>0</b>         | <b>40,530</b>    | <b>40,530</b>                  | <b>-</b>                      | <b>0.5%</b>          |
| <b>Total 5510 - Governance</b>                      | <b>0</b>         | <b>0</b>         | <b>44,736</b>    | <b>44,736</b>                  | <b>-</b>                      | <b>0.5%</b>          |
| <b>Total 5500 - Regulatory Effectiveness</b>        | <b>53,232</b>    | <b>141,363</b>   | <b>120,266</b>   | <b>-21,097</b>                 | <b>-15%</b>                   | <b>1.5%</b>          |
| 5600 - Communications                               |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 5605 - Translation Services</b>            | <b>9,204</b>     | <b>20,588</b>    | <b>16,300</b>    | <b>-4,288</b>                  | <b>-21%</b>                   | <b>0.2%</b>          |
| <b>Total 5620 - Print Communication</b>             | <b>4,003</b>     | <b>809</b>       | <b>660</b>       | <b>-149</b>                    | <b>-18%</b>                   | <b>0.0%</b>          |
| <b>Total 5621 - Online Communication</b>            | <b>81,117</b>    | <b>69,911</b>    | <b>99,380</b>    | <b>29,469</b>                  | <b>42%</b>                    | <b>1.2%</b>          |
| <b>Total 5622 - In-person Communication</b>         | <b>902</b>       | <b>-274</b>      | <b>1,300</b>     | <b>1,574</b>                   | <b>-575%</b>                  | <b>0.0%</b>          |
| <b>Total 5623 - Research Expense</b>                | <b>0</b>         | <b>0</b>         | <b>0</b>         | <b>0</b>                       | <b>-</b>                      | <b>0.0%</b>          |
| <b>Total 5600 - Communications</b>                  | <b>95,226</b>    | <b>91,034</b>    | <b>117,640</b>   | <b>26,606</b>                  | <b>29%</b>                    | <b>1.4%</b>          |
| 5700 - Professional fees                            |                  | 0                | 0                | -                              | -                             | 0.0%                 |
| <b>Total 4004 - Cost recovery from cost orders</b>  | <b>-84,511</b>   | <b>-100,534</b>  | <b>71,500</b>    | <b>172,034</b>                 | <b>-171%</b>                  | <b>0.9%</b>          |
| <b>Total 5701 - Audit</b>                           | <b>19,413</b>    | <b>19,573</b>    | <b>19,493</b>    | <b>-80</b>                     | <b>0%</b>                     | <b>0.2%</b>          |
| <b>Total 5702 - Hearing Expenses</b>                | <b>2,411</b>     | <b>4,050</b>     | <b>5,434</b>     | <b>1,384</b>                   | <b>34%</b>                    | <b>0.1%</b>          |
| <b>Total 5703 - Communications Consultant</b>       | <b>0</b>         | <b>23,984</b>    | <b>0</b>         | <b>-23,984</b>                 | <b>-100%</b>                  | <b>0.0%</b>          |

College of Physiotherapists of Ontario  
Annual Operating Budget  
for the period ending March 31, 2023 (FY 2023)  
prepared: February 22, 2022

| GL ACCOUNT NUMBERS                                      | FY 2021<br>Actual | FY 2022<br>Forecast | FY 2023<br>Budget | Variance<br>FY2023 to FY2022 (\$) | Variance<br>FY2023 to FY2022 (%) | Percentage of Budget |
|---|-------------------|---------------------|-------------------|-----------------------------------|----------------------------------|----------------------|
| 5704 - Investigation Services                           |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| <b>Total 5704 - Investigation Services</b>              | <b>92,995</b>     | <b>80,694</b>       | <b>82,492</b>     | <b>1,798</b>                      | <b>2%</b>                        | <b>1.0%</b>          |
| <b>Total 5705 - Additional Professional Services</b>    | <b>6,770</b>      | <b>18,064</b>       | <b>10,328</b>     | <b>-7,736</b>                     | <b>-43%</b>                      | <b>0.1%</b>          |
| <b>Total 5706 - Investigator travel</b>                 | <b>0</b>          | <b>100</b>          | <b>400</b>        | <b>300</b>                        | <b>300%</b>                      | <b>0.0%</b>          |
| <b>Total 5707 - Decision Writing</b>                    | <b>6,063</b>      | <b>10,679</b>       | <b>23,650</b>     | <b>12,971</b>                     | <b>121%</b>                      | <b>0.3%</b>          |
| <b>Total 5708 - Peer / expert opinion</b>               | <b>2,863</b>      | <b>10,956</b>       | <b>21,600</b>     | <b>10,645</b>                     | <b>97%</b>                       | <b>0.3%</b>          |
| <b>Total 5709 - Registration - Other</b>                | <b>4,562</b>      | <b>3,362</b>        | <b>0</b>          | <b>-3,362</b>                     | <b>-100%</b>                     | <b>0.0%</b>          |
| 5750 - Legal  |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| 5756 - Legal - C & D Accruals                           |                   | 0                   | 111,000           | 111,000                           | -                                | 1.3%                 |
| <b>Total 5756 - Legal - C&amp;D Accruals</b>            | <b>130,383</b>    | <b>36,238</b>       | <b>111,000</b>    | <b>74,762</b>                     | <b>206%</b>                      | <b>1.3%</b>          |
| 5751 - Legal - Quality Assurance                        |                   | 0                   | 2,802             | 2,802                             | -                                | 0.0%                 |
| 5751 - Legal - Quality Assurance                        |                   | 0                   | 2,102             | 2,102                             | -                                | 0.0%                 |
| <b>Total 5751 - Legal - Quality Assurance</b>           | <b>17,809</b>     | <b>3,865</b>        | <b>4,904</b>      | <b>1,040</b>                      | <b>27%</b>                       | <b>0.1%</b>          |
| 5752 - Legal - Registration                             |                   | 0                   | 15,400            | 15,400                            | -                                | 0.2%                 |
| 5752 - Legal - Registration                             |                   | 0                   | 5,000             | 5,000                             | -                                | 0.1%                 |
| 5752 - Legal - Registration                             |                   | 0                   | 7,000             | 7,000                             | -                                | 0.1%                 |
| <b>Total 5752 - Legal - Registration</b>                | <b>23,965</b>     | <b>26,821</b>       | <b>27,400</b>     | <b>579</b>                        | <b>2%</b>                        | <b>0.3%</b>          |
| 5753 - Legal - Professional Conduct                     |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| 5760 - General Counsel                                  | 35,613            | 56,183              | 109,949           | 53,766                            | 96%                              | 1.3%                 |
| 5761 - Independent Legal Advice                         | 66,736            | 38,678              | 91,724            | 53,046                            | 137%                             | 1.1%                 |
| 5762 - Hearing Counsel                                  | 80,322            | 41,698              | 160,749           | 119,051                           | 286%                             | 1.9%                 |
| 5763 - Court Proceedings & Appeals                      | -35,188           | 14,837              | 25,000            | 10,163                            | 68%                              | 0.3%                 |
| 5754 - Legal - PC - Other                               | 75                |                     |                   | 0                                 | -                                | 0.0%                 |
| <b>Total 5753 - Legal - Professional Conduct</b>        | <b>147,558</b>    | <b>151,395</b>      | <b>387,422</b>    | <b>236,027</b>                    | <b>156%</b>                      | <b>4.7%</b>          |
| 5754 - Legal - Council Advice                           | 14,674            | 24,567              | 18,080            | -6,487                            | -26%                             | 0.2%                 |
| 5755 - General Legal - CS                               | 7,383             | 8,494               | 7,910             | -584                              | -7%                              | 0.1%                 |
| 5757 - Legal - Executive Office                         | 9,114             | 15,723              | 6,000             | -9,723                            | -62%                             | 0.1%                 |
| 5758 - Legal - Practice Advice                          | 0                 | 339                 | 2,000             | 1,661                             | 490%                             | 0.0%                 |
| <b>Total 5750 - Legal</b>                               | <b>350,886</b>    | <b>267,442</b>      | <b>564,716</b>    | <b>297,274</b>                    | <b>111%</b>                      | <b>6.8%</b>          |
| <b>Total 5700 - Professional fees</b>                   | <b>401,453</b>    | <b>338,369</b>      | <b>656,613</b>    | <b>318,243</b>                    | <b>94%</b>                       | <b>8.0%</b>          |
| 5800 - Programs   |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| <b>Total 5810 - Quality Program</b>                     | <b>48,336</b>     | <b>149,313</b>      | <b>222,532</b>    | <b>73,219</b>                     | <b>49%</b>                       | <b>2.7%</b>          |
| 5802 - Jurisprudence                                    | 13,089            | 27,707              | 11,846            | -15,861                           | -57%                             | 0.1%                 |
| <b>Total 5830 - Entry to Practice - Projects</b>        | <b>0</b>          | <b>44,351</b>       | <b>814,312</b>    | <b>769,961</b>                    | <b>1736%</b>                     | <b>9.9%</b>          |
| <b>Total 5870 - Practice Enhancement - QA</b>           | <b>1,569</b>      | <b>4,631</b>        | <b>7,015</b>      | <b>2,384</b>                      | <b>51%</b>                       | <b>0.1%</b>          |
| <b>Total 5880 - Remediation</b>                         | <b>-70</b>        | <b>7,537</b>        | <b>7,015</b>      | <b>-522</b>                       | <b>-7%</b>                       | <b>0.1%</b>          |
| <b>Total 5890 - Funding for Therapy and Counselling</b> | <b>14,508</b>     | <b>15,604</b>       | <b>33,000</b>     | <b>17,396</b>                     | <b>111%</b>                      | <b>0.4%</b>          |
| <b>Total 4022 - Recovery of Therapy Costs</b>           | <b>-2,143</b>     | <b>-3,500</b>       | <b>3,000</b>      | <b>6,500</b>                      | <b>-186%</b>                     | <b>0.0%</b>          |
| <b>Total 5800 - Programs</b>                            | <b>75,289</b>     | <b>246,914</b>      | <b>1,085,705</b>  | <b>838,791</b>                    | <b>340%</b>                      | <b>13.1%</b>         |
| 5900 - Staffing   |                   | 0                   | 0                 | 0                                 | -                                | 0.0%                 |
| <b>Total Compensation - Salary</b>                      | <b>3,363,629</b>  | <b>3,808,885</b>    | <b>4,428,610</b>  | <b>619,725</b>                    | <b>16%</b>                       | <b>53.6%</b>         |
| <b>Total 5904 - Consultant Fees</b>                     | <b>61,939</b>     | <b>62,618</b>       | <b>87,920</b>     | <b>25,302</b>                     | <b>40%</b>                       | <b>1.1%</b>          |
| <b>Total 5905 - Staff Development</b>                   | <b>40,061</b>     | <b>35,290</b>       | <b>68,815</b>     | <b>33,525</b>                     | <b>95%</b>                       | <b>0.8%</b>          |
| <b>Total 5906 - Recruitment</b>                         | <b>1,996</b>      | <b>3,208</b>        | <b>3,882</b>      | <b>674</b>                        | <b>21%</b>                       | <b>0.0%</b>          |
| <b>Total 5907 - Staff Recognition</b>                   | <b>13,325</b>     | <b>13,907</b>       | <b>18,715</b>     | <b>4,808</b>                      | <b>35%</b>                       | <b>0.2%</b>          |
| <b>Total 5908 - Registrar &amp; Requested Education</b> | <b>98,761</b>     | <b>100</b>          | <b>1,050</b>      | <b>950</b>                        | <b>950%</b>                      | <b>0.0%</b>          |
| <b>Total 5900 - Staffing</b>                            | <b>3,579,710</b>  | <b>3,924,007</b>    | <b>4,608,991</b>  | <b>684,983</b>                    | <b>17%</b>                       | <b>55.8%</b>         |
| <b>Total 6001 - Amortization</b>                        | <b>202,672</b>    | <b>199,795</b>      | <b>163,045</b>    | <b>-36,750</b>                    | <b>-18%</b>                      | <b>2.0%</b>          |
| <b>Total Expense</b>                                    | <b>5,851,370</b>  | <b>6,289,539</b>    | <b>8,258,940</b>  | <b>1,969,401</b>                  | <b>31%</b>                       | <b>100.0%</b>        |
| <b>Net Income/Deficit</b>                               | <b>179,099</b>    | <b>-73,648</b>      | <b>-1,289,232</b> | <b>-1,215,584</b>                 | <b>1651%</b>                     | <b>-15.6%</b>        |



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

**Motion No.: 9.0**

**Council Meeting  
March 23-24, 2022**

**Agenda # 9: CPO Strategic Plan**

**It is moved by**

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**and seconded by**

---

**that:**

Council approve the 2022-2026 Strategic Plan (mission, vision, values and strategic priorities).

|                       |   |
|-----------------------|---|
| <b>Meeting Date:</b>  | March 23-24, 2022                               |
| <b>Agenda Item #:</b> | 9   |
| <b>Category</b>       | Strategic                                       |
| <b>Issue:</b>         | 2022-2026 Strategic Plan<br><i>For Decision</i> |
| <b>Submitted by:</b>  | Rod Hamilton, Registrar                         |

**Issue:**

Since September 2021, Council has been engaged in a strategic planning process. A new strategic plan for 2022-2026 is now presented for Council approval.

**Background:**

The College's previous strategic plan ended in 2021. Since September 2021, Council has been engaging in a process to identify a new strategic plan and strategic priorities for the next few years. This process includes a review of the College's mission, vision, and values.

The College engaged with the consulting firm Optimus SBR to facilitate this process. Optimus helped to ensure that all relevant stakeholders were engaged and had opportunity to provide input during this process. The following activities were completed:

- A survey to the Citizens' Advisory Group to understand the public's perspective on the College's strategic priorities
- Targeted interviews with key stakeholder groups (i.e. association, other health regulators, Committee members, academic community) to gather comments on the College, environmental trends and strategic priorities
- A survey to physiotherapists to understand registrants' perspective on the College's strategic priorities
- A facilitated discussion with Council in September 2021 to generate ideas for strategic priorities, areas of focus, and activities
- A facilitated discussion with Council in December 2021 to explore key questions to help shape the identity of the College and validate the strategic planning priorities developed in the September 2021 session
- Discussions with College staff to identify potential initiatives to support the strategic priorities
- A facilitated discussion with Council in March 2022 to review and collect initial feedback on a draft strategic plan document

Following these activities, a new strategic plan document for 2022-2026 is now ready for Council's approval. The strategic plan contains the following elements:

- An updated mission statement
- An updated vision statement
- Value statements
- Four strategic priorities

The strategic plan document is attached in Appendix 1.

### Next Steps:

Following Council approval of the new strategic plan (mission, vision, values and strategic priorities), the following actions will be taken:

- *Communicating to the public:* The new strategic plan will be communicated to the public by posting on the College's website. Prior to posting, a plain language review of the document will be done to ensure the language used is accessible.
- *Additional work on initiatives and measures:* Staff will collect additional input from Council regarding potential initiatives to support the strategic priorities and potential measures to use for tracking and reporting on progress. This will be done in the coming months with an update back to Council at its June 2022 meeting.

### Public Interest Assessment:

The College's strategic plan identifies areas of focus that are intended to help the College better fulfill its public protection mandate. Elements of the strategic priorities touch on all domains of public interest: equity, equality, accessibility, protection, accountability, and quality care.

### Decision Sought:

That Council approve the 2022-2026 Strategic Plan (mission, vision, values and strategic priorities).

### Related Action Items:

| Action item description   | Required by date |
|---|------------------|
| Plain language review of strategic plan document and post to College website.                         | June 2022        |
| Solicit addition input from Council on potential initiatives and outcome measures and provide update. | June 2022        |

**Attachments:**

- Appendix 1: College of Physiotherapists of Ontario 2022-2026 Strategic Plan



# College of Physiotherapists of Ontario

Strategic Plan 2022 – 2026

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March 23, 2022



COLLEGE OF  
**PHYSIOTHERAPISTS**  
of ONTARIO

# Strategic Plan Framework

## Mission

To protect the public interest by ensuring physiotherapists provide competent, safe, and ethical care.



# Regulation and Risk

Effectively regulate the physiotherapy profession in Ontario and advance its statutory work through a risk-based approach.

**Definitional Statements** - To achieve this strategic pillar means:

- Taking a regulatory approach that focuses on preventing and solving problems instead of following rigid processes (i.e., a risk-based approach)
- Using data analytics to make proactive and evidence-based decision-making
- Ensuring there is an effective evaluation of entry-to-practice competency
- Ensuring on-going competency, accountability, and compliance of registrants
- Ensuring that policies and standards are up-to-date and relevant
- Ensuring the College has the required operational supports to deliver on statutory obligations

# Engagement and Partnerships



Collaborate, partner and engage with the public, profession, and other stakeholders in a clear, transparent and timely manner to enhance trust and credibility.

**Definitional Statements** - To achieve this strategic pillar means:

- Engaging with the public, profession, regulators, government, and other stakeholders in a collaborative, open, and transparent manner to gather input and share information
- Working with stakeholders and partners to apply uniform EDI principles to the College's standards and practices and across the regulatory sector
- Communicating with transparency and ensuring information is easily accessible, including communicating accountabilities and standards to registrants
- Communicating in a timely manner

# People and Culture



Promote a collaborative environment and a culture based on equity, diversity and inclusion principles while ensuring staff and Council have the resources they need to do their best work. Having an effective team will result in greater protection of the public interest.

**Definitional Statements** - To achieve this strategic pillar means:

- Promoting a high performing and inclusive workplace culture that celebrates and recognizes the work of staff and supports their psychological, social, and physical health and well-being
- Attracting and retaining talent based on organizational needs
- Ensuring sound governance practices that meet the expectations of the government and public
- Ensuring the College has the staff and resources it needs to accomplish its mission, vision and strategy

# Performance and Accountability

Implement strong corporate structures and systems that include effective data, technology, and processes to enable informed decision-making and progressive corporate performance to extend CPO's work and impact.

**Definitional Statements** - To achieve this strategic pillar means:

- Using data-informed and evidence-based decision-making approaches
- Identifying, understanding, mitigating, and reporting risks to the organization and the public
- Identifying opportunities to increase efficiency, timeliness, effectiveness and reduce costs
- Effectively measure, track and demonstrate the organization's performance and effectiveness to those we are accountable to
- Provide the necessary technology systems to support required data management for all College program areas

## **Agenda # 10**

Council Education: Quality Assurance Program

Presentation by Shelley Martin, Quality Assurance Manager



COLLEGE OF  
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**Motion No.: 11.0**

**Council Meeting  
March 23-24, 2022**

**Agenda # 11: College Performance Measurement Framework (CPMF) 2021 Report**

It is moved by

---

and seconded by

---

that:

Council approves the 2021 CPMF Report for publication.

|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022  |
| <b>Agenda Item #:</b> | 11   |
| <b>Category</b>       | Other (External Reporting)   |
| <b>Issue:</b>         | CPMF 2021 Report<br><i>For Decision</i>                            |
| <b>Submitted by:</b>  | Rod Hamilton, Registrar<br>Joyce Huang, Strategic Projects Manager |

### Issue:

The College Performance Measurement Framework (CPMF) 2021 report has been completed. The Executive Committee recommends that Council approve the report for publication.

### Background

In 2018, the Ministry convened a working group to develop a performance measurement framework. The working group included representatives from health regulatory colleges as well as measurement experts from other organizations.

The purpose of developing such a framework was to strengthen accountability and oversight, improve College performance and ensure public confidence in the profession is maintained. The resulting product was the College Performance Measurement Framework (CPMF). The CPMF intends to provide Colleges with a mechanism to report annually on a series of considered best practices and expectations on key statutory functions, programs, and organizational management.

Given that the CPMF is a new development for all Colleges and many may have not implemented all of the outlined standards, the initial reporting will provide key stakeholders (the public, Ministry of Health, other regulators) with baseline information on colleges' current processes relating to best practices of regulatory excellence and performance improvement commitments. The intention is to both help refine benchmarks for regulatory excellence and stimulate discussions for performance improvement at Colleges for both Council and staff. At this time the Ministry is not assessing whether a College meets or does not meet the Standards in the framework, nor comparing performance across Colleges.

### CPMF Outline

The CPMF is organized into seven domains:

1. Governance

2. Resources
3. System Partner
4. Information Management
5. Regulatory Policies
6. Suitability to Practice
7. Measurement, Reporting, and Improvement

The Framework intends to address the following questions:

1. How well does a College ensure that only qualified individuals who demonstrate that they are competent and safe are practising?
2. How well does a College ensure that its governance and operations are transparent, effective, and efficient in serving and protecting the public interest?
3. How well does a College ensure sustained competence and quality of care is delivered by all registrants?
4. How well does a College help ensure that those in need of care can access qualified health professionals when and where they need them?
5. How responsive is a College in addressing the changing practice environment of its registrants?

### **CPO's 2021 Report**

The Ministry released the 2021 iteration of the CPMF tool on November 23, 2021. The letter from the Ministry is included as Appendix 1. This is the second year of CPMF reporting. The Ministry continues to update and refine the tool based on the Year 1 feedback and experience. As a result, many of the Standards and Evidence items changed, and all Colleges are required to provide updated information for those Standards and Evidence items. Where a Standard or Evidence item did not change, and if a College fully met that Standard in 2020, then a College may opt to respond with "Meets Standard" to indicate that the current year's response is consistent with last year's response. The 2021 report also contains three new focus areas: Equity, Diversity and Inclusion; Risk Management; and Use of Technology.

The evidence included in the CPMF 2021 report was compiled from all areas of the College. As requested by the Ministry, the 2021 evidence is mainly focused on new activities that occurred in the 2021 reporting year (January to December). While there are a number of measures where the College did not meet or partially met the Standard, this is a reflection of the fact that the College is currently focused on addressing the clinical exam situation, which required the re-allocation of resources.

The full CPMF report is included as Appendix 2.

The Executive Committee considered the report and recommends that Council approve the report for publication.

**Public Interest Assessment:**

The CPMF Report is intended to help all Colleges demonstrate how their work helps them meet their public interest mandate. The report touches on all domains of public interest outlined by the Ministry of Health (equity, equality, accessibility, protection, accountability, and quality care).

**Decision Sought:**

That Council approve the College's CPMF 2021 Report for publication.

**Related Action Items:**

| Action item description  | Required by date             |
|--|------------------------------|
| Following Council approval, post the report to the College website | No later than March 31, 2022 |

**Attachments:**

- Appendix 1: Memorandum from the Assistant Deputy Minister on the Formal Launch of CPMF 2021
- Appendix 2: CPO's 2021 CPMF Report (draft)

Ministry of Health  
Ministry of Long-Term Care

Assistant Deputy Minister  
Strategic Policy, Planning & French Language  
Services Division

438 University Avenue, 10<sup>th</sup> floor  
Toronto ON M7A 2A5

Ministère de la Santé  
Ministère des Soins de longue durée

Sous-ministre adjoint  
Division des politiques et de la planification  
stratégiques, et des services en français

438 avenue University, 10e étage  
Toronto ON M7A 2A5



**MEMORANDUM TO:** Registrars and CEOs of Ontario's Health Regulatory Colleges

**FROM:** Sean Court  
Assistant Deputy Minister

**DATE:** November 22, 2021

**RE:** **Formal launch of the 2<sup>nd</sup> iteration of the College Performance Measurement Framework**

---

I am pleased to inform you that today the Ministry of Health (ministry) is formally launching the 2021 CPMF reporting cycle.

As you know, the CPMF has been designed to further strengthen the accountability and oversight of Ontario's health regulatory Colleges by providing information that is transparent, consistent and aligned across all Colleges on their performance in serving the public's interest.

By focusing on areas of improvement (e.g., better support for changing public expectations, patient needs, and delivery of care models), the CPMF makes it easier for patients, their families and employers to navigate the regulatory system. Similarly, highlighting commendable practices improves consistency across colleges.

The second iteration of the CPMF was refined based on feedback from Colleges, the public and experts resulting in the addition of three new focus areas: Diversity, Equity and Inclusion, Risk Management, and Use of Technology. Colleges are being asked to report on the new Measures and Evidence, as well as report back on improvement plans identified in 2020 and report on any changes in comparison to 2021.

The ministry is also aware that College processes and procedures were likely impacted by COVID-19 resulting in responses which may be inconsistent with the last reporting cycle. Ministry staff will work with you to ensure that this context is clearly communicated in the Colleges' Reporting Tools which are posted on the respective college websites to help the public better understand the information provided.

I would like to acknowledge that your comments and feedback helped to inform the final drafts of the Reporting Tool and the Technical Specifications Document. Your feedback was used to provide further clarification to some Measures and informed additional questions in the FAQs.

Similar to last year, this year Colleges will not be assessed or ranked against each other on the degree to which they have implemented the CPMF Standards and/or how well they are performing in adhering to their mandate. During the 2021 reporting cycle, the ministry will:

- Provide each College with performance feedback and potentially identify opportunities for improvement, upon request,
- Seek opportunities to foster collaboration among Colleges based on Commendable Practices identified in the 2020 reporting cycle and,
- Draft and post a Summary Report on the ministry website that will capture the Colleges' CPMF results at a system level (as opposed to the performance of each individual College) for the 2021 reporting cycle in comparison with changes or improvements with 2020.

The ministry asks Colleges to post their 2021 Reporting Tools on their websites by March 31, 2022 and to notify the ministry once this is done.

I would like to thank all of you again for your advice and support to date. The ministry looks forward to continuing this very important work with you over the coming year.

Sincerely,



---

Sean Court  
Assistant Deputy Minister

- c. Allison Henry, Director, Health Workforce Regulatory Oversight Branch, MOH  
Jason Maurier, Manager, Regulatory Oversight and Performance Unit, MOH

# College Performance Measurement Framework (CPMF) Reporting Tool

College of Physiotherapists of Ontario  
2021 Reporting Year

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# Introduction

## The College Performance Measurement Framework (CPMF)

The CPMF has been developed by the Ontario Ministry of Health (the Ministry) in close collaboration with Ontario’s health regulatory Colleges (Colleges), subject matter experts and the public with the aim of answering the question “how well are Colleges executing their mandate which is to act in the public interest?” This information will:

1. strengthen accountability and oversight of Ontario’s health regulatory Colleges; and
2. help Colleges improve their performance.

Each College will report on seven Domains with the support of six components, as illustrated in Table 1.

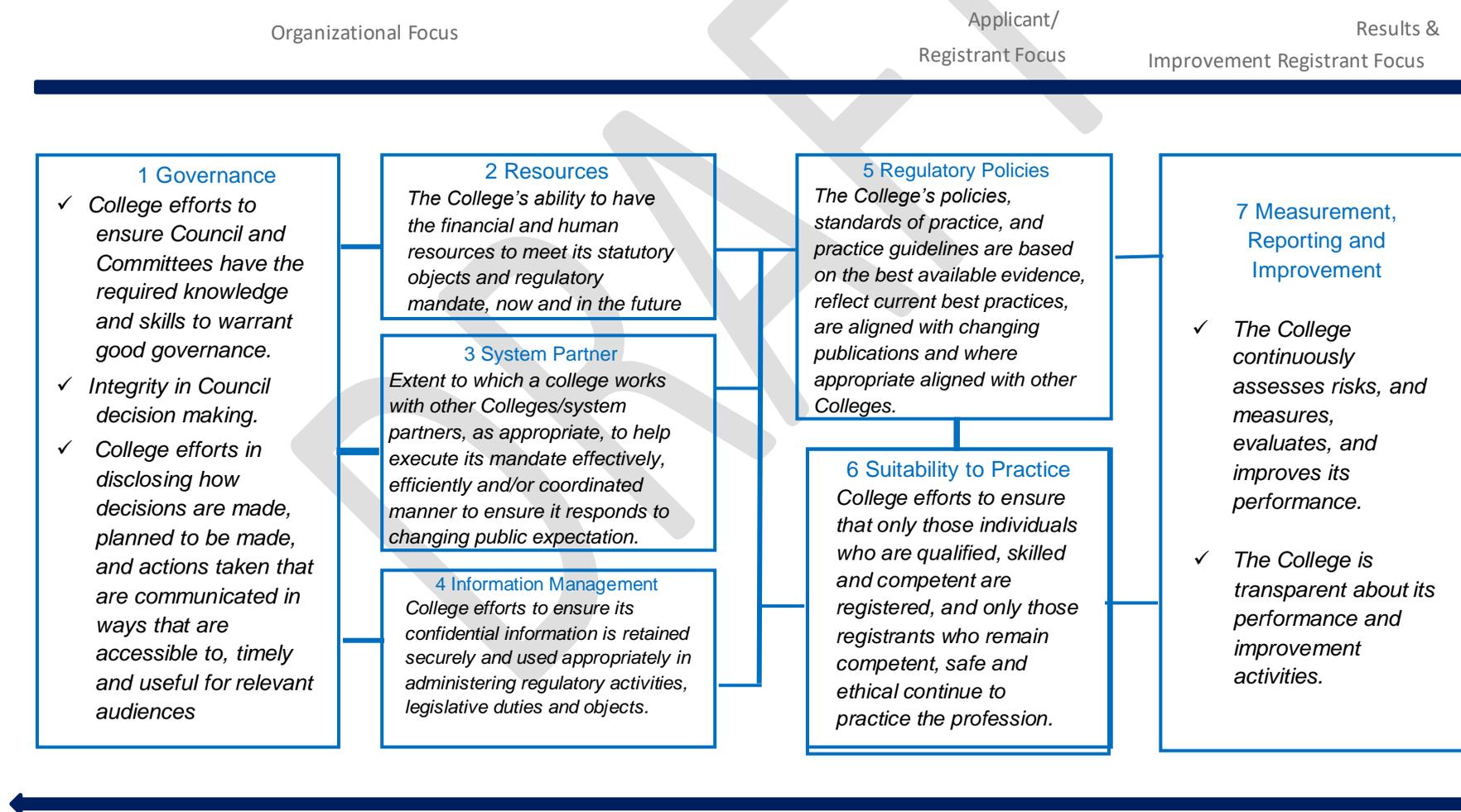
**Table 1:** CPMF Measurement Domains and Components

|   |                                    |   |  |
|---|------------------------------------|---|--|
| 1 | <b>Measurement domains</b>         | ? | Critical attributes of an excellent health regulator in Ontario that should be measured for the purpose of the CPMF.                               |
| 2 | <b>Standards</b>                   | ? | Performance-based activities that a College is expected to achieve and against which a College will be measured.                                   |
| 3 | <b>Measures</b>                    | ? | More specific requirements to demonstrate and enable the assessment of how a College achieves a Standard.  |
| 4 | <b>Evidence</b>                    | ? | Decisions, activities, processes, or the quantifiable results that are being used to demonstrate and assess a College’s achievement of a standard. |
| 5 | <b>Context measures</b>            | ? | Statistical data Colleges report that will provide helpful context about a College’s performance related to a standard.                            |
| 6 | <b>Planned improvement actions</b> | ? | Initiatives a College commits to implement over the next reporting period to improve its performance on one or more standards, where appropriate.  |

## CPMF Model

The seven measurement domains shown in Figure 1 are the critical attributes that contribute to a College effectively serving and protecting the public interest. They relate to key statutory functions and organizational aspects that enable a College to carry out its functions well. The seven domains are interdependent and together lead to the outcomes that a College is expected to achieve as an excellent regulator.

**Figure 1:** CPMF Model for Measuring Regulatory Excellence



**Figure 2: CPMF Domains and Standards**

| <b>Domains</b>                         | <b>Standards</b>  |
|--|---|
| Governance                             | 1. Council and statutory committee members have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the mandate of the College.                                 |
|  | 2. Council decisions are made in the public interest.   |
|  | 3. The College acts to foster public trust through transparency about decisions made and actions taken.   |
| Resources                              | 4. The College is a responsible steward of its (financial and human) resources.   |
| System Partner                         | 5. The College actively engages with other health regulatory Colleges and system partners to align oversight of the practice of the profession and support execution of its mandate.  |
|  | 6. The College maintains cooperative and collaborative relationships, and responds in a timely and effective manner to changing public expectations.  |
| Information Management                 | 7. Information collected by the College is protected from unauthorized disclosure.  |
| Regulatory Policies                    | 8. Policies, standards of practice, and practice guidelines are based in the best available evidence, reflect current best practices, are aligned with changing public expectations, and where appropriate aligned with other Colleges. |
| Suitability to Practice                | 9. The College has processes and procedures in place to assess the competency, safety, and ethics of the people it registers.   |
|  | 10. The College ensures the continued competence of all active registrants through its Quality Assurance processes. This includes an assessment of their competency, professionalism, ethical practice, and quality of care.            |
|  | 11. The complaints process is accessible and supportive.  |
|  | 12. All complaints, reports, and investigations are prioritized based on public risk, and conducted in a timely manner with necessary actions to protect the public   |
|  | 13. The College complaints process is coordinated and integrated.   |
| Measurement, Reporting and Improvement | 14. The College monitors, reports on, and improves its performance.   |

## The CPMF Reporting Tool

The second iteration of the CPMF Reporting Tool (along with the companion Technical Specifications for Quantitative CPMF Measures document) will continue to provide comprehensive and consistent information to the public, the ministry and other stakeholders by each of Ontario's health regulatory Colleges (Colleges). In providing this information each College will:

1. meet with the ministry to discuss the system partner domain and their progress on improvement commitments identified in the 2020 CPMF Report;
2. complete the self-assessment;
3. post the completed CPMF Report on its website; and
4. submit the CPMF Report to the ministry.

The purpose of the first and second iterations of the CPMF is to provide the public, the ministry and other stakeholders with baseline information respecting a College's activities and processes regarding best practices of regulatory excellence and, where relevant, the College's performance improvement commitments. At this time, the ministry will not assess whether a College meets or does not meet the Standards.

The information reported through the completed CPMF Reporting Tools may help to identify areas of improvement that warrant closer attention and potential follow-up. Furthermore, the reported results will help to lay a foundation upon which expectations and benchmarks for regulatory excellence can be refined and improved. Finally, the results of the first and second iterations may stimulate discussions about regulatory excellence and performance improvement among Council members and staff within a College, as well as between Colleges, the public, the ministry, college registrants/members, and other stakeholders.

Additionally, in 2021 the ministry developed a Summary Report highlighting key findings regarding the commendable practices Colleges already have in place, collective strengths, areas for improvement and the various commitments Colleges have made to improve their performance in serving and protecting the public as per their 2020 CPMF Reports. The focus of the Summary Report is on the performance of the regulatory system (as opposed to the performance of each individual College) and on areas where opportunities exist for colleges to learn from each other.

The ministry's Summary Report is available:

In English: [health.gov.on.ca/en/pro/programs/hwrob/regulated\\_professions.aspx](https://health.gov.on.ca/en/pro/programs/hwrob/regulated_professions.aspx), and

In French: [health.gov.on.ca/fr/pro/programs/hwrob/regulated\\_professions.aspx](https://health.gov.on.ca/fr/pro/programs/hwrob/regulated_professions.aspx)

As this will be the second time that Colleges will be reporting on their performance against the CPMF standards, the Colleges will be asked to report on:

- Improvements a College committed to undertake in the previous CPMF Report;
- Changes in comparison to baseline reporting from the 2020 CPMF Report; and
- Changes resulting from new or refined standards, measures, and evidence.<sup>1</sup>

### **Completing the CPMF Reporting Tool**

While the CPMF Reporting Tool seeks to clarify the information requested, it is not intended to direct College activities and processes or restrict the way a College fulfills its fiduciary duties. Where a term or concept is not explicitly defined in the CPMF Reporting Tool, the ministry relies on individual Colleges, as subject matter experts, to determine how a term should be appropriately interpreted given the uniqueness of the profession each College oversees.

In the spirit of continuous improvement, if the College plans to improve its activities or processes related to the respective Measure or Evidence, it is encouraged to highlight these planned improvement activities.

### **What has changed in 2021?**

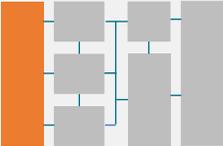
Based on feedback from the Colleges, the ministry made improvements to the current CPMF Reporting Tool, making it easier to complete.

- In Part 1 - These changes include drop-down menus, bookmarks to Measures, and additional information for clarification. Where a question remained unchanged from the 2020 CPMF reporting tool and a College fully met the Standard or Evidence, a College may opt to respond with 'Meets Standard' to illustrate that the current response is consistent with last year's response for the same Evidence. However, if there were changes between 2020 and 2021, the College is required to provide this updated information, including supporting information (i.e. provision of relevant links). Please note that this option is limited to only certain Evidence and is not available for all Evidence. Colleges will be asked to provide information in the right-hand column of each table indicating the degree to which they fulfill the "required Evidence" set out in Column Two.
- In Part 2 - Colleges are requested to refer to the Technical Specifications Document for detailed guidance on how to complete the section on Context Measures. Additionally, the ministry has also applied a drop-down menu where appropriate and has hyperlinked the definitions to a glossary of terms for easier navigation.

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<sup>1</sup> Informed by the results from the first reporting iteration, the standards, measures, and evidence were evaluated by a second CPMF Working Group and where appropriate were further refined for the second reporting cycle. Additionally, Colleges will also be asked to report on Measures where it was identified that further information is required to establish baseline information relevant to the intent of the requested Evidence.

## Part 1: Measurement Domains

|   |            | Measure<br>1.1 Where possible, Council and Statutory Committee members demonstrate that they have the knowledge, skills, and commitment prior to becoming a member of Council or a Statutory Committee. |   |  |           |  |  |   |    |
|--|------------|---|---|--|-----------|--|--|---|----|
| DOMAIN 1: GOVERNANCE   | STANDARD 1 | Required Evidence   | College Response  |  |           |  |  |   |    |
|  |            | a. Professional members are eligible to stand for election to Council only after: <ul style="list-style-type: none"> <li>i. meeting pre-defined competency and suitability criteria; and</li> </ul>     | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td data-bbox="790 492 2206 548">           The College fulfills this requirement:         </td> <td data-bbox="2206 492 2626 548" style="text-align: right;">           Partially         </td> </tr> <tr> <td colspan="2" data-bbox="790 548 2626 1073"> <ul style="list-style-type: none"> <li>• The competency and suitability criteria are public: Yes<br/><i>If yes, please insert a link to where they can be found, if not please list criteria.</i></li> </ul>           The College has some suitability criteria in place for Council members, though the College does not have competency criteria outlining essential qualifications beyond the minimum requirements.           <p>Suitability criteria are generic and relate to behaviour, relationships and conduct rather than competence. They are as follows:</p> <ul style="list-style-type: none"> <li>• The roles and responsibilities of a Council member are laid out in the <a href="#">College's Governance Manual</a> under Policy #1.2: Role of a Council Member. Further accountabilities are outlined in the College's <a href="#">Code of Conduct</a>.</li> <li>• The College's <a href="#">Council Elections</a> webpage highlights a variety of skills prospective Council members must possess.</li> <li>• Additional election suitability criteria can be found in the <a href="#">By-laws</a> (Part 3: Election or Appointment of Councillors) and as part of the candidate recruitment process on the <a href="#">College website</a>.</li> <li>• The College does not currently have a core competency framework in place prior to being eligible to run for Council election.</li> </ul> </td> </tr> <tr> <td data-bbox="790 1073 2206 1130"> <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i> </td> <td data-bbox="2206 1073 2626 1130" style="text-align: right;">           No         </td> </tr> <tr> <td colspan="2" data-bbox="790 1130 2626 1404"> <i>Additional comments for clarification (optional):</i><br/><br/>           The College looks forward to reviewing and implementing any forthcoming changes developed by the Ministry regarding competency-based selection of Council members.         </td> </tr> </table> | The College fulfills this requirement: | Partially | <ul style="list-style-type: none"> <li>• The competency and suitability criteria are public: Yes<br/><i>If yes, please insert a link to where they can be found, if not please list criteria.</i></li> </ul> The College has some suitability criteria in place for Council members, though the College does not have competency criteria outlining essential qualifications beyond the minimum requirements. <p>Suitability criteria are generic and relate to behaviour, relationships and conduct rather than competence. They are as follows:</p> <ul style="list-style-type: none"> <li>• The roles and responsibilities of a Council member are laid out in the <a href="#">College's Governance Manual</a> under Policy #1.2: Role of a Council Member. Further accountabilities are outlined in the College's <a href="#">Code of Conduct</a>.</li> <li>• The College's <a href="#">Council Elections</a> webpage highlights a variety of skills prospective Council members must possess.</li> <li>• Additional election suitability criteria can be found in the <a href="#">By-laws</a> (Part 3: Election or Appointment of Councillors) and as part of the candidate recruitment process on the <a href="#">College website</a>.</li> <li>• The College does not currently have a core competency framework in place prior to being eligible to run for Council election.</li> </ul> |  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i> | No |
| The College fulfills this requirement:   | Partially  |   |   |  |           |  |  |   |    |
| <ul style="list-style-type: none"> <li>• The competency and suitability criteria are public: Yes<br/><i>If yes, please insert a link to where they can be found, if not please list criteria.</i></li> </ul> The College has some suitability criteria in place for Council members, though the College does not have competency criteria outlining essential qualifications beyond the minimum requirements. <p>Suitability criteria are generic and relate to behaviour, relationships and conduct rather than competence. They are as follows:</p> <ul style="list-style-type: none"> <li>• The roles and responsibilities of a Council member are laid out in the <a href="#">College's Governance Manual</a> under Policy #1.2: Role of a Council Member. Further accountabilities are outlined in the College's <a href="#">Code of Conduct</a>.</li> <li>• The College's <a href="#">Council Elections</a> webpage highlights a variety of skills prospective Council members must possess.</li> <li>• Additional election suitability criteria can be found in the <a href="#">By-laws</a> (Part 3: Election or Appointment of Councillors) and as part of the candidate recruitment process on the <a href="#">College website</a>.</li> <li>• The College does not currently have a core competency framework in place prior to being eligible to run for Council election.</li> </ul> |            |   |   |  |           |  |  |   |    |
| <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>  | No         |   |   |  |           |  |  |   |    |
| <i>Additional comments for clarification (optional):</i><br><br>The College looks forward to reviewing and implementing any forthcoming changes developed by the Ministry regarding competency-based selection of Council members.   |            |   |   |  |           |  |  |   |    |

|  |   |  |                  |
|--|---|--|------------------|
|  | <p>ii. attending an orientation training about the College's mandate and expectations pertaining to the member's role and responsibilities.</p> | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Duration of orientation training.</li> <li>• Please briefly describe the format of orientation training (e.g. in-person, online, with facilitator, testing knowledge at the end).</li> <li>• Please insert a link to the website if training topics are public <b>OR</b> list orientation training topics.</li> </ul> <p><b>Orientation Prior to Election to Council</b></p> <p>Prospective candidates are required to complete a pre-election orientation module that outlines the mandate of the College and the roles and responsibilities of Council and Council members.</p> <p>The module must be completed by the nomination deadline to qualify for the Council election. This eligibility requirement was approved by Council during their last By-law and Governance review in June 2021. The module was developed by this College but has been shared with other Colleges to use if they choose.</p> <p>The purpose of the module is to ensure that prospective candidates are aware of and committed to the mandate of public protection and have the skills and knowledge to effectively govern within their scope as Council members. As we do not currently have competency criteria beyond the minimum requirements, this module provides candidates with opportunities to self-reflect on the expectations of the role to ensure they would be able to align with the College's mandate.</p> <p>The module is divided into four main sections:</p> <ul style="list-style-type: none"> <li>• <u>Eligibility requirements</u>: Outlines the eligibility criteria that must be met to qualify to run for the election.</li> <li>• <u>The Role of the College</u>: The focus is on public interest and protection, understanding what self-regulation is, the role and core functions of the College, explanation of governance and reinforcing public confidence in the profession through regulation and explanation of roles between Governance (Council and Committees) and Operations (Registrar and operational staff).</li> <li>• <u>Understanding Council</u>: Provides an overview of what fiduciary duties are, characteristics of an effective Council, explanation of the Council structure including the three types of Council members (elected, academic and public appointees), the roles, responsibilities and duties of Council members, and the time commitment required.</li> <li>• <u>Becoming a Council Member</u>: Outlines the election process and terms of office.</li> </ul> <p>This module will be evaluated and updated annually to ensure relevance of topics and information, and to make improvements that have been identified by new Council members and individuals who have completed the module.</p> <p><b>Orientation after Election/Appointment to Council</b></p> <p>The College has an orientation program to familiarize new Council members to the role after they have been elected or appointed. Orientation training outside of the module referred to above is post-election rather than before being eligible to stand for election.</p> | <p>Partially</p> |
|--|---|--|------------------|

Orientation of newly elected Council members takes place throughout the year. As a first step, new Council members meet with the President and Registrar to discuss the College's role, self-regulation, the Council's role and the fundamentals of good governance. This includes topics such as conflict of interest, bias, public interest, and ex parte conversations. This session is supported by a new Councillor Orientation E-learning Module.

Council members also participate in in-person and online training sessions focused on specialized topics and emerging trends. These topics vary depending on the risks and needs identified at that time. In 2021 Council members participated in the following training sessions:

- Sexual abuse awareness
- Unconscious bias
- Governance

To ensure completion of the online modules and an assessment of the learning that has occurred, members are required to complete an assessment to demonstrate knowledge. Completion of the modules and all training opportunities attended by Council and Committee members is tracked by staff. The e-learning modules available to Council and Committee members are listed below. This year, in-person training was paused due to COVID, and the priority shifted to holding all training sessions virtually.

The Orientation Program is set out in the [College's Governance Manual](#) under Policy #7.9: Council Education/Orientation. In-person training was paused due to COVID, and the priority shifted to virtual sessions.

Online orientation training modules include:

- [New Council Member Training](#)
- [Sexual Abuse Awareness Training](#)
- [Decision Writing Training](#) for members of the Discipline and Fitness to Practice Committees
- [Inquires Complaints and Reports Committee Training](#)
- [Quality Assurance Committee Training](#)
- [Registration Committee Training](#)
- [Patient Relations Committee Training](#)
- [Discipline Committee Chair Training](#)
- [Discipline Committee Training](#)

In addition, all members appointed to the Discipline Committee must complete a [Discipline Orientation Workshop](#) provided through the Health Profession Regulators of Ontario (HPRO).

The College offered the Health Profession Regulators of Ontario (HPRO) [Reasons Writing Workshop](#) as an optional educational training to members of the Discipline Committee.

The College hosted three, 3-hour lawyer-led education sessions for members of the Discipline Committee. Topics included pre-hearing conferences, Agreed Statement of Facts, Joint Submissions on Penalty, note taking, deliberations and contested hearings. Sessions were interactive, using polling

|   |   |   |   |           |
|---|---|---|---|-----------|
|   |   | <p>questions and breakout rooms to discuss case scenarios. These have all been recorded to ensure future access.</p>  |   |           |
|   |   | <table border="1"> <tr> <td data-bbox="792 207 2204 272"><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></td> <td data-bbox="2204 207 2634 272">Yes</td> </tr> </table>   | <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | Yes       |
| <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | Yes   |   |   |           |
|   |   | <p><i>Additional comments for clarification (optional):</i></p> <p>The College is also preparing an orientation learning module for the Finance Committee for implementation over the next reporting period. The module will cover committee member duties and responsibilities, the budget, financial reporting, financial management, and investment procedures, tips, and aids to help committee members understand the technicalities of finance, audit, and risk required for members of a finance, a udit and risk committee. The module will be modified for use by Council members to continuously update their financial knowledge.</p>  |   |           |
|   | <p>b. Statutory Committee candidates have:</p> <p>i. Met pre-defined competency and suitability criteria; and</p> | <table border="1"> <tr> <td data-bbox="792 511 2204 565"> <p>The College fulfills this requirement:</p> </td> <td data-bbox="2204 511 2634 565">Partially</td> </tr> </table> <ul style="list-style-type: none"> <li>• The competency and suitability criteria are public: Yes</li> <li>• <i>If yes, please insert a link to where they can be found, if not please list criteria.</i></li> </ul> <p>The roles and responsibilities of Committee Chairs and Committee members are laid out in the College’s <a href="#">Governance Manual</a> under Policies #1.3: Role of a Committee Chairperson and #1.4: Role of a Non-Council Committee Member, respectively.</p> <p>Most Committee appointments are made up of Council members. The appointment of Council members to Committees is based several factors including Committee composition requirements, term limits, Council succession planning, expressions of interest, and distribution of workload.</p> <p>For non-Council Committee members, the College has some suitability requirements in place, though the competency criteria do not outline essential qualifications beyond the minimum suitability requirements. Suitability criteria are generic and relate to behaviour, relationships and conduct rather than competence. Information about Non-Council Committee members eligibility for appointment is available in the College <a href="#">By-laws</a> (7.5: Appointment of Non-Council Committee Members). The College has some suitability requirements outlined in the By-laws; for example, not having any decision-making influence at a physiotherapy body or any other position with a conflict potential and not having been disqualified from Council or Committees in the past three years. However, there is currently a limited definition of competencies beyond these requirements.</p> <p>The College typically recruits Non-Council Committee members using recruitment advertisements on the College website and in our newsletter Perspectives. Similar to a staff recruitment, the recruitment of Non-Council members details any specified competencies within the notice. They are similar to job advertisements and include some competency provisions such as: understanding what is meant by public interest, the ability to make decisions in a collaborative forum, and possessing excellent listening, communication, and analytical skills.</p> <p>In this way, the competencies are more developed than for Council members (as outlined above). Staff screen the applications, conduct interviews and develop recommendations on committee composition based on the qualifications of candidates and the needs of the Committee. The recommendations are considered and may be amended by the Executive Committee, who bring forward a final recommendation to Council.</p> <p>Once appointed, the Chair of the Committee provides feedback about the Non-Council Committee member’s performance to the President. Staff do not</p> | <p>The College fulfills this requirement:</p>   | Partially |
| <p>The College fulfills this requirement:</p>   | Partially   |   |   |           |

|     |  |  |
|-----|--|--|
|     |  | provide feedback.  |
|     |  | <p><i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i></p> <p style="text-align: right;">No</p> <p><i>Additional comments for clarification (optional):</i></p> <p>The appointment procedure is outlined in Policy #7.5: Selection of Individuals to Committees, Task Forces, and Advisory Groups in the Governance Manual. Council has not identified this as an improvement priority during the next reporting cycle.</p>  |
| ii. | attended an orientation training about the mandate of the Committee and expectations pertaining to a member's role and responsibilities. | <p>The College fulfills this requirement:</p> <p style="text-align: right;">Yes</p> <ul style="list-style-type: none"> <li>• Duration of each Statutory Committee orientation training.</li> <li>• Please briefly describe the format of each orientation training (e.g. in-person, online, with facilitator, testing knowledge at the end).</li> <li>• Please insert a link to the website if training topics are public <b>OR</b> list orientation training topics for Statutory Committee.</li> </ul> <p>Orientation for newly appointed Committee members occurs as required and may involve a full-day session, as well as ongoing training throughout the year. Committee members participate in both in-person (when available) and online training sessions focusing on topics related to the Committee and emerging trends.</p> <p>The Orientation program is set out in the College's <a href="#">Governance Manual</a> under Policy #7.9: Council Education/Orientation. Orientation is provided at the first Committee meeting of the newly appointed Committee each year and is facilitated by the Chair, support staff and, where helpful, legal counsel and external speakers. As well, members are required to complete the appropriate Committee specific e-learning modules. Members are required to complete a test at the end of each module to confirm they have completed it and to test their understanding. The Inquiries, Complaints and Reports Committee, Patient Relations Committee, Quality Assurance Committee, and Registration Committee sessions may include presentations by legal counsel on issues relevant to the Committee, such as bias and decision making. The orientation program for the Discipline and Fitness to Practice Committees is conducted by the Independent Legal Counsel to the Committee and occurs throughout the year.</p> <p>The complete list of online training modules and respective topics outlined above, is under Measure 1.1a(ii). In addition:</p> <p><b>Quality Assurance Committee:</b></p> <ul style="list-style-type: none"> <li>• Asynchronous, self-directed eLearning module with Quiz and confirmation of completion <a href="#">Quality Assurance Committee Member - Getting Familiar With Your Role</a>; takes 1.5 hours to complete</li> <li>• March 9, 2021: 1:1 virtual orientation session with one public member for one hour</li> <li>• July 29, 2021: 45-minute question and answer period (Zoom) to answer questions about the eLearning module completed earlier (for three committee members)</li> <li>• August 5, 2021: 2-hour virtual orientation session around Committee decision making</li> </ul> <p><b>Registration Committee:</b></p> |

- Asynchronous, [self-directed e-learning module](#) with quiz and confirmation of completion.
- August 10, 2021: Registration Committee Orientation (1-hour) facilitated by legal counsel and included a presentation by the Canadian Alliance of Physiotherapy Regulators (CAPR) on credentialling
- December 17, 2021: 1-hour virtual question and answer period to follow up on eLearning module (Chair and legal counsel also present)

**Inquiries, Complaints and Reports Committee:**

- Asynchronous, [self-directed e-learning module](#) with quiz and confirmation of completion.
- March 26, 2021: 3-hour virtual orientation with a new ICRC Committee member
- July 16, 2021: 3-hour virtual annual orientation with ICRC Committee
- November 4, 2021: 3-hour virtual orientation with a new ICRC Committee member
- November 18, 2021: 1-hour training on Interim Orders
- December 3, 2021: 1 hour training on Decision Outcomes

**Patient Relations Committee:**

- Asynchronous, self-directed e-learning module with quiz and confirmation of completion.
- February 2, 2021: virtual orientation with the Committee
- August 20, 2021: virtual orientation with the Committee

**Discipline and Fitness to Practice Committees:**

- Asynchronous, self-directed committee orientation eLearning module with Quiz and confirmation of completion
- Asynchronous, self-directed committee decision writing eLearning module with Quiz and confirmation of completion
- Asynchronous, self-directed committee discipline chair eLearning module with Quiz and confirmation of completion
- April 9, 2021 & October 1, 2021: Health Profession Regulators of Ontario (HPRO) Discipline Committee Orientation Workshop
- April 28, 2021: 3-hour, remote lawyer led education session covering pre-hearing conferences
- May 31, 2021: Discipline Committee e-newsletter, key concept: assessing credibility
- August 18, 2021: 3-hour, remote lawyer led education sessions covering, Agreed Statements of Fact, Joint Submissions on Penalty, notetaking and deliberations
- November 23, 2021: Discipline Committee e-newsletter, key concept: contested hearings
- November 25, 2021: 3-hour, remote lawyer led education session covering contested hearings
- December 3, 2021: Health Profession Regulators of Ontario (HPRO) Reasons Writing workshop

**Committee Member Eligibility Module**

The College is currently in the process of creating a pre-appointment orientation module for prospective Committee members. This is a new eligibility requirement that was approved by Council during their last By-law and Governance review in June 2021. The module will outline the mandate of the College, the roles and responsibilities of Committees and Committee members and the Committee appointment process. It is anticipated that it will be released in Spring of 2022.

|  |  |   |  |                  |
|--|--|---|--|------------------|
|  |  |   | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | <p>Yes</p>       |
|  |  |   | <p><i>Additional comments for clarification (optional):</i></p> <p>A pre-appointment module for prospective Committee members is anticipated to be launched in 2022, ahead of the next Council year. Further information on the module will be shared in the College’s submission for the next reporting period.</p> <p>The College is also preparing an orientation e-module for the Finance Committee for implementation in 2022. The module will cover committee member duties and responsibilities, the budget, financial reporting, financial management, and investment procedures, tips, and aids to help committee members understand the technicalities of finance, audit, and risk required for members of a finance, audit, and risk committee.</p>   |                  |
|  |  | <p>c. Prior to attending their first meeting, public appointments to Council undertake an orientation training course provided by the College about the College’s mandate and expectations pertaining to the appointee’s role and responsibilities.</p> | <p>The College fulfills this requirement:</p>  | <p>Partially</p> |
|  |  |   | <ul style="list-style-type: none"> <li>• Duration of orientation training.</li> <li>• Please briefly describe the format of orientation training (e.g. in-person, online, with facilitator, testing knowledge at the end).</li> <li>• Please insert a link to the website if training topics are public <b>OR</b> list orientation training topics.</li> </ul> <p>The College generally holds orientation training for public appointments to Council. On occasion, there are exceptions when the appointment is made is too close to an upcoming Council meeting. In that case, orientation takes place after the new public appointee attends their first meeting.</p> <p><b>Duration of orientation training:</b> Public members typically participate in both in-person and online training sessions focused on identified topics and emerging trends. This training is the same as that provided to elected Council members and supplemented by additional profession-specific content.</p> <p><b>Format of each orientation training</b> (e.g. in-person, online, with facilitator, testing knowledge at the end): The Orientation program is set out in the <a href="#">College’s Governance Manual</a> under Policy #7.9: Council Education/Orientation. Orientation is provided in-person at the first Council meeting of each year led by the Registrar and President. Council members are also required to complete a series of e-learning modules on a variety of topics. In practice these sessions occur in advance of the first Council meeting. It is possible that new Council members will participate in Committee meetings prior to their first Council meeting.</p> |                  |
|  |  |   | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | <p>No</p>        |
|  |  |   | <p><i>Additional comments for clarification (optional):</i></p> <p>Appointments are made by the Public Appointment Secretariat and do not fall within the College’s jurisdiction. We understand that there is a new onboarding program being created to support public appointees however we have not seen the content to date. The College does not have the ability to contribute to defining the competency needs for appointment. In addition, public appointees do not consistently have the scheduling availability to commit to all of the College work. The College supports any governance reform that sees us increasing the number of public members that can be available to support the work of Committees and Council.</p>   |                  |
| <p><b>Measure</b><br/>1.2 Council regularly assesses its effectiveness and addresses identified opportunities for improvement through ongoing education.</p> |  |   |  |                  |

| Required Evidence  | College Response   |                  |
|--|--|------------------|
| <p>a. Council has developed and implemented a framework to regularly evaluate the effectiveness of:</p> <ul style="list-style-type: none"> <li>i. Council meetings; and</li> <li>ii. Council.</li> </ul> | <p>The College fulfills this requirement:</p>  | <p>Partially</p> |
|  | <ul style="list-style-type: none"> <li>• Please provide the year when Framework was developed <b>OR</b> last updated.</li> <li>• Please insert a link to Framework <b>OR</b> link to Council meeting materials where (updated) Framework is found and was approved.</li> <li>• Evaluation and assessment results are discussed at public Council meeting: No</li> <li>• <i>If yes, please insert a link to the last Council meeting where the most recent evaluation results have been presented and discussed.</i></li> </ul> <p>The College has an assessment framework to evaluate Council and Council meeting effectiveness. Assessment results are not made public in full, however the President will provide a high-level summary of the results of the Council meeting surveys in the President’s Report which is delivered verbally at a Council meeting. There is also an opportunity for Council to discuss the results.</p> <p>The measurement and reporting framework was developed in June 2002 and last updated in March 2015.</p> <p>The organizational measurement and reporting framework is laid out in the <a href="#">College’s Governance Manual</a> under Policy #8.1: Measurement and Reporting.</p>   |                  |
|  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | <p>No</p>        |
|  | <p><b>Council Meeting Evaluation:</b> Following each Council meeting, a meeting evaluation survey is sent to all Council members and the results are shared with the President and Registrar. This process is informal and generally deals with the different aspects of the meeting. The President reviews the information, and the results are reported to Council in an aggregate form as part of the President’s Report and/or provided to all Councilors ahead of the next meeting. The College plans to include high-level summaries of meeting evaluations in Council materials starting March 2022.</p> <p><b>Council Operations Evaluation:</b><br/>As part of the Council Performance Assessment, Council members are required to complete a yearly Council Operations evaluation. This is an electronic survey sent to each Council member that focuses on seven domains:</p> <ul style="list-style-type: none"> <li>• Council Activity</li> <li>• Mission and Mandate</li> <li>• Governance/Partnership Alignment</li> <li>• Organization</li> <li>• Meetings</li> <li>• Council Membership</li> <li>• Administration and Staff Support</li> </ul> <p>Council members are also provided with an opportunity to provide comments and feedback on the work and effectiveness of Council outside of these</p> |                  |

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|---|-----------|--|--|--|-----------|---|--|---|----|---|--|
|   |           |  | <p>domains.</p> <p>The results of this survey are reviewed by the President and Registrar and help inform changes and/or improvements to governance processes and overall planning for Council meetings, training, and education.</p> <p>As part of the ongoing internal governance improvements, the Operations Evaluation Survey are anticipated to undergo improvements to ensure questions remain relevant and reflect governance best practices, however it is uncertain when the changes will be implemented.</p> <p><b>Council Member Evaluation:</b> Individual Council member evaluations are conducted annually between April and June by the President. Both professional and public Council members are asked to provide feedback about two or three other members of Council. The feedback is compiled and shared with each of the Council members via the President. In addition, Council members complete an annual self-evaluation exercise. The results of these evaluations are not shared with the public. The President conducts annual performance reviews for each Council member. The reviews are not shared with anyone, including the President-Elect, and they are not filed at the College. Reported performance issues are not shared with the Registrar. Staff input is not considered in this review process.</p> <p><b>Council or Committee Member Conduct:</b> If Council or Committee members are the subject of Code of Conduct inquiries, the process is managed by the President. There is no staff involvement, and the President does not retain the services of external organizations. The results are not shared with the Registrar, and they are not filed at the College. The President maintains their own personal files and does not pass the files over to the President-elect or new President when they assume office.</p> <p>If any concerns are brought forward regarding a Committee member, Committee Chairs may share copies of emails, attendance records, or other resources with the President. At the Committee level, staff have the ability to raise concerns with the Committee Chair. There is no centralized file for each Council/Committee member where this information can be stored.</p> |  |           |   |  |   |    |   |  |
|   |           | <p>b. The framework includes a third-party assessment of Council effectiveness at a minimum every three years.</p> | <table border="1"> <tr> <td data-bbox="795 984 2206 1036">The College fulfills this requirement:</td> <td data-bbox="2206 984 2612 1036">No</td> </tr> <tr> <td colspan="2" data-bbox="795 1036 2612 1166"> <ul style="list-style-type: none"> <li>• A third party has been engaged by the College for evaluation of Council effectiveness: No</li> <li>• <i>If yes, how often over the last five years?</i></li> <li>• Year of last third-party evaluation.</li> </ul> </td> </tr> <tr> <td data-bbox="795 1166 2206 1218"><i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i></td> <td data-bbox="2206 1166 2612 1218">No</td> </tr> <tr> <td colspan="2" data-bbox="795 1218 2612 1356"> <p><i>Additional comments for clarification (optional)</i></p> <p>The College is in the process of planning for a third-party, independent review of Council effectiveness, however it is uncertain at this time when the review will be conducted.</p> </td> </tr> </table>   | The College fulfills this requirement: | No        | <ul style="list-style-type: none"> <li>• A third party has been engaged by the College for evaluation of Council effectiveness: No</li> <li>• <i>If yes, how often over the last five years?</i></li> <li>• Year of last third-party evaluation.</li> </ul> |  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i> | No | <p><i>Additional comments for clarification (optional)</i></p> <p>The College is in the process of planning for a third-party, independent review of Council effectiveness, however it is uncertain at this time when the review will be conducted.</p> |  |
| The College fulfills this requirement:  | No        |  |  |  |           |   |  |   |    |   |  |
| <ul style="list-style-type: none"> <li>• A third party has been engaged by the College for evaluation of Council effectiveness: No</li> <li>• <i>If yes, how often over the last five years?</i></li> <li>• Year of last third-party evaluation.</li> </ul> |           |  |  |  |           |   |  |   |    |   |  |
| <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | No        |  |  |  |           |   |  |   |    |   |  |
| <p><i>Additional comments for clarification (optional)</i></p> <p>The College is in the process of planning for a third-party, independent review of Council effectiveness, however it is uncertain at this time when the review will be conducted.</p>     |           |  |  |  |           |   |  |   |    |   |  |
|   |           | <p>c. Ongoing training provided to</p>   | <table border="1"> <tr> <td data-bbox="795 1365 2206 1409">The College fulfills this requirement:</td> <td data-bbox="2206 1365 2612 1409">Partially</td> </tr> </table>   | The College fulfills this requirement: | Partially |   |  |   |    |   |  |
| The College fulfills this requirement:  | Partially |  |  |  |           |   |  |   |    |   |  |

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|  | <p>Council and Committee members has been informed by:</p> <ul style="list-style-type: none"> <li>i. the outcome of relevant evaluation(s);</li> <li>ii. the needs identified by Council and Committee members; and/or</li> </ul> | <ul style="list-style-type: none"> <li>• Please insert a link to documents outlining how outcome evaluations have informed Council and Committee training.</li> <li>• Please insert a link to Council meeting materials where this information is found <b>OR</b></li> <li>• Please briefly describe how this has been done for the training provided <u>over the last year</u>.</li> </ul> <p>Council considers relevant needs when it comes to identifying opportunities for Council training. Not all topics for training come directly from Council members or from evaluation feedback. To date, the College has not published any materials around how evaluations or Council/Committee member needs have informed training for Council and Committees.</p> <p>Policy #7.9: Council Education of the College’s <a href="#">Governance Manual</a> outlines the procedures through which Council members receive relevant training and education on an ongoing basis. Training topics are identified based on a risk and needs analysis identified by both Council and staff. Training is repeated based on the turnover rate of new members and is meant to address issues faced by Council. Sexual abuse awareness training is required for all Council and Non-Council Committee members annually. Before completing the session, members must complete a related <a href="#">e-learning module</a>. This module has also been made available to other Colleges.</p> <p>Policy #7.9: Orientation Program of the College’s <a href="#">Governance Manual</a> highlights this annual requirement. This requirement is also outlined in Part 5.3(1) of the <a href="#">College By-laws</a>. Additional requirements for annual training include reviewing the College’s mandate, governance framework, and organizational culture.</p> <p>Council participated in externally facilitated governance training to build Council working culture and relationships following the election of the new Council members. Council members participated in two learning sessions in June and September of 2021. Session #1 covered general governance theory and a discussion with the Council members. Session #2 was structured so the Council members could discuss in detail through small groups and a plenary session highlighted issues raised in Session #1. A one-hour debrief session, led by the external facilitator, was conducted in November 2021. The debrief session was designed to allow Council members to discuss how they were making decisions and conducting the Council meeting.</p> <p>Finally, Council members were given the opportunity to attend relevant regulatory and stakeholder conferences. An internal process is in place whereby the Executive Committee reviews conference applications from members.</p> <p>At the Committee level, at the end of each Committee meeting, the Committee will have a round table discussion focused on the meeting itself, the ongoing tools and resources required to assist the Committee in carrying out their obligations. These discussions will sometimes feed into other activities that the College should take such as articles focused on patient safety, the need to explore changes to a standard or standard development, newsletter articles and case highlights, outreach opportunities, committee learning needs and learning opportunities for PTs to enhance patient care.</p> <p>As an example, in October 2021, the Quality Assurance Committee heard a 20-minute presentation from the Senior Physiotherapist Advisor on remediation options for the Quality Assurance Committee members. This session was in response to the Committee’s request for more information about the types of learning activities available to physiotherapists when the Committee is considering a SCERP.</p> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> |
|  |   | No   |

|  |           |   |  |  |           |  |  |   |    |   |  |
|--|-----------|---|--|--|-----------|--|--|---|----|---|--|
|  |           |   | <p><i>Additional comments for clarification (optional):</i></p> <p>It should be noted education and training for Council during the reporting year of 2021 was a departure from the prescribed process outlined in Governance Policy #7.9 Council Education/Orientation, whereby the Executive Committee is tasked with developing and approving an education plan for Council and Committees. This shift to an ad hoc process was to address the emerging issues related to COVID.</p> <p>It is anticipated that a more formalized education plan will resume in the 2022 reporting year. This will include capturing outcomes from the Council Performance Assessment Framework (member evaluations, meeting evaluations, Council Operations evaluations) as indicators for areas of training, emerging trends based on Governance best practices and input from staff.</p> <p>Additionally, College staff review governance processes in an ongoing way to ensure they are compliant with governance policies and best practices. Council evaluation and Council training are two areas identified for review, and changes to these processes may be introduced in the future. Opportunities for development and change will be reported to the Executive Committee for consideration. The College looks forward to reviewing the potential changes associated with governance reform to ensure consistency with other Colleges.</p>  |  |           |  |  |   |    |   |  |
|  |           | <p>iii. evolving public expectations including risk management and Diversity, Equity, and Inclusion.</p> <p><u>Further clarification:</u></p> <p>Colleges are encouraged to define public expectations based on input from the public, their members and stakeholders.</p> <p>Risk management is essential to effective oversight since internal and external risks may impact the ability of Council to fulfill its mandate.</p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td data-bbox="795 634 2206 688">The College fulfills this requirement:</td> <td data-bbox="2206 634 2612 688">Partially</td> </tr> <tr> <td colspan="2" data-bbox="795 688 2612 995"> <ul style="list-style-type: none"> <li>• Please insert a link to documents outlining how evolving public expectations have informed Council and Committee training.</li> <li>• Please insert a link to Council meeting materials where this information is found <b>OR</b></li> <li>• Please briefly describe how this has been done for the training provided <u>over the last year</u></li> </ul> <p>Council and Committee training sessions consider Equity, Diversity, and Inclusion, though the College has not yet had a training informed by risk management expectations. For example, Council members received an Unconscious Bias training session during their <a href="#">March 2021 meeting</a>. This training took place because annual training in this area was identified as a need for Council and Committee in order to support the work of the Registration, ICRC, and Discipline Committees, and in light of some challenging conversations that were taking place at the time.</p> </td> </tr> <tr> <td data-bbox="795 995 2206 1049"><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></td> <td data-bbox="2206 995 2612 1049">No</td> </tr> <tr> <td colspan="2" data-bbox="795 1049 2612 1360"> <p><i>Additional comments for clarification (optional):</i></p> <p>In December 2021, as part of the President’s Report, it was also noted that Councillors identified Equity, Diversity, and Inclusion as an area where they would like more training, in recognition of the increasing importance of EDI in the College’s work. The College hopes to explore these trainings in 2022, though potential training topics and vendors have not yet been identified.</p> <p>The College is in the process of developing an enterprise risk management (ERM) policy and framework that will guide the integration and consideration of risk into daily operations and policy development. The ERM will include risk registries at the department level that will be rolled up to the most important key organizational and strategic decisions for presentation to Council. Management will work with Council to provide general training on risk management to Council members in the next year.</p> </td> </tr> </table> | The College fulfills this requirement: | Partially | <ul style="list-style-type: none"> <li>• Please insert a link to documents outlining how evolving public expectations have informed Council and Committee training.</li> <li>• Please insert a link to Council meeting materials where this information is found <b>OR</b></li> <li>• Please briefly describe how this has been done for the training provided <u>over the last year</u></li> </ul> <p>Council and Committee training sessions consider Equity, Diversity, and Inclusion, though the College has not yet had a training informed by risk management expectations. For example, Council members received an Unconscious Bias training session during their <a href="#">March 2021 meeting</a>. This training took place because annual training in this area was identified as a need for Council and Committee in order to support the work of the Registration, ICRC, and Discipline Committees, and in light of some challenging conversations that were taking place at the time.</p> |  | <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | No | <p><i>Additional comments for clarification (optional):</i></p> <p>In December 2021, as part of the President’s Report, it was also noted that Councillors identified Equity, Diversity, and Inclusion as an area where they would like more training, in recognition of the increasing importance of EDI in the College’s work. The College hopes to explore these trainings in 2022, though potential training topics and vendors have not yet been identified.</p> <p>The College is in the process of developing an enterprise risk management (ERM) policy and framework that will guide the integration and consideration of risk into daily operations and policy development. The ERM will include risk registries at the department level that will be rolled up to the most important key organizational and strategic decisions for presentation to Council. Management will work with Council to provide general training on risk management to Council members in the next year.</p> |  |
| The College fulfills this requirement:   | Partially |   |  |  |           |  |  |   |    |   |  |
| <ul style="list-style-type: none"> <li>• Please insert a link to documents outlining how evolving public expectations have informed Council and Committee training.</li> <li>• Please insert a link to Council meeting materials where this information is found <b>OR</b></li> <li>• Please briefly describe how this has been done for the training provided <u>over the last year</u></li> </ul> <p>Council and Committee training sessions consider Equity, Diversity, and Inclusion, though the College has not yet had a training informed by risk management expectations. For example, Council members received an Unconscious Bias training session during their <a href="#">March 2021 meeting</a>. This training took place because annual training in this area was identified as a need for Council and Committee in order to support the work of the Registration, ICRC, and Discipline Committees, and in light of some challenging conversations that were taking place at the time.</p> |           |   |  |  |           |  |  |   |    |   |  |
| <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>  | No        |   |  |  |           |  |  |   |    |   |  |
| <p><i>Additional comments for clarification (optional):</i></p> <p>In December 2021, as part of the President’s Report, it was also noted that Councillors identified Equity, Diversity, and Inclusion as an area where they would like more training, in recognition of the increasing importance of EDI in the College’s work. The College hopes to explore these trainings in 2022, though potential training topics and vendors have not yet been identified.</p> <p>The College is in the process of developing an enterprise risk management (ERM) policy and framework that will guide the integration and consideration of risk into daily operations and policy development. The ERM will include risk registries at the department level that will be rolled up to the most important key organizational and strategic decisions for presentation to Council. Management will work with Council to provide general training on risk management to Council members in the next year.</p>        |           |   |  |  |           |  |  |   |    |   |  |

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| DOMAIN 1: GOVERNANCE   | STANDARD 2      | Measure  |  |           |
|  |                 | 2.1 All decisions related to a Council’s strategic objectives, regulatory processes, and activities are impartial, evidence-informed, and advance the public interest.   |  |           |
|  |                 | Required Evidence  | College Response   |           |
|  |                 | <p>a. The College Council has a Code of Conduct and ‘Conflict of Interest’ policy that is:</p> <p style="padding-left: 20px;">i. reviewed at least every three years to ensure it reflects current legislation, practices, public expectations, issues, and emerging initiatives (e.g. Diversity, Equity and Inclusion); and</p> <p><u>Further clarification:</u></p> <p>Colleges are best placed to determine the public expectations, issues and emerging initiatives based on input from their members, stakeholders and the public. While there will be similarities across Colleges such as Diversity, Equity and Inclusion, this is also an opportunity to reflect additional issues, expectations and emerging initiatives unique to a College or profession.</p> | <p>The College fulfills this requirement:</p>  | Partially |
|  |                 |  | <ul style="list-style-type: none"> <li>Please provide the year when Council Code of Conduct and ‘Conflict of Interest’ Policy was last evaluated/updated.</li> <li>Please briefly describe any changes made to the Council Code of Conduct and ‘Conflict of Interest Policy’ resulting from the review.</li> </ul> <p>The Executive Committee undertook a governance review in 2020 to evaluate and propose updates to the College’s governance framework, By-laws and policies, including the Code of Conduct and Conflict of Interest Policy. The review conducted by the Committee was presented at the <a href="#">November 27, 2020 Council meeting</a> and a revised set of governance policies was approved in principle. The changes were then circulated for <a href="#">consultation until May 17, 2021</a>. After considering this additional feedback, Council ultimately approved the proposed changes at their <a href="#">June 23, 2021 meeting</a>. No substantive revisions to the Code of Conduct or Conflict of Interest policies were proposed as part of this review.</p> |           |
|  |                 |  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | No        |
|  |                 |  | <p><i>Additional comments for clarification (optional)</i></p>   |           |
|  |                 |  | <p><i>Additional comments for clarification (optional)</i></p>   |           |
|  |                 | <p>ii. accessible to the public.</p>   | <p>The College fulfills this requirement:</p>  | Yes       |
|  |                 |  | <ul style="list-style-type: none"> <li>Please insert a link to the Council Code of Conduct and ‘Conflict of Interest’ Policy <b>OR</b> Council meeting materials where the policy is found and was discussed and approved.</li> </ul> <p>The Code of Conduct and Conflict of Interest policy are found in the <a href="#">College By-laws</a> (Part 5: Conduct of Councillors and Committee Members). The By-laws are accessible through the <a href="#">College website</a>.</p>  |           |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> | Choose an item. |  |  |           |
| <p><i>Additional comments for clarification (optional)</i></p>   |                 |  |  |           |
| <p><i>Additional comments for clarification (optional)</i></p>   |                 |  |  |           |

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|   | <p>b. The College enforces a minimum time before an individual can be elected to Council after holding a position that could create an actual or perceived conflict of interest with respect their Council duties (i.e. cooling off periods).</p> | <p>The College fulfills this requirement:</p> | <p>Yes met in 2020, continues to meet in 2021</p> |
| <ul style="list-style-type: none"> <li>• Cooling off period is enforced through: By-law</li> <li>• Please provide the year that the cooling off period policy was developed <b>OR</b> last evaluated/updated.</li> <li>• Please provide the length of the cooling off period.</li> <li>• How does the college define the cooling off period? <ul style="list-style-type: none"> <li>- Insert a link to policy / document specifying the cooling off period, including circumstances where it is enforced;</li> <li>- Insert a link to Council meeting where cooling off period has been discussed and decided upon; <b>OR</b></li> <li>- Where not publicly available, please describe briefly cooling off policy.</li> </ul> </li> </ul> <p>Eligibility criteria, including cooling off periods, for elected Council members are laid out under section 3.1 (9) of the <a href="#">College By-laws</a>. The By-laws were last updated in 2021. Term limits for Council and Committee members are laid out in By-laws and Governance policies.</p> <p><u>Cooling Off Period</u></p> <p>The cooling off period is outlined in the College By-laws. To be eligible to run for Council election, the registrant must not have been in the previous 12 months:</p> <ul style="list-style-type: none"> <li>• a director, officer, committee member, employee, or holder of any position of decision-making influence of any organization of physiotherapists that has as its primary mandate the promotion of the physiotherapy profession;</li> <li>• a responsible position with any organization or group whose mandate or interests conflict with the mandate of the College; or</li> <li>• an employee of the College (<a href="#">College By-laws s. 3.1(9)</a>)</li> </ul> <p>The cooling off period applies to elected professional members and appointed academic professional members.</p> <p><u>Term Limits</u></p> <p>A term on Council is set as three years, per section 3.1 (6) of the <a href="#">College By-laws</a>. Under the Health Professions Procedural Code (HPPC), a member may serve a maximum of nine years consecutively. After such time, the member is not eligible for re-election for at least one year. As part of the College's governance review in 2021, a nine-year consecutive term limit and one year waiting period for elected Council members was codified under section 3.1 (7) of the College By-laws. This is enforced through an internal process of tracking how long each member has served on Council. If they have reached their term limit, they cannot run in the next election or participate on a College statutory committee during the waiting period.</p> <p>The Public Appointments Secretariat has on one occasion appointed a public member to the College's Council beyond the nine-year consecutive term.</p> <p>Term limits for any Committee roles are outlined in the <a href="#">College's Governance Manual</a>. For example, officer roles are delineated in Policy #7.2: Succession Planning in the College's Governance Manual. The term limits and waiting period rules align with that of Council members. Non-Council committee</p> |   |   |   |

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|  |  | members can serve a maximum of nine consecutive term limit on any combination of committees, and then cannot be appointed until after a waiting period as per section 7.5(8) of the College By-laws.  |                 |
|  | <b>Further clarification:</b><br>Colleges may provide additional methods not listed here by which they meet the evidence.  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | Choose an item. |
|  |  | <i>Additional comments for clarification (optional)</i>   |                 |
|  | c. The College has a conflict of interest questionnaire that all Council members must complete annually.<br><b>Additionally:</b><br>i. the completed questionnaires are included as an appendix to each Council meeting package;<br>ii. questionnaires include definitions of conflict of interest;<br>iii. questionnaires include questions based on areas of risk for conflict of interest identified by Council that are specific to the profession and/or College; and<br>iv. at the beginning of each Council meeting, members must declare any updates to their responses and any conflict of interest <u>specific to the meeting agenda</u> . | The College fulfills this requirement:<br><br><ul style="list-style-type: none"> <li>Please provide the year when conflict of interest the questionnaire was implemented <b>OR</b> last evaluated/updated.</li> <li>Member(s) note whether their questionnaire requires amendments at each Council meeting and whether they have any conflicts of interest based on Council agenda items: No</li> <li>Please insert a link to the most recent Council meeting materials that includes the questionnaire. <b>Not Applicable</b></li> </ul> <p>While the College does not have a Conflict of Interest questionnaire, Council members do sign a Councilor's <a href="#">Declaration of Office</a> at the beginning of their Council term, which references the Code of Conduct and conflict of interest provisions.</p> <p>The College also mandates that each meeting is predicated by an opportunity for all attendees to declare any anticipated conflicts. The conflict of interest policies are outlined in Part 5: Conduct of Council and Committee Members in the <a href="#">College By-laws</a>. The process is described in 5.1 (6). When presented with a conflict, the Council or Committee member shall declare the conflict at the time of identification, not participate in discussion, consideration, or voting on the matter, withdraw from the meeting when the matter is being discussed, and not attempt to influence other voters.</p> <p>To further assist Council with determining potential conflict of interest, legal counsel attended multiple meetings to provide additional guidance for Council members based on specific agenda items.</p> | Partially       |
|  |  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | No              |
|  |  | <i>Additional comments for clarification (optional)</i><br>No further discussions about changes to the College's current conflict of interest processes have taken place.   |                 |
|  | d. Meeting materials for Council   | The College fulfills this requirement:  | Partially       |

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|  |  | <p>enable the public to clearly identify the public interest rationale and the evidence supporting a decision related to the College’s strategic direction or regulatory processes and actions (e.g. the minutes include a link to a publicly available briefing note).</p>  | <ul style="list-style-type: none"> <li>• Please briefly describe how the College makes public interest rationale for Council decisions accessible for the public.</li> <li>• Please insert a link to Council meeting materials that include an example of how the College references a public interest rationale.</li> </ul> <p>College Council materials currently enable the public to identify the public interest rationale in two areas: (1) <a href="#">the commitment to the public interest declaration stated before the Meeting Agenda</a>; and (2) <a href="#">the “Public Interest in this Decision” section of select College briefing notes</a>. The public interest rationale is understood in relation to the Ministry of Health’s matrix of public interest considerations: Accessibility, Accountability, Equality, Equity, Protection of the Public, and Quality of Care. However, not all briefing notes currently contain the public interest clause. For issues with the most direct impact on the public interest, the briefing materials would typically highlight the relevant public interest considerations. For other issues with a less direct impact (for example, College operations), the briefing materials do not typically include a section that speaks to the public interest.</p> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> Yes</p> <p><i>Additional comments for clarification (if needed)</i></p> <p>College staff review governance processes in an ongoing way to ensure they are compliant with governance policies and best practices. The clear articulation of the public interest in Council materials has been identified as an item for review, and changes may be introduced in the future.</p> |
|  |  | <p>e. The College has and regularly reviews a formal approach to identify, assess and manage internal and external risks. This approach is integrated into the College’s strategic planning and operations.</p> <p><u>Further clarification:</u><br/>Formal approach refers to the documented method or which a College undertakes to identify, assess and manage risk. This method or process should be regularly reviewed and appropriate.</p> <p>Risk management planning activities should be tied to strategic objectives</p> | <p>The College fulfills this requirement:</p> <p>No</p> <ul style="list-style-type: none"> <li>• Please provide the year the formal approach was last reviewed.</li> <li>• Please insert a link to the internal and external risks identified by the College <b>OR</b> Council meeting materials where the risks were discussed and integrated into the College’s strategic planning activities.</li> </ul> <p>The College does not currently have a formal approach to risk management.</p> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> No</p>   |

|   |   |  |   |            |                  |
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|   |   | <p>of Council since internal and external risks may impact the ability of Council to fulfill its mandate, especially in the absence of mitigations.</p> <p>Internal risks are related to operations of the College and may impact its ability to meet its strategic objectives. External risks are economic, political and/or natural factors that happen outside of the organization.</p> | <p><i>Additional comments for clarification (optional):</i></p> <p>The College is in the process of developing a risk management policy for approval by Council and an Enterprise Risk Management (ERM) program. An ERM approach will take into consideration the risks related to regulation and the public interest in addition to strategic, operational, reputational, and financial risks. The ERM program will include the development of risk registers for departments that are rolled up to a College risk registry for presentation to Council. The risk registries will consider internal and external risks that impact the ability of the College to fulfill its mandate and impact the ability of management to conduct operations. Risk dashboards will be shared within management and presented to Council during regular reporting. Further, the College is planning to conduct a cybersecurity audit and will present the findings to Council.</p> |            |                  |
| <p style="writing-mode: vertical-rl; transform: rotate(180deg);">DOMAIN 1: GOVERNANCE</p>   | <p style="writing-mode: vertical-rl; transform: rotate(180deg);">STANDARD 3</p> | <p><b>Measure</b></p>  |   |            |                  |
|   |   | <p><b>3.1 Council decisions are transparent.</b></p>   |   |            |                  |
|   |   | <p><b>Required Evidence</b></p>  | <p><b>College Response</b></p>  |            |                  |
|   |   | <p>a. Council minutes (once approved) and status updates on the implementation of Council decisions to date are accessible on the College’s website, or a process for requesting materials is clearly outlined.</p>  | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please insert a link to the webpage where Council minutes are posted.</li> <li>• Please insert a link to where the status updates on implementation of Council decisions to date are posted <b>OR</b> where the process for requesting these materials is posted.</li> </ul> <p>The College posts meeting minutes and materials on the website. However, the College does not provide status updates on how Council decisions are implemented. Council minutes are available on the <a href="#">College’s website</a> and updated after each meeting when approved. Shortly after each meeting, the College also posts <a href="#">highlights</a> of what was discussed at that meeting.</p>   |            | <p>Partially</p> |
|   |   | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   |   | <p>Yes</p> |                  |
| <p><i>Additional comments for clarification (optional)</i></p> <p>College staff review governance processes in an ongoing way to ensure they are compliant with governance policies and best practices. The method for reporting on status updates on the implementation of Council decisions has been identified as an item for review, and changes may be introduced in the future.</p> |   |  |   |            |                  |
| <p>b. The following information about</p>   | <p>The College fulfills this requirement:</p>                                   |  | <p>Yes</p>  |            |                  |

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|  |  | <p>Executive Committee meetings is clearly posted on the College’s website (alternatively the College can post the approved minutes if it includes the following information).</p> <ul style="list-style-type: none"> <li>i. the meeting date;</li> <li>ii. the rationale for the meeting;</li> <li>iii. a report on discussions and decisions when Executive Committee acts as Council or discusses/deliberates on matters or materials that will be brought forward to or affect Council; and</li> <li>iv. if decisions will be ratified by Council.</li> </ul> | <ul style="list-style-type: none"> <li>• Please insert a link to the webpage where Executive Committee minutes / meeting information are posted.</li> </ul> <p>The College began publishing Executive Committee minutes to the <a href="#">College website</a> in 2021 once they have been approved. The first Executive Committee meeting minutes were added to the website on <a href="#">September 16, 2021</a>. The minutes include the meeting date, agenda, and brief information on the discussion and decisions that took place with respect to each agenda item.</p> <p>The Executive Committee meets on a quarterly basis based on the requirements from the Terms of Reference, found in Policy #2.3: Executive Committee of the <a href="#">College’s Governance Manual</a>. The rationale for any additional meetings outside of the requirements are also listed in the minutes. In certain situations, the Committee met to make decisions on behalf of Council between Council meetings to consider an issue that the Committee believed to be urgent in nature.</p> <p>The Executive Committee considers matters that will be brought forward to Council and when a matter is approved by the Executive Committee and an item is recommended to Council, it is noted in the Executive Minutes. The Committee may also decide not to forward an item to Council. Executive decisions are ratified by Council when the Committee acts as Council for the duration of their meeting. For example, during the COVID pandemic the Committee held multiple meetings in response to the crisis. The Executive Committee elected to meet in place of Council. These minutes were provided as part of the <a href="#">September 2020 Council meeting materials</a>.</p> |
|  |  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>  | <p>Choose an item.</p>  |
|  |  | <p><i>Additional comments for clarification (optional)</i></p>  |   |
| <p><b>Measure</b><br/><b>3.2 Information provided by the College is accessible and timely.</b></p> |  |   |   |
|  |  | <p><b>Required Evidence</b></p>   | <p><b>College Response</b></p>  |
|  |  | <p>a. With respect to Council meetings:</p> <ul style="list-style-type: none"> <li>i. Notice of Council meeting and relevant materials are posted at least one week in advance; and</li> <li>ii. Council meeting materials remain accessible on the College’s website for a minimum of 3 years, or a process for requesting materials is clearly outlined.</li> </ul>   | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please insert a link to where past Council meeting materials can be accessed <b>OR</b> where the process for requesting these materials is clearly posted.</li> </ul> <p>The College provides notice of meetings on the College website at least one week in advance when possible. When Council meetings fall outside of the published schedule (such as emergency meetings), the College does its best to notify the public, registrants, and stakeholders in advance of the meeting times. The notices are published on our website and shared through our social media channels. In 2021, the Council determined there was a need to hold emergency meetings due the ongoing unavailability of the national clinical physiotherapy exam and the need to resolve registration issues associated with this issue.</p> <p>This requirement is listed in By-law 4.4(4) (Notice of Meetings) in the <a href="#">College By-laws</a>. It states that “the College shall post the date of every Council meeting on its website at least 7 days before the meeting as well as the meeting materials.”</p> <p>Meeting materials for Council are published at least one week in advance on the College website.</p>  |

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|  |  | Council meeting materials are accessible on the website for a minimum of three years, and archived materials are available upon request.   |                 |
|  |  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>  | No              |
|  |  | <i>Additional comments for clarification (optional)</i>  |                 |
|  | b. Notice of Discipline Hearings are posted at least one month in advance and include a link to allegations posted on the public register.   | The College fulfills this requirement:   | Yes             |
|  |  | The College provides Discipline hearing notices and relevant materials on the <a href="#">College website</a> as soon as the matter is referred to the Discipline Committee for a hearing.   |                 |
|  |  | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>  | Choose an item. |
|  |  | <i>Additional comments for clarification (optional)</i>  |                 |
|  | <b>Measure</b>   |  |                 |
|  | <b>3.3 The College has a Diversity, Equity, and Inclusion (DEI) Plan.</b>  |  |                 |
|  | <b>Required Evidence</b>   | <b>College Response</b>  |                 |
|  | a. The DEI plan is reflected in the Council's strategic planning activities and appropriately resourced within the organization to support relevant operational initiatives (e.g. DEI training for staff). | The College fulfills this requirement:   | Partially       |
|  |  | <ul style="list-style-type: none"> <li>Please insert a link to the College's DEI plan.</li> <li>Please insert a link to the Council meeting minutes where DEI was discussed as part of strategic planning and appropriate resources were approved.</li> </ul> <p>Although the College does not yet have a formalized EDI Plan in place, the College did undertake several activities related to Equity, Diversity and Inclusion in 2021.</p> <p><b>Land Acknowledgement Statement</b></p> <p>At the February 16, 2021, Council meeting, Council approved the development of an Indigenous land acknowledgement that would be read at the beginning of each Council meeting, and posted to the College website.</p> <p>Staff conducted an environmental scan and worked with a consultant to consider possible content for a Land Acknowledgement Statement that the College could use.</p> <p>In October 2021, Council considered the different approaches to a Land Acknowledgement Statement and approved one for use by the College. The approved statement is read at the beginning of each Council meeting, starting with the <a href="#">December 2021 meeting</a>.</p> <p><b>Equity, Diversity, and Inclusion Position Statement</b></p> <p>At the February 16, 2021, Council meeting, Council discussed and approved the development of a position statement on Equity, Diversity, and Inclusion</p> |                 |

(EDI). In October 2021, staff presented a draft position statement to Council for their consideration and approval. Council adopted the proposed position statement, which is [posted on the College's website](#), along with a list of resources to support various issues related to equity, diversity and inclusion.

**Equity, Diversity, and Inclusion Initiatives**

In 2021, the College undertook a number of initiatives related to EDI, including:

- Completion of a staff survey on EDI
- Staff education with a guest speaker on Truth & Reconciliation
- Attended Health Profession Regulators of Ontario (HPRO) Town Hall Meeting about Anti-BIPOC Racism Project - Findings and Recommendations from Dr. Sukhera
- Dedicated webpage with resources: allyship, implicit bias, LGBTQ2S, microaggression, racism
- Shared EDI information with registrants through monthly e-newsletter.
- Introduced gender neutral language in public communication and created an e-learning module to support gender neutral writing in committee decisions and public facing documents
- Conducted research into needs of registrants educated outside of Canada

The College formed an EDI Working Group in 2021 comprised of staff members to continue to identify potential initiatives to advance the EDI agenda at the College. This working group will develop a Terms of Reference which will guide the EDI work of the College. The role of the EDI Working Group is to identify EDI issues for the entire College (i.e. management/operations and policy). The College will consider conducting research about the current perceptions and expectations of the public, College registrants, and other stakeholders about the integration of EDI into the College's policies, rules, and standards.

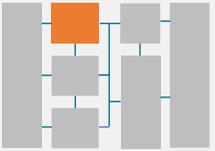
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| <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i> | No |
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*Additional comments for clarification (optional)*

The College is currently in the process of establishing a new strategic plan. In the discussions to date, it appears that equity, diversity and inclusion remains an important area of focus for Councillors and staff. It is anticipated that EDI will be a theme reflected in the new strategic plan, which is expected to be approved in the first half of 2022. However, it is uncertain at this time what specific EDI initiatives will be pursued in 2022.

The College will introduce the optional collection of pronouns and race-related data during the annual renewal process in 2022 (starts in February). The College hopes to use the race-related data to assess any unintentional barriers in our processes or highlight where the College can dedicate more programs and resources.

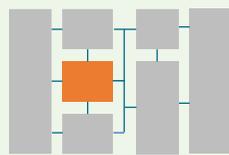
|                                |    |
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| b. The College conducts Equity | No |
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|   |                          | <p>Impact Assessments to ensure that decisions are fair and that a policy, or program, or process is not discriminatory.</p> <p><u>Further clarification:</u></p> <p>Colleges are best placed to determine how best to report on an Evidence. There are several Equity Impact Assessments from which a College may draw upon. The ministry encourages Colleges to use the tool best suited to its situation based on the profession, stakeholders and patients it serves.</p>        | <ul style="list-style-type: none"> <li>• Please insert a link to the Equity Impact Assessments conducted by the College <b>OR</b> please briefly describe how the College conducts Equity Impact Assessments.</li> <li>• If the Equity Impact Assessments are not publicly accessible, please provide examples of the circumstances (e.g., applied to a policy, program or process) in which Equity Impact Assessments were conducted.</li> </ul>  |
|   |                          | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | <p>No</p>  |
|   |                          | <p><i>Additional comments for clarification (optional)</i></p> <p>Though no discussions around developing an Equity Impact Assessment have yet taken place, the College would welcome the opportunity to collaborate with system partners to develop a harmonized Equity Impact Assessment framework across regulatory health Colleges.</p>  |  |
| <div style="display: flex; align-items: center;">  <div> <p><b>Measure</b></p> <p><b>4.1 The College demonstrates responsible stewardship of its financial and human resources in achieving its statutory objectives and regulatory mandate.</b></p> </div> </div> |                          |  |  |
| <p><b>DOMAIN 2: RESOURCES</b></p>   | <p><b>STANDARD 4</b></p> | <p><b>Required Evidence</b></p> <p>a. The College identifies activities and/or projects that support its strategic plan including how resources have been allocated.</p> <p><u>Further clarification:</u></p> <p>A College’s strategic plan and budget should be designed to complement and support each other. To that end, budget allocation should depend on the activities or programs a College undertakes or identifies to achieve its goals. To do this, a College should</p> | <p><b>College Response</b></p> <p>The College fulfills this requirement:</p> <p>Partially</p> <ul style="list-style-type: none"> <li>• Please insert a link to Council meeting materials that include discussions about activities or projects to support the strategic plan <b>AND</b> a link to most recent approved budget.</li> <li>• Please briefly describe how resources were allocated to activities/projects in support of the strategic plan.</li> </ul> <p>The College does have a strategic plan and strategic initiatives, and the budgeting process does typically allocate resources for strategic initiatives. The College is currently in the process of renewing its strategic plan for 2022 and activities to support the new strategic plan were first discussed during the <a href="#">February 2021 Council meeting</a>. The College’s Entry to Practice program <a href="#">was also identified as a strategic priority</a>. In <a href="#">December 2021</a>, Council held an initial strategic planning session to further discuss the strategic focus for the College in the next few years to better fulfill the College’s mandate.</p> <p>The College’s fiscal year is from April 1 to March 31. In a typical year, the College budget is approved at the March Council meeting. The most recent approved budget took place during the <a href="#">March 2021 Council meeting</a>.</p> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p>Yes</p> |

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|         |  | <p>have estimated the costs of each activity or program and the budget should be allocated accordingly.</p>  | <p><i>Additional comments for clarification (optional)</i></p> <p>The College takes strategic priorities into consideration when developing the annual operating budget. The College budget is created on a zero-based budget approach; each program develops an operational plan for their department that will align the strategic plan priorities and activities. Program areas include statutory (e.g. Professional Conduct, Quality Assurance, Registration, Discipline) and non-statutory (e.g. Human resources, financial, governance) programs.</p> <p>The College is currently undertaking a strategic planning process. A new strategic plan is expected to be approved in the first half of 2022. Following the approval of the new strategic plan, the budget in subsequent years will incorporate strategic planning and priorities.</p>   |   |
|         |  | <p>b. The College:</p> <p>i. has a “financial reserve policy” that sets out the level of reserves the College needs to build and maintain in order to meet its legislative requirements in case there are unexpected expenses and/or a reduction in revenue and</p> <p>ii. possesses the level of reserve set out in its “financial reserve policy”.</p> | <p>The College fulfills this requirement:</p>   | <p>Yes met in 2020, continues to meet in 2021</p> |
| <p></p> |  |  | <ul style="list-style-type: none"> <li>• Please insert a link to the “financial reserve policy” <b>OR</b> Council meeting materials where financial reserve policy has been discussed and approved.</li> <li>• Please insert the most recent date when the “financial reserve policy” has been developed <b>OR</b> reviewed/updated.</li> <li>• Has the financial reserve policy been validated by a financial auditor? Yes</li> </ul> <p>The College has a financial reserve policy that sets out the permitted uses for general operational reserves to ensure the stability and continuity of program areas. The policy is subject to annual review by the auditors. The “general operating reserves” refer to unrestricted net assets that do not require Council approval to access. The College has restricted net assets for complaints and discipline, and sexual abuse therapy costs. These restricted net assets can only be accessed with Council approval.</p> <p>The Finance Committee presented a review of the financial reserve policy during the <a href="#">December 2017 Council Meeting</a>, and the review was approved in <a href="#">June 2019</a>. The amended Reserve Policy is found on page 96 of these public materials. The revised policy includes recommendations from the Auditor to maintain an undesignated reserve within the range of 25-50% of operating costs.</p> <p>The financial reserve policy was reviewed by an external financial auditor, and the Finance Committee reviewed the financial reserve policy in November 2021 following the external Auditor’s comments.</p> |   |
|         |  |  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>  | <p>Choose an item.</p>                            |
|         |  |  | <p><i>Additional comments for clarification (if needed)</i></p>   |   |
|         |  | <p>c. Council is accountable for the</p>   | <p>The College fulfills this requirement:</p>   | <p>Partially</p>                                  |

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|   |           | <p>success and sustainability of the organization it governs. This includes:</p> <p>i. regularly reviewing and updating written operational policies to ensure that the organization has the staffing complement it needs to be successful now and, in the future (e.g. processes and procedures for succession planning for Senior Leadership and ensuring an organizational culture that attracts and retains key talent, through elements such as training and engagement).</p> | <ul style="list-style-type: none"> <li>• Please insert a link to the College’s written operational policies which address staffing complement to address current and future needs.</li> <li>• Please insert a link to Council meeting materials where the operational policy was last reviewed.</li> </ul> <p><b>Note:</b> Colleges are encouraged to add examples of written operational policies that they identify as enabling a sustainable human resource complement to ensure organizational success.</p> <p>The College does not have a formal Human Resources Plan. The College’s HR needs are assessed each year during the budgeting process when each department is consulted to determine their HR needs for the next fiscal year. Departmental HR needs are based on the department’s assessment of ongoing regulatory work and special projects for the next year. In the past, the College used dashboards to provide a formalized update, which included human resources metrics. Dashboards were provided quarterly and were last included during the <a href="#">December 2019 Council meeting</a></p> <p>Financial support is provided to each employee to engage in professional development. Professional development needs are discussed between the employee and their supervisor at the employee’s annual evaluation.</p> <p>The College’s worked on a new performance assessment program that will formally integrate learning and development goals as part of the employees’ annual performance review. The new performance assessment program will include lists of competencies, including a set for non-managers and an additional set for managers/supervisors. The new program will include more detailed guidance to development, monitor, and assess employee goals.</p> <table border="1" data-bbox="795 833 2623 886"> <tr> <td data-bbox="795 833 2244 886"><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></td> <td data-bbox="2244 833 2623 886">No</td> </tr> </table> <p style="text-align: center;">):</p> | <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | No        |
| <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | No        |  |  |   |           |
|   |           | <p>ii. regularly reviewing and updating the College’s data and technology plan to reflect how it adapts its use of technology to improve College processes in order to meet its mandate (e.g., digitization of processes such as registration, updated cyber security technology, searchable databases).</p>   | <table border="1" data-bbox="795 951 2623 1011"> <tr> <td data-bbox="795 951 2244 1011">The College fulfills this requirement:</td> <td data-bbox="2244 951 2623 1011">Partially</td> </tr> </table> <ul style="list-style-type: none"> <li>• Please insert a link to the College’s data and technology plan which speaks to improving College processes <b>OR</b> please briefly describe the plan.</li> </ul> <p>As part of the College’s strategic plan for 2017-2021, Council identified as one of its priorities the need to update the College’s technology to better support the College’s business processes and to improve the customer service experience for our stakeholders. Since that time, the College has engaged in a large-scale project to renew its database technology. Components of a new database began rolling out in early 2018. To date, the new database has allowed the College to streamline and automate many activities in the Registration and Quality Assurance program areas, leading to improved efficiency, and have introduced many self-serve capabilities for registrants and complainants. This work is ongoing as the College continues to build new functionality in the database, with the goal to support all areas of the College’s activity. This is expected to be a multi-year process.</p> <p>Council continues to receive updates on any major changes to the College’s technology as part of the regular operational updates from the Registrar.</p> <p>Also part of the College’s strategic plan for 2017-2021 were initiatives to review and update the College’s data practices to ensure that the correct data</p>  | The College fulfills this requirement:  | Partially |
| The College fulfills this requirement:  | Partially |  |  |   |           |

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|  |  |  | <p>is collected to support the College’s work, and that there are practices and processes that ensure data integrity and allow the College to derive meaningful business intelligence from the data collected. These initiatives were deferred due to resource constraints, with the intention to resume when resources allow.</p>  |
|  |  |  | <p>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period? No</p>  |
|  |  |  | <p><i>Additional comments for clarification (optional)</i></p> <p>This work on the College’s database is ongoing as the College continues to build new functionality in the database, with the goal to support all areas of the College’s activity. This is expected to be a multi-year process. The College has not developed the professional conduct area, hearings or compliance monitoring areas of the database to date. The database is not searchable at this time and decisions of the various committees are not captured. Work is underway to address these shortcomings.</p> <p>The College is currently undertaking a strategic planning process. The discussions to date noted the importance of data to inform the College’s work. It is anticipated that the use of data will be a theme in the new strategic plan, which is expected to be approved in the first half of 2022. However, it is uncertain at this time what specific initiatives related to data management the College will pursue in 2022.</p> |

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| <p><b>DOMAIN 3: SYSTEM PARTNER</b></p>  |  |
| <p><b>STANDARD 5 and STANDARD 6</b></p> |   |

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| <p>Measure / Required evidence: N/A</p> | <p><b>College response</b></p> <p><i>Colleges are requested to provide a narrative that highlights their organization’s best practices for the following two standards. An exhaustive list of interactions with every system partner that the College engaged with is not required.</i></p> <p><i>Colleges may wish to provide information that includes their key activities and outcomes for each best practice discussed with the ministry, or examples of system partnership that, while not specifically discussed, a College may wish to highlight as a result of dialogue.</i></p> |
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| <p>The two standards under this domain are not assessed based on measures and evidence like other domains, as there is no ‘best practice’ regarding the execution of these two standards.</p> <p>Instead, <u>Colleges will report on key activities, outcomes, and next steps that have emerged through a</u></p> | <p><b>Standard 5: The College actively engages with other health regulatory colleges and system partners to align oversight of the practice of the profession and support execution of its mandate.</b></p> <p>Recognizing that a College determines entry to practice for the profession it governs, and that it sets ongoing standards of practice for the profession it regulates and that the profession has multiple layers of oversight (e.g. by employers, different legislation, etc.), Standard 5 captures how the College works with other health regulatory colleges and other system partners to support and strengthen alignment of practice expectations, discipline processes, and quality improvement across all parts of the health system where the profession practices. In particular, a College is asked to report on:</p> |
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dialogue with the Ministry of Health.

Beyond discussing what Colleges have done, the dialogue might also identify other potential areas for alignment with other Colleges and system partners.

- *How has it engaged other health regulatory Colleges and other system partners to strengthen the execution of its oversight mandate and aligned practice expectations? Please provide details of initiatives undertaken, how engagement has shaped the outcome of the policy/program and identify the specific changes implemented at the College (e.g., joint standards of practice, common expectations in workplace settings, communications, policies, guidance, website, etc.).*

The College works with its system partners to ensure that physiotherapy is regulated with oversight and accountability, and to ensure the practice is governed with quality, safety, and ongoing improvement in mind. This section will expand on the College's response from 2020 and will identify any new partnerships or new initiatives undertaken by existing regulatory partners with the goal of strengthening practice expectations for Ontario physiotherapists.

In looking for a resolution to the ongoing unavailability of the Physiotherapy Clinical Exam, the College collaborated with the physiotherapy academic community. The College considered the recommendation of the Ontario University Physiotherapy Programs to explore whether the Assessment of Clinical Performance (ACP) used by clinical supervisors could be used to assess entry to practice competency of applicants. The Council considered this option in [October 2021](#). The College also worked with the University of Sherbrooke in Quebec to explore the use of the Final Comprehensive Exam used for their physiotherapy program graduates to assess entry to practice competency for Ontario applicants. The Council approved the use of the University of Sherbrooke exam in [December 2021](#).

The College has also engaged in ongoing discussions with the Ontario Physiotherapy Association, the Office of the Fairness Commissioner and the Ministry of Health to obtain input from them on the impact that the restricted ability of the College to register applicants is having on access to the profession.

The College engaged the **Health Profession Regulators of Ontario (HPRO)** in 2021. Collaboration activities through HPRO include:

- The College suggested the formation of an HPRO working group to consider a consistent approach for health regulators to share information. This group has developed a set of recommendations relating to common expectations for information sharing that are in the process of being considered for adoption by HPRO members.
- HPRO Communications group held an online Communicator's Day conference to share information across the 26 Colleges on topics such as Equity, Diversity, and Inclusion, dealing with social media and other regulatory communications challenges. This group ran a joint online marketing campaign to highlight the existence and role of Colleges and drive patient and caregivers to the websites of regulators. The group shared resources to be used by all colleges to promote a consistent message and maximize resources and impact. This included social media posts and online articles and polls.
- In 2020, HPRO created a new networking group focused on the CPMF, with the goal to share information among all Colleges and to identify opportunities to undertake initiatives and activities highlighted in the CPMF in a coordinated and collaborative way. The discussions of this group are ongoing and proposed initiatives are typically brought to the Registrars for consideration.

Other collaboration activities with system partners in 2021 include:

- Compliance Monitoring: In the fall 2021, the CPO led the initiation of a cross-College working group to identify opportunities to discuss regulatory issues, resources and education plans. Beginning in February 2022 the College will host a series of workshops to share information in registrant competency gaps and education solutions directed by Committees. Guest speakers will be invited.
- Practice Advice Service Survey: In September 2021 the College conducted a survey with 45 health and non-health regulatory bodies across Canada and the US, to identify what services are offered to stakeholders by advice teams. There was an 80% response rate and confirmed consistent services are provided across organizations, but no new opportunities were identified. A summary report was shared with all participants.
- The College coordinated a joint webinar titled “All Things Privacy with Kate Dewhirst: Information for Regulated Health Professionals” and hired privacy lawyer Kate Dewhirst. The College invited the Colleges of Kinesiologists, Registered Massage Therapists, Occupational Therapists, Dietitians and Traditional Chinese Medicine Practitioners and Acupuncturists to participate in a joint education session for health professional in Ontario.
- The College shared its new election e-learning module along with all of its other modules with other colleges to use as a foundation for their own work. College staff ran a short training session for other colleges and transferred files so that others could adapt and use as they chose.

**Standard 6: The College maintains cooperative and collaborative relationships and responds in a timely and effective manner to changing public/societal expectations**

The intent of Standard 6 is to demonstrate that a College has formed the necessary relationships with system partners to ensure that it receives and contributes information about relevant changes to public expectations. This could include both relationships where the College is asked to provide information by system partners, or where the College proactively seeks information in a timely manner.

- *Please provide examples of key successes and achievements from the reporting year where the College engaged with partners, including patients/public to ensure it can respond to changing public/societal expectations (e.g., COVID-19 Pandemic). Please also describe the matters that were discussed with each of these partners and how the information that the College obtained/provided was used to ensure the College could respond to a public/societal expectation.*
- *In addition to the partners it regularly interacts with, the College is asked to include information about how it identifies relevant system partners, maintains relationships so that the College is able to access relevant information from partners in a timely manner, and leverages the information obtained to respond (specific examples of when and how a College responded is requested in Standard 7).*

The College responds to changing public and societal needs through ongoing and targeted stakeholder engagement.

The College is a member of the Citizen Advisory Group (CAG), a panel of patients and caregivers focused on bringing patient perspectives to health regulation. The objective of the CAG is to support public participation and consultation in the regulatory work of Ontario health colleges. In 2021, the CAG was engaged through consultants to provide feedback on their impression of the physiotherapy profession, the College and professional regulation to inform the upcoming strategic planning process. The feedback was well received was used by Council to assist with developing key strategic priorities.

In 2020-21, the College began to undertake a framework around Equity, Diversity, and Inclusion (EDI). The College consulted with other Canadian health regulators (CPSO, COTO, CASLPO, OCP, CDO, and Physiotherapy Alberta) about best practices in developing the EDI plan. Discussions included key considerations for building a framework, developing a position statement around EDI, and introducing an Indigenous land acknowledgement as a standing part of future Council meetings. The College also consulted with an advisor from York University when developing its land acknowledgement statement.

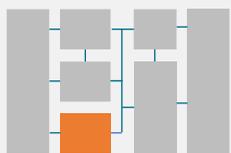
As part of an ongoing focus on EDI, the College hired a research firm to conduct research to better understand the experience of physiotherapists educated outside of Canada and how the College is meeting their needs in the context of our mandate. Seventeen one on one, 1-hour interviews were completed with PTs educated outside of Canada who were in different stages of their journey to becoming a PT or who had more recently registered with the College. An additional online survey was made available to all internationally educated PTs in Ontario and approximately 680 completed it. The research firm provided reports and recommendations. The College has started to implement some of these recommendations. Others will require a longer lead time and additional resources and are being considered for implementation in the coming year.

In 2020-21, Practice Advisors from other Colleges (CASPLP, CDO, CPO and COTO) met frequently to discuss responses and issues related to the COVID pandemic. The advisors provide updates on regulatory trends and issues. Through such regular meetings, resource sharing and COVID updates, Practice Advisors capitalize on the opportunity to collaborate with other health Colleges. The information also helps to inform the College COVID stakeholder communications. The College also takes the opportunity to collaborate and share information with other Ontario health Colleges by inviting them to send a member of their staff to our annual sexual abuse training sessions.

The College is a member of the Ontario Regulators for Access Consortium (ORAC) to collaborate on issues related to access to professions. We attended a meeting with this group in April 2021. We also participated in and initiated surveys among this group on key issues related to access, such as re-entry to practice and licensure issues.

The College met with representatives from the Insurance sector (liability insurance providers, WSIB and Canadian Life Health Insurance Association) in each quarter. Trends related to billing and inappropriate business practices were shared. The College subsequently developed articles in its newsletter and published a webinar educating PTs on proper business practices and billing expectations. The Practice Advisors developed a new workshop on good business practices which was delivered to two university partners in March and June 202

Throughout 2020 and 2021, Quality Assurance programs shared information through the Health Profession Regulators of Ontario (HPRO) group about modifications and updates to existing practice assessment processes due to the pandemic. For example, regulators shared knowledge about third party secure file sharing, video conferencing and other approaches to ensure Quality Assurance programs could continue to occur throughout the pandemic.

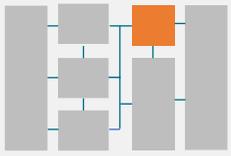


Measure

7.1 The College demonstrates how it protects against and addresses unauthorized disclosure of information.

| DOMAIN 4: INFORMATION MANAGEMENT |  | STANDARD 7  |  | Required Evidence   | College Response |
|----------------------------------|--|---|--|---|------------------|
|                                  |  |   |  | a. The College demonstrates how it:   |                  |
|                                  |  | i. uses policies and processes to govern the disclosure of, and requests for information; | <ul style="list-style-type: none"> <li>Please insert a link to policies and processes OR please briefly describe the respective policies and processes that addresses disclosure and requests for information.</li> </ul> <p>The College has policies governing the disclosure of and requests for information. They are as follows:</p> <ul style="list-style-type: none"> <li>Governance Policy – Privacy Code: Details reasons for collection, use and disclosure of data. Underwent update as part of Governance Review in 2019 and published in June 2021 (<a href="#">Found under About, College Privacy</a>). Policy #3.2: Privacy Procedures – Requests for Access or Corrections and Compliance Concerns in the <a href="#">College’s Governance Manual</a> further outlines the procedures around requests to access, corrections, and compliance with respect to College-held personal information.</li> <li>Confidentiality declaration: Staff, Council, non-Council, contractors, experts: Under Policy #4.1: Confidentiality – General of the <a href="#">College’s Governance Manual</a>, everyone this policy applies to must sign a confidentiality agreement to confirm their understanding of the RHPA’s rules regarding the confidentiality of matters that come to their attention as part of their College-related work.</li> <li>Council and Committee orientation and manuals: Confidentiality policies and the Code of Conduct are included as part of Council and Committee trainings. Both the College’s Code of Conduct declaration of office are included in the College’s By-laws.</li> <li><a href="#">Human Resource Policy #2.09</a>: Public Register Information and College Data describes the scope of information shared through the Public Register and defines how the College responds to information sharing requests. This policy protects against the release of unauthorized information of College registrants through the Public Register and more.</li> </ul> |   |                  |
|                                  |  |   |  | <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i> | Choose an item.  |
|                                  |  |   |  | <i>Additional comments for clarification (optional)</i>   |                  |
|                                  |  | ii. uses cybersecurity  | The College fulfills this requirement:   | Partially   |                  |

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|   |  | <p>measures to protect against unauthorized disclosure of information; and</p> <p>iii. uses policies, practices and processes to address accidental or unauthorized disclosure of information.</p> | <ul style="list-style-type: none"> <li>• Please insert a link to policies and processes <b>OR</b> please briefly describe the respective policies and processes to address cybersecurity and accidental or unauthorized disclosure of information.</li> </ul> <p>The College has policies, practices, and processes to address the accidental or unauthorized disclosure of information. They are as follows:</p> <ul style="list-style-type: none"> <li>• Website guidance around privacy: The College published guidance on the rules around protecting personal health information for its registrants who are health information custodians. The guidance explains the relevant privacy legislation, information related to privacy breaches and rules for the notification of breaches. They are found on the College’s website under Standards &amp; Resources.</li> <li>• <a href="#">Code of Conduct</a>: Sets out confidentiality rules (section 10) and provides a mechanism to manage concerns from Council staff or members of the public if there is a breach (section 5e). It is posted to the College website.</li> <li>• Training modules on digital security and protecting sensitive information for staff: Staff receive ongoing online training on a variety of digital security topics including essential knowledge related to cybersecurity, ransomware and malware and internet security when working from home.</li> <li>• Human Resource Policies: <ul style="list-style-type: none"> <li>○ <a href="#">HR Policy #1.05</a>: Confidentiality guards against the unauthorized disclosure of information to anyone outside of the organization. This applies to anyone who performs a duty or service for the College</li> <li>○ <a href="#">HR Policy #1.07</a>: Employee Records and Personal Information Protection is the internal framework for managing employee personal and confidential information. The document outlines employee responsibilities with respect to personal information management and highlights the preservation of privacy of employees and confidentiality of their records.</li> </ul> </li> <li>• Governance Policy - In-Camera Minutes: Policy #7.13: Council <i>In Camera</i> Minutes – Storage and Access in the <a href="#">College’s Governance Manual</a> outlines how in-camera minutes are recorded, reviewed and archived to ensure confidentiality of information.</li> </ul> |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>  |  |  | <p>No</p>  |
| <p><i>Additional comments for clarification (optional)</i></p> <p>The College is planning to conduct a cybersecurity audit, however it is uncertain at this time if it will be conducted in 2022.</p> |  |  |  |



Measure

8.1 All policies, standards of practice, and practice guidelines are up to date and relevant to the current practice environment (e.g. where appropriate, reflective of changing population health needs, public/societal expectations, models of care, clinical evidence, advances in technology).

DOMAIN 5: REGULATORY POLICIES

STANDARD 8

Required Evidence

a. The College regularly evaluates its policies, standards of practice, and practice guidelines to determine whether they are appropriate, or require revisions, or if new direction or guidance is required based on the current practice environment.

College Response

The College fulfills this requirement:

Yes met in 2020, continues to meet in 2021

- Please insert a link to document(s) that outline how the College evaluates its policies, standards of practice, and practice guidelines to ensure they are up to date and relevant to the current practice environment **OR** please briefly describe the College’s evaluation process (e.g., what triggers an evaluation, how often are evaluations conducted, what steps are being taken, which stakeholders are being engaged in the evaluation and how are they involved).

Policy #5.1: College Policy Review Schedule of the College’s [Governance Manual](#) outlines the procedures for reviewing its various policies. The College aims to review By-laws and governance policies annually and other documents (policies, standards of practice, regulations) on a three-year rolling cycle. The College also reviews and makes changes to documents as needed.

The College completed a comprehensive Standards Review Process in 2015-18 and all practice standards were reviewed and updated. In December 2019, Council approved a new review process designed to ensure that standards remain current going forward. The new Standards Review Process is found in the [December 2019 Council Materials](#). The Standards Review Process was updated and approved by Council in [June 2021](#), and work to review the first set of standards is now underway. The revised framework groups standards together into four groups, and each group of standards is reviewed once every four years.

At the [November 2020 Council Meeting](#), Council approved a revised Policy Approval Framework. This framework will refine the process through which College policies undergo and receive approval.

The College monitors the practice environment in several ways: results from the Quality Assurance Program, contacts made to the Practice Advisory team, complaints received through the Professional Conduct area, and responses to the Professional Issues Self-Assessment (PISA) form and Jurisprudence Module. The College also monitors website metrics, such as page visits and length of visits and search terms entered on the site. By monitoring trends, issues can be raised to management team level and the associated Committees and Council. Monitoring trends is an ongoing process in all areas so the College can initiate reviews and updates to associated policies, standards, or practice guidelines.

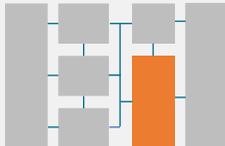
*If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?*

Choose an item.

*Additional comments for clarification (optional)*

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|  | <p>b. Provide information on how the College takes into account the following components when developing or amending policies, standards and practice guidelines:</p> <ul style="list-style-type: none"> <li>i. evidence and data;</li> <li>ii. the risk posed to patients / the public;</li> <li>iii. the current practice environment;</li> <li>iv. alignment with other health regulatory Colleges (where appropriate, for example where practice matters overlap);</li> <li>v. expectations of the public; and</li> <li>vi. stakeholder views and feedback.</li> </ul> | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please insert a link to document(s) that outline how the College develops or amends its policies, standards of practice, and practice guidelines to ensure they address the listed components <b>OR</b> please briefly describe the College’s development and amendment process.</li> </ul> <p>The College’s policies, standards, and guidance documents typically account for all six components. Due to other demands on the College (related to the clinical physiotherapy exam), the College does not have examples to provide this reporting year.</p> <p>The College develops and reviews its policies, practice standards, and practice guidelines through the following avenues:</p> <ol style="list-style-type: none"> <li>1. Policies<br/>Policy #5.1: College Policy Review Schedule of the College’s Governance Manual outlines the procedures for reviewing various policies. This process factors in evidence and alignment with other health regulators and the practice and legal environment more generally. During their <a href="#">November 2020 meeting</a>, Council approved the revised College Policies Framework, which sets out the guidance for approving, reviewing, and updating College policies.</li> <li>2. Practice Standards<br/>The College has an established Standards Review Process, which was developed in December 2019 and updated in June 2021. The Standards Review Process is found in the <a href="#">June 2021 Council materials</a>. This process factors in: (a) the evaluation of relevant evidence and data; (b) education/outreach to registrants; (c) a scan of the practice environment and other regulatory health Colleges; and (d) stakeholder feedback. All standards are reviewed through an equity lens. Work to review the first set of standards has started, and is expected to be complete in the second quarter of 2022.</li> <li>3. Practice Guidance<br/>The College develops practice guidance on an as needed basis, and Council, Committees, and staff consider evidence, risk, the current practice environment, stakeholder feedback, the information needs of registrants, and alignment with other Colleges when conducting research in this area. For example, the College’s Virtual Practice Guidelines underwent a review in 2020, <a href="#">where these variables were given consideration</a>.</li> </ol> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p><i>Additional comments for clarification (optional):</i></p> <p>The College has identified the formal inclusion of risk and public expectations into its standards, policies, and guidelines as an area of improvement.</p> <p>The College has an internal framework to review Standards according to the six components listed above. Over the next reporting year, the College aims to formalize the Standards Review Process according to those components so that this information is included in public materials.</p> | <p>Partially</p> <p>No</p> |
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|  |  | c. The College's policies, guidelines, standards and Code of Ethics should promote Diversity, Equity and Inclusion (DEI) so that these principles and values are reflected in the care provided by the registrants of the College.  | The College fulfills this requirement:  | No |
|  |  |   | <ul style="list-style-type: none"> <li>Please briefly describe how the College reviews its policies, guidelines, standards and Code of Ethics to ensure that they promote Diversity, Equity and Inclusion.</li> <li>Please highlight some examples of policies, guidelines, standards or the Code of Ethics where Diversity, Equity and Inclusion are reflected.</li> </ul> <p>The College is currently working on several areas to promote Equity, Diversity, and Inclusion within the organization. These initiatives include looking at ways to apply an equity lens to the College's standards, policies, and guidelines. However, work in this area has not formally commenced in this reporting year.</p> |    |
|  |  |   | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | No |
|  |  |   | <i>Additional comments for clarification (optional)</i>   |    |
|  |  | The College is currently undertaking a strategic planning process. The discussions to date noted the importance of equity, diversity, and inclusion considerations as they relate to the College's work. It is anticipated that EDI will be a theme in the new strategic plan, which is expected to be approved in the first half of 2022. However, it is uncertain at this time what specific EDI initiatives the College will pursue in 2022. |   |    |

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|  | <p><b>Measure</b></p> <p><b>9.1 Applicants meet all College requirements before they are able to practice.</b></p> |
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| DOMAIN 6: SUITABILITY | STANDARD 9 | <b>Required Evidence</b>   | <b>College Response</b>                |  |
|                       |            | a. Processes are in place to ensure that those who meet the registration requirements receive a certificate to practice (e.g., how it operationalizes the registration of members, including the review and validation of submitted documentation to detect fraudulent documents, confirmation of information from   | The College fulfills this requirement: | Yes met in 2020, continues to meet in 2021 |
|                       |            | <ul style="list-style-type: none"> <li>Please insert a link that outlines the policies or processes in place to ensure the documentation provided by candidates meets registration requirements <b>OR</b> please briefly describe in a few words the processes and checks that are carried out.</li> <li>Please insert a link <b>OR</b> please briefly describe an overview of the process undertaken to review how a College operationalizes its registration processes to ensure documentation provided by candidates meets registration requirements (e.g., communication with other regulators in other jurisdictions to secure records of good conduct, confirmation of information from supervisors, educators, etc.).</li> </ul> <p>The College ensures suitability to practice in registering new entrants through the below mechanisms.</p> <p><i>For cases not referred to the Registration Committee:</i></p> |  |  |

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|  |  | supervisors, etc.) <sup>2</sup> . | <ul style="list-style-type: none"> <li>The application requirements for prospective applicants are noted in the <a href="#">Checklists</a> page on the College website. This page outlines the documentation required for each registration pathway offered by the College.</li> <li>The considerations outlined in the <a href="#">Eligibility Questionnaire</a> are assessed before registration. Essential criteria include selection of application type, being eligible to work in Canada, identification of out-of-province registration and having obtained a degree in physiotherapy.</li> <li>Applicants previously practicing in another jurisdiction or within a different regulated health profession must submit a <a href="#">Regulatory History Form</a> to the College.</li> <li>For internationally educated physiotherapists: <a href="#">The Canadian Alliance of Physiotherapy Regulators (CAPR)</a> is a credentialing and assessment agency that provides credential evaluation services for all physiotherapy regulators in Canada. <a href="#">International credentials are assessed through CAPR</a> prior to review by the Registration Committee. <ul style="list-style-type: none"> <li><a href="#">Credentialing policies</a> assure language proficiency and protect against fraudulent documents.</li> </ul> </li> </ul> <p><i>For cases referred to the Registration Committee:</i></p> <ul style="list-style-type: none"> <li>The Registration Committee uses an internal Decision-Making Tool to assess the eligibility criteria, qualifications and risk to patients when registering new applicants. There is no Canadian experience requirement.</li> <li>Given the unavailability of a national clinical exam, <a href="#">the Registration Committee has created an alternative pathway to registration</a> which continues to be amended in an ongoing way.</li> </ul> <p>The Code does not require Colleges to have administrative guidelines related to the Registration Committee review process. The CPO has created its own timelines to assist applicants in understanding the steps in the process and the associated timelines.</p> <p>Before a registration application is approved, the file is reviewed a second time to ensure that the applicant meets all the regulatory requirements, and that all documentation has been collected and is accurate.</p> <p>An overview of the registration process is presented in the <a href="#">Registrar’s Review flowchart</a>, which is posted to the <a href="#">website</a>.</p> |
|  |  |                                   | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p>Choose an item.</p> <hr/> <p><i>Additional comments for clarification (optional)</i></p>  |
|  |  | b. The College periodically       | <p>The College fulfills this requirement:</p> <p>Yes</p>  |

<sup>2</sup> This measure is intended to demonstrate how a College ensures an applicant meets every registration requirement set out in its registration regulation prior to engaging in the full scope of practice allowed under any certificate of registration, including whether an applicant is eligible to be granted an exemption from a particular requirement.

|  |   |   |   |
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|  |   | <p>reviews its criteria and processes for determining whether an applicant meets its registration requirements, against best practices (e.g. how a College determines language proficiency, how Colleges detect fraudulent applications or documents including applicant use of third parties, how Colleges confirm registration status in other jurisdictions or professions where relevant etc.).</p> | <ul style="list-style-type: none"> <li>• Please insert a link that outlines the policies or processes in place for identifying best practices to assess whether an applicant meets registration requirements (e.g. how to assess English proficiency, suitability to practice etc.), a link to Council meeting materials where these have been discussed and decided upon <b>OR</b> please briefly describe the process and checks that are carried out.</li> <li>• Please provide the date when the criteria to assess registration requirements was last reviewed and updated.</li> </ul> <p><a href="#">The Canadian Alliance of Physiotherapy Regulators</a> (CAPR), the national credentialing and assessment agency for Canadian physiotherapy regulators, sets the requirements for and reviews the education qualification of international applicants, including language proficiency and ensuring documents are not fraudulent. Essential competencies are prepared by the <a href="#">National Physiotherapy Advisory Group</a>.</p> <p>In 2019, the College engaged a consultant to conduct a scoping review of the College’s Entry to Practice program and develop recommendations for further work. Council discussed the findings of the consultant report at the <a href="#">December 2020 meeting</a>. The purpose of the review is to ensure that the program remains fair, effective, and evidence based. The recommendations coming out of the Entry to Practice review include asking for proof of insurance, clarification around working with physiotherapy residents and making changes to the assessment of ‘good character.’</p> <p>During their <a href="#">February 2021 meeting</a>, Council set Entry to Practice reform as a priority for the 2021/2022 fiscal year. In <a href="#">March 2021</a>, Council appointed an Entry to Practice Working Group to address the recommendations of the 2020 review.</p> <p>In <a href="#">June 2021</a>, Council directed the Working Group to also examine alternatives to the clinical component of the Physiotherapy Competency Exam (PCE) in light of multiple cancellations and delays to the examinations. The Working Group issued a Request for Proposal for the development of a clinical exam. Due to the aggressive timelines only one submission was received, which did not meet the required criteria. Council has since approved the development of another clinical exam and work is underway.</p> |
|  |   | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>  | <p>Choose an item.</p>  |
|  |   | <p><i>Additional comments for clarification (optional)</i></p>  |   |
|  |   | <p><b>Measure</b><br/><b>9.2 Registrants continuously demonstrate they are competent and practice safely and ethically.</b></p>   |   |
|  | <p>c. A risk-based approach is used</p> | <p>The College fulfills this requirement:</p>   | <p>Partially</p>  |

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|  | <p>to ensure that currency<sup>3</sup> and other competency requirements are monitored and regularly validated (e.g., procedures are in place to verify good character, continuing education, practice hours requirements etc.).</p> | <ul style="list-style-type: none"> <li>• Please briefly describe the currency and competency requirements registrants are required to meet.</li> <li>• Please briefly describe how the College identified currency and competency requirements.</li> <li>• Please provide the date when currency and competency requirements were last reviewed and updated.</li> <li>• Please briefly describe how the College monitors that registrants meet currency and competency requirements (e.g. self-declaration, audits, random audit etc.) and how frequently this is done.</li> </ul> <p>The College undertakes currency and practice hour checks to some extent based on a self-declaration as part of the annual renewal process. However, currency checks are not typically undertaken except for what is required by regulation. The College does not currently use formal risk tools when undertaking currency checks.</p> <p>Currency requirements are laid out in regulation (Section 21 of the Ontario Regulation 532/98 under the <a href="#">Physiotherapy Act</a>). The Annual Renewal process is available on the <a href="#">College website</a>.</p> <ul style="list-style-type: none"> <li>• PTs are required to have practice hours – 1,200 hours every five years or to have completed the national exam (both written and clinical components) within the last five years. Registrants are required to report their practice hours annually during renewal. Practice hours are defined on the College’s <a href="#">website</a>. Those who do not have sufficient practice hours are required to engage in various activities to address this issue such as undergoing a practice assessment, or they agree to stop delivering patient care.</li> <li>• PTs must declare their professional development during annual renewal.</li> <li>• They must successfully complete a Jurisprudence Module after initial registration and then every five years.</li> <li>• PTs must complete PISA every year as a self-reflection exercise and identify areas where more learning is required.</li> <li>• PTs can be selected every 5 to 10 years for a screening interview as part of the Quality Assurance program to assess ongoing competency.</li> <li>• PTs are required to answer self-reporting questions related to various professional conduct issues during annual renewal.</li> <li>• PTs are required to declare whether they have liability insurance during annual renewal. The College follows up with those who declare that they do not have insurance and provide patient care.</li> </ul> |
|  |  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p>No</p>   |

<sup>3</sup> A ‘currency requirement’ is a requirement for recent experience that demonstrates that a member’s skills or related work experience is up-to-date. In the context of this measure, only those currency requirements assessed as part of registration processes are included (e.g. during renewal of a certificate of registration, or at any other time).

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|  |  |  | <i>Additional comments for clarification (optional)</i>  |
|  |  | <b>Measure</b>   |  |
|  |  | <b>9.3 Registration practices are transparent, objective, impartial, and fair.</b>   |  |
|  |  | a. The College addressed all recommendations, actions for improvement and next steps from its most recent Audit by the Office of the Fairness Commissioner (OFC).  | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>Please insert a link to the most recent assessment report by the OFC <b>OR</b> please provide a summary of outcome assessment report.</li> <li>Where an action plan was issued, is it: No Action Plan Issued</li> </ul> <p>The College posts the OFC assessment report on Fair Registration Practices on the <a href="#">College website</a>. The <a href="#">OFC website</a> also archives College reports.</p> <p>For the 2020 assessment cycle, the OFC found that the College is compliant with the OFC’s practice standards and did not issue an identification plan or recommendations.</p> |
|  |  |  | Yes met in 2020, continues to meet in 2021   |
|  |  | <i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i>  |  |
|  |  |  | Choose an item.  |
|  |  | <i>Additional comments for clarification (if needed)</i>   |  |
|  |  | <b>Measure</b>   |  |
|  |  | <b>10.1 The College supports registrants in applying the (new/revised) standards of practice and practice guidelines applicable to their practice.</b>   |  |
|  |  | <b>Required Evidence</b>   | <b>College Response</b>  |
|  |  | a. Provide examples of how the College assists registrants in implementing required changes to standards of practice or practice guidelines (beyond communicating the existence of new standard, FAQs, or supporting documents). | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>Please briefly describe a recent example of how the College has assisted its registrants in the uptake of a new or amended standard: <ul style="list-style-type: none"> <li>Name of Standard</li> <li>Duration of period that support was provided</li> <li>Activities undertaken to support registrants</li> <li>% of registrants reached/participated by each activity</li> <li>Evaluation conducted on effectiveness of support provided</li> </ul> </li> <li>Does the College always provide this level of support: Yes<br/><i>If not, please provide a brief explanation:</i></li> </ul>     |
|  |  |  | Yes met in 2020, continues to meet in 2021   |
|  |  | <u>Further clarification:</u>  |  |
|  |  | Colleges are encouraged to   | <b>Outreach events:</b> The outreach program was delivered through a webinar in 2021 rather than meeting in person due to the Covid pandemic. The delivery   |

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|  |                                     | <p>support registrants when implementing changes to standards of practice or guidelines. Such activities could include carrying out a follow-up survey on how registrants are adopting updated standards of practice and addressing identifiable gaps.</p> | <p>of a webinar “Questions and Answers with the Practice Advisors” (December 2021) answered a range of questions from stakeholders around top FAQs and standard expectations. The standard expectations that were covered include business practices, boundaries and supervision requirements. The advisors also developed a business practices workshop for MSc PT students and delivered it to second-year students at Queen's, University of Ottawa, Western and University of Toronto (March and June 2021). Additionally, there was an increase in boundary related inquiries and complaints from the public made to the College. The advisors subsequently delivered a Boundaries and Sexual Abuse workshop delivered to the University of Toronto in February 2021 and 2022.</p> <p><b>Webinars:</b> The College collaborated with a few other Colleges to host a <a href="#">Privacy Webinar</a> in June 2021 with a lawyer who specialize in this area to help registrants understand their obligations outlined in health privacy law.</p> <p><b>Practice Advice Correspondence</b> The advice team receives over 8,000 inquiries from stakeholders per year related to standard expectations. To gain an understanding of the nature and trends from inquiries to the College, a coding taxonomy was implemented. The top identified domains from the taxonomy drive which FAQs are published on the College website or in the monthly newsletter to stakeholders. In 2021 there was an increase in inquiries related to business practices, consent, record keeping, boundaries as well as infection prevention and control practices. Around 80% of contacts are from PTs and PT students and 20% are from other stakeholders (Public, Insurers, Employers).</p> <p><b>E-Learning Modules:</b> The type of inquiries suggested boundaries, consent and record-keeping as major trends where registrants required learning. The College developed and published <a href="#">Boundaries and Sexual Abuse</a>, <a href="#">Record-Keeping</a>, <a href="#">Consent</a> and <a href="#">Ethics E-Learning Modules</a>.</p> <p>The College uses the <b>PISA</b> (<a href="#">Professional Issues Self-Assessment</a>) tool to raise awareness to physiotherapists about rules and standards that are either new or have been identified by Practice Advisors as areas in need of additional support.</p> <ul style="list-style-type: none"> <li>○ 2021: Boundaries, Sexual Abuse, and Consent</li> </ul> <p><b>Communications:</b> Ongoing e-newsletter and social media posts, online advertising, and reminding stakeholders of the expectations.</p> |
|  |                                     | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   | <p>Choose an item.</p>  |
|  |                                     | <p><i>Additional comments for clarification (optional)</i></p>   |   |
|  |                                     | <p><b>Measure:</b><br/>10.2 The College effectively administers the assessment component(s) of its QA Program in a manner that is aligned with right touch regulation<sup>4</sup>.</p>   |   |
|  | <p>a. The College has processes</p> | <p>The College fulfills this requirement:</p>  | <p>Yes met in 2020, continues to meet in 2021</p>   |

<sup>4</sup> “Right touch” regulation is an approach to regulatory oversight that applies the minimal amount of regulatory force required to achieve a desired outcome. (Professional Standards Authority. Right Touch Regulation. <https://www.professionalstandards.org.uk/publications/right-touch-regulation>).

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|  |  | <p>and policies in place outlining:</p> <p>i. how areas of practice that are evaluated in QA assessments are identified in order to ensure the most impact on the quality of a registrant's practice;</p> | <ul style="list-style-type: none"> <li>• Please list the College's priority areas of focus for QA assessment and briefly describe how they have been identified <b>OR</b> please insert a link to the website where this information can be found.</li> <li>• Is the process taken above for identifying priority areas codified in a policy: Yes<br/><i>If yes, please insert link to policy:</i></li> </ul> <p><u>Background – Development of New Quality Assurance Program (2021)</u></p> <p>Redevelopment of the Quality Assurance Program started in 2018. Previously, the College used an on-site assessment process that randomly selected 5% of eligible registrants for a four-hour on-site assessment. Upon review, a new two-step process was developed and approved by Council. The College has begun to screen 9% of eligible PTs through one-hour virtual screening interviews and conduct a four-hour assessment for PTs not meeting the screening threshold (<a href="#">85% threshold</a>). The new Quality Assurance program framework was approved in <a href="#">March 2018</a>.</p> <p>Both components of the practice assessment were developed through consultation with subject matter experts. In <a href="#">May 2018</a>, a consultant led the development of competency-based criteria for screening interviews and on-site assessments. The consultant factored in research and consultation previously collected by the College, the NPAG Competency Profile for Physiotherapists in Canada (2017), and College standards. Priority areas include:</p> <ul style="list-style-type: none"> <li>• For the screening interview, 6 or 7 behaviour-based interview questions: focus is on competency (informed consent, assessment, boundaries, controlled acts, patient safety, ethics, working with support personnel and scholarship). Screening interview topics and questions are posted to the <a href="#">College website</a>.</li> <li>• For the assessment, 13 – 14 behaviour-based interview questions: written policies required by College Standards and patient records are reviewed. Assessment topics and questions are posted to the <a href="#">College website</a>. Half the interview is case-based on one patient. The remaining interview questions are situation-based questions.</li> </ul> <p>Council approved selection criteria and eligibility policies for the screening interview and on-site assessments. These policies were approved in March 2019. The full list of Quality Assurance policies is available in the <a href="#">March 2019 Council meeting materials</a>.</p> |
|  |  | <p><i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i></p>  | <p>Choose an item.</p>   |
|  |  | <p><i>Additional comments for clarification (optional)</i></p>  |  |
|  |  | <p>ii. details of how the College uses a right touch, evidence informed approach to determine which registrants will undergo an assessment activity (and which type</p>                                   | <p>The College fulfills this requirement:</p> <p>Yes</p> <ul style="list-style-type: none"> <li>• Please insert a link to document(s) outlining details of right touch approach and evidence used (e.g. data, literature, expert panel) to inform assessment approach <b>OR</b> please briefly describe right touch approach and evidence used.</li> <li>• Please provide the year the right touch approach was implemented <b>OR</b> when it was evaluated/updated (if applicable).<br/><i>If evaluated/updated, did the college engage the following stakeholders in the evaluation:</i> <ul style="list-style-type: none"> <li>- Public No</li> <li>- Employers Yes</li> </ul> </li> </ul>  |

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|  |  | <p>of multiple assessment activities); and</p>   | <ul style="list-style-type: none"> <li>- Registrants Yes</li> <li>- Other stakeholders Yes</li> </ul> <p>The Quality Assurance Program considered risk in its approach to the selection of its registrants to participate in screening interviews. When the new program was launched, the selection process started with the PTs in practice the longest. For decision making, the Committee uses a decision-making tool that helps the Committee identify risk to the public to ensure decisions are based on no, low, moderate, and high risk. The actions under each category help to ensure right touch regulation.</p>   |
|  |  | <p>iii. criteria that will inform the remediation activities a registrant must undergo based on the QA assessment, where necessary.</p>                            | <p>The College fulfills this requirement:</p> <p>Yes met in 2020, continues to meet in 2021</p>   |
|  |  |  | <ul style="list-style-type: none"> <li>• Please insert a link to the document that outlines criteria to inform remediation activities <b>OR</b> list criteria.</li> </ul> <p>The Quality Assurance Committee has approved a decision-making tool to help guide their discussions and final decisions. It is still being piloted and is not yet publicly available.</p> <p>Assessment results identify gaps according to specific performance indicators that are from the Essential Competency Profile for Physiotherapists in Canada, 2017. This narrows the focus for the Committee about the type of remediation activity that is required. Because the program launched this past year, the Committee has only reviewed a small number of assessments using the draft decision-making tool. In February 2022, this tool is expected to be formalized as the final Decision Tool at the Committee meeting at which time it will be made publicly available on the College’s website.</p> |
|  |  |  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p>Choose an item.</p>   |
|  |  |  | <p><i>Additional comments for clarification (optional)</i></p>  |
|  |  | <p><b>Measure:</b><br/>10.3 The College effectively remediates and monitors registrants who demonstrate unsatisfactory knowledge, skills, and judgment.</p>        |   |
|  |  | <p>a. The College tracks the results of remediation activities a registrant is directed to undertake as part of any College committee and assesses whether the</p> | <p>The College fulfills this requirement:</p> <p>Yes</p> <ul style="list-style-type: none"> <li>• Please insert a link to the College’s process for monitoring whether registrant’s complete remediation activities <b>OR</b> please briefly describe the process.</li> <li>• Please insert a link to the College’s process for determining whether a registrant has demonstrated the knowledge, skills and judgement following remediation <b>OR</b> please briefly describe the process.</li> </ul>   |

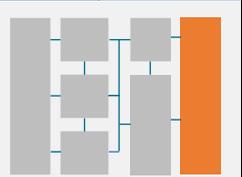
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| <b>DOMAIN 6:<br/>SUITABILITY</b><br><br><b>STANDARD 11</b> | <b>STANDARD 11</b> | <p>registrant subsequently demonstrates the required knowledge, skill and judgement while practicing.</p>                                | <p>College staff track the completion of remediation activities and provide registrants with frequent updates throughout the process. An initial email introducing the registrant to their remediation program is typically sent after the committee’s written decision and reasons have been released. This email provides a description of what is required in each remediation activity including the due date. If requirements have special aspects about them, such as a course that has limited space, these are flagged in the description. After a requirement has been met, this email is updated to reflect its completion, including the completion date, and sent to the registrant to confirm where they are in their remediation program. If there is a delay between the time one requirement is completed and the deadline of the next, this email may be sent again as a reminder as to where the registrant is in their program. Related information is updated on the register as required.</p> <p>The criteria for successful completion are outlined in the Order, Specified Continuing Education or Remediation Program (SCERP) or Term, Condition and Limitation (TCL). Confirming completion may involve:</p> <ul style="list-style-type: none"> <li>• The registrant submitting completion certificates.</li> <li>• The registrant submitting written confirmation that they have reviewed certain resources.</li> <li>• The College confirming on the backend that a quiz has been completed following the review of an e-learning module.</li> <li>• When required, receiving reports and evaluations from practice enhancement coaches, practice supervisors, practice monitors, facilitators of specialized programs (e.g. PROBE) and following spot audits.</li> <li>• In some cases, the registrant completing a second assessment to show if the concerns have been addressed.</li> </ul> <p>For Quality Assurance files, if the report from this final assessment identifies additional remediation needs, the case goes back to the Quality Assurance Committee for further consideration and a decision. Other breaches or concerns are referred to the Registrar for assessment.</p> |
|  |                    | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> | <p>Choose an item.</p>   |
|  |                    | <p><i>Additional comments for clarification (if needed)</i></p>  |  |
|  |                    | <p><b>Measure</b><br/>11.1 The College enables and supports anyone who raises a concern about a registrant.</p>                          |  |
| <p><b>Required Evidence</b></p>                            |                    | <p><b>College Response</b></p>   |  |
| <p>a. The different stages of the</p>                      |                    | <p>The College fulfills this requirement:</p>  | <p>Yes</p>   |

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|  |  | <p>complaints process and all relevant supports available to complainants are:</p> <p>i. supported by formal policies and procedures to ensure all relevant information is received during intake at each stage, including next steps for follow up;</p> <p>ii. clearly communicated directly to complainants who are engaged in the complaints process, including what a complainant can expect at each stage and the supports available to them (e.g. funding for sexual abuse therapy); and</p> | <ul style="list-style-type: none"> <li>• Please insert a link to the College’s website that clearly describes the College’s complaints process including, options to resolve a complaint, the potential outcomes associated with the respective options and supports available to the complainant.</li> <li>• Please insert a link to the policies/procedures for ensuring all relevant information is received during intake <b>OR</b> please briefly describe the policies and procedures if the documents are not publicly accessible.</li> </ul> <p>The College’s complaints process webpage outlines the different stages of this process, answers FAQs, and links to relevant resources. The FAQs help to clarify expectations for complainants in terms of timelines. Further information on <a href="#">how to submit a complaint</a> is available the College website and is accessible in <a href="#">11 different languages</a>. Information about <a href="#">funding for therapy and counselling for sexual abuse patients</a> is also listed on this webpage. Complaints can be submitted online, by mail, through email and over the phone if accommodations are required. The College also provides links to other organizations that can provide victims of sexual abuse/complainants with supports.</p> <p>The College’s Professional Conduct team has internal templates and procedures to ensure the receipt of relevant information, key considerations, and actions to be taken at each stage of the complaints process. These include the following internal documents:</p> <ul style="list-style-type: none"> <li>• Complaints Process (2018) template – explains the complaints process and the potential decision outcomes</li> <li>• Intake Process (2019) template – provides staff with procedures to handle incoming inquiries, complaints, and concerns</li> <li>• Investigators Manual (2019) – provides process and legislative information on conducting professional conduct investigations</li> <li>• Standard Operating Procedure for the Intake Process on opening new files (2021) – provides internal procedures and processes for opening new files, triaging, and assigning cases.</li> </ul> <p>Policies approved by the Committee in 2021 include Delivery of Cautions and Managing Frivolous and Vexatious Complaints.</p> |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> |  |  | <p>Choose an item.</p>  |
| <p><i>Additional comments for clarification (optional)</i></p>   |  |  |   |
|  |  | <p>iii. evaluated by the College to ensure the information provided to complainants is clear and useful.</p>   | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please provide details of how the College evaluates whether the information provided to complainants is clear and useful.</li> </ul> <p>Starting in March 2021, the College included with the decision and reasons released for complaints, surveys to both complainants and registrants seeking feedback on the complaints process. To date, the College has received two responses to the complaints survey and zero for the registrant’s survey.</p> <p>The College also reviewed the content on the Complaints information page to simplify information and ensure consistency in the content and the frequently asked questions.</p>  |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> |  |  | <p>Choose an item.</p>  |

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|  |   | <i>Additional comments for clarification (optional)</i>   |  |
|  | b. The College responds to 90% of inquiries from the public within 5 business days, with follow-up timelines as necessary.  | The College fulfills this requirement:  | Yes met in 2020, continues to meet in 2021 |
|  |   | Please insert rate ( <a href="#">see Companion Document: Technical Specifications for Quantitative CPMF Measures</a> ).   |  |
|  |   | The College meets this rate. The College has received 503 inquiries in 2021 and has a rate of 100%. The College has responded to all inquiries within three business days in 2021.  |  |
|  |   | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | Choose an item.                            |
|  |   | <i>Additional comments for clarification (optional)</i>   |  |
|  | c. Demonstrate how the College supports the public during the complaints process to ensure that the process is inclusive and transparent (e.g. translation services are available, use of technology, access outside regular business hours, transparency in decision-making to make sure the public understand how the College makes decisions that affect them etc.). | The College fulfills this requirement:  | Yes  |
|  |   | <ul style="list-style-type: none"> <li>• Please list supports available for public during complaints process.</li> <li>• Please briefly describe at what points during the complaints process that complainants are made aware of supports available.</li> </ul>  |  |
|  |   | <p>The College provides updates to the complainant upon request and whenever cases are expected to be presented to the ICRC. Complainants are apprised of the process ahead of intake and ICRC review, and the College is responsive to complainant inquiries. The College provides information on both <a href="#">support and funding on sexual abuse allegations</a> on its website.</p> <p>Most frequently provided supports in the current year 2021 include:</p> <ul style="list-style-type: none"> <li>• Information for complainants about the Inquiries, Complaints and Reports Committee processes and procedures, and decisions.</li> <li>• Live translation services.</li> <li>• Complainants are offered the opportunity to speak to College staff outside of business hours. The option for complainants to include support person(s) when speaking to the College about their complaints and concerns. This is something that the College encourages.</li> </ul> |  |
|  |   | <i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i>   | Choose an item.                            |
|  |   | <i>Additional comments for clarification (optional)</i>   |  |
|  | <b>Measure</b>  |   |  |
|  | <b>11.2 All parties to a complaint and discipline process are kept up to date on the progress of their case, and complainants are supported to participate effectively in the process.</b>  |   |  |
|  | a. Provide details about how the  | The College fulfills this requirement:  | Partially                                  |

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|  |   | <p>College ensures that all parties are regularly updated on the progress of their complaint or discipline case, including how complainants can contact the College for information (e.g., availability and accessibility to relevant information, translation services etc.).</p>  | <ul style="list-style-type: none"> <li>• Please insert a link to document(s) outlining how complainants can contact the College during the complaints process <b>OR</b> please provide a brief description.</li> <li>• Please insert a link to document(s) outlining how complainants are supported to participate in the complaints process <b>OR</b> please provide a brief description.</li> </ul> <p>Parties are updated only upon inquiry or when the complaint is ready to be presented to the ICRC. The College does not currently have a process or resources to provide more regular updates.</p> <p>The College sends communication to all parties when the complaint is ready to be presented to Inquiries, Complaints and Reports Committee (ICRC). The College also provides the required delay letters. The College’s Professional Conduct team is very responsive to complainants whenever they have questions or require support, and updates are always provided upon request.</p> <p>The Professional Conduct team is currently comprised of four Investigators, an Intake Coordinator, and an Investigations Manager. The College is recruiting a Professional Conduct Administrator to provide additional support in receiving and responding to calls and emails. The College received 346 inquiries, complaints, and concerns in 2021 and responded to 503 matters within five days.</p> |                        |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   |   |   | <p>No</p>  |                        |
| <p><i>Additional comments for clarification (optional)</i></p> <p>No discussions about improving the update process have taken place. The Professional Conduct staff has expanded with the additional of another Investigator hired in December 2021. The College is currently recruiting a Professional Conduct Administrator to provide support in receiving and responding to calls and emails.</p> |   |   |  |                        |
| <p>STANDARD 12</p>   | <p><b>Measure</b></p> <p><b>12.1 The College addresses complaints in a right touch manner.</b></p>  |   |  |                        |
|  | <p>a. The College has accessible, up-to-date, documented guidance setting out the framework for assessing risk and acting on complaints, including the prioritization of investigations, complaints, and reports (e.g. risk matrix, decision matrix/tree, triage protocol).</p> | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please insert a link to guidance document <b>OR</b> please briefly describe the framework and how it is being applied.</li> <li>• Please provide the year when it was implemented <b>OR</b> evaluated/updated (if applicable).</li> </ul> <p>The ICRC <a href="#">Decision Making Flowchart</a> is posted to the College website. This tool is used to broadly set out the considerations for acting on complaints. This was developed in response to the College’s 2014 zero tolerance position on inappropriate business practices and the College’s zero tolerance approach to sexual abuse of patients by physiotherapists. The ICRC also uses an <a href="#">Interim Order Assessment Tool</a> (originally from the Royal College of Dental Surgeons), also posted to the website, which helps determine the appropriate intervention measures for immediate and higher risk cases.</p> <p>The decision-making flow chart was last updated in 2019.</p> | <p>Yes met in 2020, continues to meet in 2021</p>  |                        |
|  | <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>  |   |  | <p>Choose an item.</p> |
|  | <p><i>Additional comments for clarification (optional)</i></p>  |   |  |                        |

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| 13.1 The College demonstrates that it shares concerns about a registrant with other relevant regulators and external system partners (e.g. law enforcement, government, etc.).   |  |
| a. The College’s policy outlining consistent criteria for disclosure and examples of the general circumstances and type of information that has been shared between the College and other relevant system partners, within the legal framework, about concerns with individuals and any results. | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>• Please insert a link to the policy <b>OR</b> please briefly describe the policy.</li> <li>• Please provide an overview of whom the College has shared information over the past year and purpose of sharing that information (i.e. general sectors of system partner, such as ‘hospital’, or ‘long-term care home’).</li> </ul> <p>The College has engaged in this process, though it is not formalized or done on a regular basis.</p> <p>When a PT is suspended or has their license revoked, the College sends an email with the pertinent details to key stakeholders such as all PT regulator Registrars, insurers, PT employer, physiotherapy associations (OPA and CPA), and national physiotherapy regulators (CAPR). The College does not presently have a formal tracking method for sharing information with other bodies.</p> <p>Additional sharing is also generally informal and ad hoc. For example, when the College had a member that was performing acupuncture outside of the scope of physiotherapy and was not registered with CTCMPAO (College of Traditional Chinese Medicine and Acupuncturists), the College shared this information with that College. The College attempts to conduct joint investigations with other health regulatory colleges when there may be a shared interest in doing so, though this did not take place during the 2021 reporting year.</p> <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p> <p><i>Additional comments for clarification (if needed)</i></p> <p>A quality improvement goal of the College is to develop a formal policy on information sharing. The College initiated a special project that began this year in collaboration with other Colleges through Health Profession Regulators of Ontario (HPRO), with the goal to develop a consistent approach across all Colleges as it relates to proactive and reactive disclosure of registrant specific information. This working group has completed its work and a report is ready for the Registrars to review and discuss.</p> |
|  | Partially  |
|  | No   |



|  |  |
|--|--|
| Measure  |  |
| 14.1 Council uses Key Performance Indicators (KPIs) in tracking and reviewing the College’s performance and regularly reviews internal and external risks that could impact the College’s performance. |  |

|                                 |   |
|---------------------------------|---|
| Required Evidence               | College Response  |
| a. Outline the College’s KPI’s, | <p>The College fulfills this requirement:</p> <p>No</p> |

|  |  |   |   |
|--|--|---|---|
|  |  | <p>including a clear rationale for why each is important.</p>   | <ul style="list-style-type: none"> <li>Please insert a link to a document that list College’s KPIs with an explanation for why these KPIs have been selected (including what the results the respective KPIs tells, and how it relates to the College meeting its strategic objectives and is therefore relevant to track), a link to Council meeting materials where this information is included <b>OR</b> list KPIs and rationale for selection.</li> </ul> <p>The College does not currently use KPIs. The College has developed internal dashboards to monitor work within certain departments, particularly finance, discipline, and IT service levels.</p> |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   |  |   | <p>No</p>   |
| <p><i>Additional comments for clarification (if needed)</i></p> <p>The College is currently in the process of developing a new strategic plan and will develop dashboards to communicate progress on the College’s strategic priorities and initiatives. However, it is uncertain at this time whether a new dashboard will be introduced in 2022.</p> |  |   |   |
|  |  | <p>b. The College regularly reports to Council on its performance and risk review against:</p> <p>i. stated strategic objectives (i.e. the objectives set out in a College’s strategic plan);</p> <p>ii. regulatory outcomes (i.e. operational indicators/targets with reference to the goals we are expected to achieve under the RHPA); and</p> <p>iii. its risk management approach.</p> | <p>The College fulfills this requirement:</p> <ul style="list-style-type: none"> <li>Please insert a link to Council meetings materials where the College reported to Council on its progress against stated strategic objectives, regulatory outcomes and risks that may impact the College’s ability to meet its objectives and the corresponding meeting minutes.</li> </ul> <p>Data on the College’s regulatory work is presented annually to Council through a detailed program report and presentation.</p>   |
| <p><i>If the response is “partially” or “no”, is the College planning to improve its performance over the next reporting period?</i></p>   |  |   | <p>No</p>   |
| <p><i>Additional comments for clarification (if needed)</i></p>  |  |   |   |
| <p><b>Measure</b></p> <p><b>14.2 Council directs action in response to College performance on its KPIs and risk reviews.</b></p>   |  |   |   |
|  |  | <p>a. Council uses performance and</p>  | <p>The College fulfills this requirement:</p>   |
|  |  |   | <p>No</p>   |

|  |  |  |
|--|--|--|
|  | <p>risk review findings to identify where improvement activities are needed.</p> | <ul style="list-style-type: none"> <li>Please insert a link to Council meeting materials where the Council used performance and risk review findings to identify where the College needs to implement improvement activities.</li> </ul> |
| <p><i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i></p>   |  | <p>No</p>  |
| <p><i>Additional comments for clarification (if needed)</i><br/> Financial risk is reported quarterly to the Finance Committee and Council. The College does not have a current Enterprise Risk Management (ERM) policy and approach to regularly review risks and identify mitigation strategies. The College is currently developing a new ERM policy and process.</p>   |  |  |
| <p><b>Measure</b><br/> <b>14.3 The College regularly reports publicly on its performance.</b></p>  |  |  |
| <p>a. Performance results related to a College's strategic objectives and regulatory outcomes are made public on the College's website.</p>  | <p>The College fulfills this requirement:</p>                                    | <p>No</p>  |
| <ul style="list-style-type: none"> <li>Please insert a link to the College's dashboard or relevant section of the College's website.</li> </ul> <p>In the past, the College has reported publicly through quarterly dashboards. The dashboards focused on reporting regulatory activities rather than strategic objectives. The College still collects performance data, though it is not currently publicized on the website (apart from the Annual Report).</p> <p>The College has previously used a dashboard, which was included in meeting materials up to and including <a href="#">December 2019</a>. The last dashboard update was provided for Q2: July-September 2019. A new dashboard will be available once the strategic plan is confirmed.</p> |  |  |
| <p><i>If the response is "partially" or "no", is the College planning to improve its performance over the next reporting period?</i></p>   |  | <p>No</p>  |
| <p><i>Additional comments for clarification (if needed)</i><br/> College staff review governance processes in an ongoing way to ensure they are compliant with governance policies and best practices. The re-introduction of a dashboard has been identified as an item for review, and changes may be introduced in the future. However, it is uncertain at this time whether this will occur in 2022.</p>   |  |  |

## Part 2: Context Measures

The following tables require Colleges to provide **statistical data** that will provide helpful context about a College's performance related to the standards. The context measures are non-directional, which means no conclusions can be drawn from the results in terms of whether they are 'good' or 'bad' without having a more in-depth understanding of what specifically drives those results.

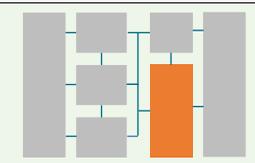
In order to facilitate consistency in reporting, a recommended method to calculate the information is provided in the companion document "Technical Specifications for Quantitative College Performance Measurement Framework Measures." However, recognizing that at this point in time, the data may not be readily available for each College to calculate the context measure in the recommended manner (e.g. due to differences in definitions), a College can report the information in a manner that is conducive to its data infrastructure and availability.

In those instances where a College does not have the data or the ability to calculate the context measure at this point in time it should state: 'Nil' and indicate any plans to collect the data in the future.

Where deemed appropriate, Colleges are encouraged to provide additional information to ensure the context measure is properly contextualized to its unique situation. Finally, where a College chooses to report a context measure using a method other than the recommended method outlined in the following Technical Document, the College is asked to provide the method in order to understand how the information provided was calculated.

The ministry has also included hyperlinks of the definitions to a glossary of terms for easier navigation.

**Table 1 – Context Measure 1**

| DOMAIN 6: SUITABILITY TO PRACTICE  |        |    |
|--|--------|---|
| Standard 11  |        |   |
| Statistical data collected in accordance with the recommended method or the College's own method: Recommended<br><i>If a College method is used, please specify the rationale for its use:</i> |        |   |
| Context Measure (CM)   |        |   |
| CM1. Type and distribution of QA/QI activities and assessments used in CY 2021*  |        | <p><i>What does this information tell us? Quality assurance (QA) and Quality Improvement (QI) are critical components in ensuring that professionals provide care that is safe, effective, patient centred and ethical. In addition, health care professionals face a number of ongoing changes that might impact how they practice (e.g. changing roles and responsibilities, changing public expectations, legislative changes).</i></p> <p><i>The information provided here illustrates the diversity of QA activities the College undertook in assessing the competency of its registrants and the QA and QI activities its registrants undertook to maintain competency in CY 2021. The diversity of QA/QI activities and assessments is reflective of a College's risk-based approach in executing its QA program, whereby the frequency of assessment and activities to maintain competency are informed by the risk of a registrant not acting competently. Details of how the College determined the appropriateness of its assessment component of its QA program are described or referenced by the College in Measure 13.1(a) of Standard 11.</i></p> |
| Type of QA/QI activity or assessment:  | #      |   |
| i. Screening Interview   | 430    |   |
| ii. On-site Assessments  | 8      |   |
| iii. Professional Issues Self-Assessment (PISA)  | 10,261 |   |
| iv. Jurisprudence Module   | 9,588  |   |
| v. Continuing Professional Development Declaration   | 9,610  |   |

\* Registrants may be undergoing multiple QA activities over the course of the reporting period. While future iterations of the CPMF may evolve to capture the different permutations of pathways registrants may undergo as part of a College's QA Program, the requested statistical information recognizes the current limitations in data availability today and is therefore limited to type and distribution of QA/QI activities or assessments used in the reporting period.

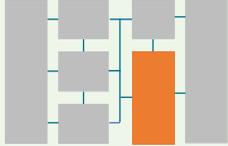
[NR](#)

*Additional comments for clarification (if needed)*

In 2020, no screening interviews were conducted due to the completion of the new Quality Assurance Program. The new practice assessment tools were launched in January 2021, and the College resumed monthly selections of PTs to participate in the QA process.

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**Table 2 – Context Measures 2 and 3**

| DOMAIN 6: SUITABILITY TO PRACTICE   |     |    |   |
|---|-----|----|--|
| Standard 11   |     |    |  |
| Statistical data collected in accordance with the recommended method or the College own method: Recommended   |     |    |  |
| <i>If a College method is used, please specify the rationale for its use:</i>   |     |    |  |
| Context Measure (CM)  | #   | %  |  |
| <b>CM 2.</b> Total number of registrants who participated in the QA Program CY 2021   | 430 |    | <i>What does this information tell us? If a registrant's knowledge, skills and judgement to practice safely, effectively and ethically have been assessed or reassessed and found to be unsatisfactory or a registrant is non-compliant with a College's QA Program, the College may refer them to the College's QA Committee.</i>   |
| <b>CM 3.</b> Rate of registrants who were referred to the QA Committee as part of the QA Program where the QA Committee directed the registrant to undertake remediation as of the start of CY2021. | NR  | NR | <i>The information provided here shows how many registrants who underwent an activity or assessment as part of the QA program where the QA Committee deemed that their practice is unsatisfactory and as a result have been directed to participate in specified continuing education or remediation program as of the start of CY 2021, understanding that some cases may carry over.</i> |
| <a href="#">NR</a>  |     |    |  |
| <i>Additional comments for clarification (if needed)</i>  |     |    |  |

**Table 3 – Context Measure 4**

| DOMAIN 6: SUITABILITY TO PRACTICE  |    |    |  |
|--|----|----|--|
| Standard 11  |    |    |  |
| Statistical data collected in accordance with the recommended method or the College’s own method: Recommended  |    |    |  |
| <i>If a College method is used, please specify the rationale for its use:</i>  |    |    |  |
| Context Measure (CM)   |    |    |  |
| <b>CM 4.</b> Outcome of remedial activities as at the end of CY 2021:**  | #  | %  | <i>What does this information tell us? This information provides insight into the outcome of the College’s remedial activities directed by the QA Committee and may help a College evaluate the effectiveness of its “QA remediation activities”. Without additional context no conclusions can be drawn on how successful the QA remediation activities are, as many factors may influence the practice and behaviour registrants (continue to)display.</i> |
| I. Registrants who demonstrated required knowledge, skills, and judgment following remediation*  | NR | NR |  |
| II. Registrants still undertaking remediation (i.e. remediation in progress)   | NR | NR |  |
| <p><i>NR</i></p> <p><i>* This measure may include registrants who were directed to undertake remediation in the previous year and completed reassessment in CY2021.</i></p> <p><i>**This number may include any outcomes from the previous year that were carried over into CY 2021.</i></p> |    |    |  |
| <i>Additional comments for clarification (if needed)</i>   |    |    |  |

**Table 4 – Context Measure 5**

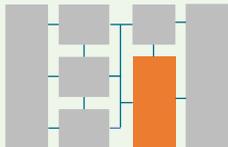
| DOMAIN 6: SUITABILITY TO PRACTICE  |                 |             |                                    |             |
|--|-----------------|-------------|------------------------------------|-------------|
| Standard 13  |                 |             |                                    |             |
| Statistical data is collected in accordance with the recommended method or the College’s own method: Recommended |                 |             |                                    |             |
| <i>If a College method is used, please specify the rationale for its use:</i>                                    |                 |             |                                    |             |
| Context Measure (CM)   |                 |             |                                    |             |
| CM 5. Distribution of formal complaints and Registrar’s Investigations by theme in CY 2021                       | Formal received |             | Registrar Investigations initiated |             |
| Themes:  | #               | %           | #                                  | %           |
| I. Advertising   | 0               | 0           | 0                                  | 0           |
| II. Billing and Fees   | 6               | 3.1         | 7                                  | 10.4        |
| III. Communication   | 23              | 11.9        | NR                                 | NR          |
| IV. Competence / Patient Care  | 40              | 20.6        | 14                                 | 20.9        |
| V. Intent to Mislead including Fraud   | 7               | 3.6         | NR                                 | NR          |
| VI. Professional Conduct & Behaviour   | 31              | 16          | 10                                 | 14.9        |
| VII. Record keeping  | 8               | 4.1         | 12                                 | 17.9        |
| VIII. Sexual Abuse / Harassment / Boundary Violations  | 24              | 12.4        | 11                                 | 16.4        |
| IX. Unauthorized Practice  | 0               | 0           | NR                                 | NR          |
| X. Other <Professionalism, Consent, Supervision of PTAs, etc.>   | 55              | 22.1        | NR                                 | NR          |
| <b>Total number of formal complaints and Registrar’s Investigations**</b>  | <b>194</b>      | <b>100%</b> | <b>67</b>                          | <b>100%</b> |

*What does this information tell us? This information facilitates transparency to the public, registrants and the ministry regarding the most prevalent themes identified in formal complaints received and Registrar’s Investigations undertaken by a College.*

|   |  |
|---|--|
| <p><a href="#">Formal Complaints</a><br/><a href="#">NR</a><br/><a href="#">Registrar's Investigation</a></p> <p><i>** The requested statistical information (number and distribution by theme) recognizes that formal complaints and Registrar's Investigations may include allegations that fall under multiple themes identified above, therefore when added together the numbers set out per theme may not equal the total number of formal complaints or Registrar's Investigations.</i></p> |  |
| <p><i>Additional comments for clarification (if needed)</i></p>   |  |

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**Table 5 – Context Measures 6, 7, 8 and 9**

| DOMAIN 6: SUITABILITY TO PRACTICE  |     |     |    |
|--|-----|-----|---|
| Standard 13  |     |     |   |
| Statistical data collected in accordance with the recommended method or the College’s own method: Recommended<br><i>If a College method is used, please specify the rationale for its use:</i> |     |     |   |
| Context Measure (CM)   |     |     |   |
| <b>CM 6.</b> Total number of formal complaints that were brought forward to the ICRC in CY 2021  | 103 |     | <i>What does this information tell us? The information helps the public better understand how formal complaints filed with the College and Registrar’s Investigations are disposed of or resolved. Furthermore, it provides transparency on key sources of concern that are being brought forward to the College’s committee.</i> |
| <b>CM 7.</b> Total number of ICRC matters brought forward as a result of a Registrar’s Investigation in CY 2021  | 55  |     |   |
| <b>CM 8.</b> Total number of requests or notifications for appointment of an investigator through a Registrar’s Investigation brought forward to the ICRC that were approved in CY 2021        | 27  |     |   |
| <b>CM 9.</b> Of the formal complaints and Registrar’s Investigations received in CY 2021**:  | #   | %   |   |
| I. Formal complaints that proceeded to Alternative Dispute Resolution (ADR)  | 0   | 0   |   |
| II. Formal complaints that were resolved through ADR   | 0   | 0   |   |
| III. Formal complaints that were disposed of by ICRC   | 70  | 44  |   |
| IV. Formal complaints that proceeded to ICRC and are still pending   | 9   | 5.6 |   |
| V. Formal complaints withdrawn by Registrar at the request of a complainant  | 0   | 0   |   |
| VI. Formal complaints that are disposed of by the ICRC as frivolous and vexatious  | NR  | NR  |   |

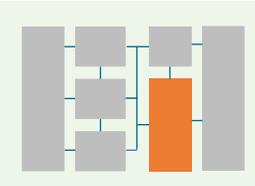
|   |    |     |  |
|---|----|-----|--|
| VII. Formal complaints and Registrar’s Investigations that are disposed of by the ICRC as a referral to the Discipline Committee  | 14 | 8.8 |  |
| <p><a href="#">ADR</a><br/> <a href="#">Disposal</a><br/> <a href="#">Formal Complaints</a><br/> <a href="#">Formal Complaints withdrawn by Registrar at the request of a complainant</a><br/> <a href="#">NR</a><br/> <a href="#">Registrar’s Investigation</a></p> <p># May relate to Registrar’s Investigations that were brought to the ICRC in the previous year.<br/> ** The total number of formal complaints received may not equal the numbers from 9(i) to (vi) as complaints that proceed to ADR and are not resolved will be reviewed at the ICRC, and complaints that the ICRC disposes of as frivolous and vexatious and a referral to the Discipline Committee will also be counted in total number of complaints disposed of by the ICRC.</p> |    |     |  |
| <p>Additional comments for clarification (if needed)</p>  |    |     |  |

**Table 6 – Context Measure 10**

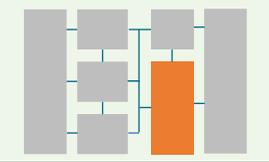
| DOMAIN 6: SUITABILITY TO PRACTICE   |   |                       |                                  |                                    |  |                       |  |  |
|---|---|-----------------------|----------------------------------|------------------------------------|--|-----------------------|--|--|
| Standard 13   |   |                       |                                  |                                    |  |                       |  |  |
| Statistical data collected in accordance with the recommended method or the College’s own method: Recommended |   |                       |                                  |                                    |  |                       |  |  |
| <i>If a College method is used, please specify the rationale for its use:</i>                                 |   |                       |                                  |                                    |  |                       |  |  |
| Context Measure (CM)  |   |                       |                                  |                                    |  |                       |  |  |
| CM 10. Total number of ICRC decisions in 2021   |   | 251                   |                                  |                                    |  |                       |  |  |
| Distribution of ICRC decisions by theme in 2021*  |   | # of ICRC Decisions++ |                                  |                                    |  |                       |  |  |
| Nature of Decision  |   | Take no action        | Proves advice or recommendations | Issues a caution (oral or written) | Orders a specified continuing education or remediation program | Agrees to undertaking | Refers specified allegations to the Discipline Committee | Takes any other action it considers appropriate that is not inconsistent with its governing legislation, regulations or by-laws. |
| I.  | Advertising                                     | 0                     | 0                                | 0                                  | 0  | 0                     | 0  | NR   |
| II.   | Billing and Fees                                | NR                    | NR                               | NR                                 | NR   | NR                    | 9  | 0  |
| III.  | Communication                                   | 13                    | NR                               | 0                                  | NR   | NR                    | NR   | NR   |
| IV.   | Competence / Patient Care                       | 14                    | 11                               | NR                                 | 6  | 6                     | 10   | NR   |
| V.  | Intent to Mislead Including Fraud               | NR                    | 0                                | 0                                  | 0  | 0                     | NR   | 0  |
| VI.   | Professional Conduct & Behaviour                | 17                    | NR                               | 7                                  | 6  | 10                    | NR   | NR   |
| VII.  | Record Keeping                                  | NR                    | NR                               | NR                                 | NR   | NR                    | 8  | NR   |
| VIII.   | Sexual Abuse / Harassment / Boundary Violations | 6                     | NR                               | 6                                  | NR   | 10                    | 12   | NR   |

|  |    |    |   |   |    |    |    |
|--|----|----|---|---|----|----|----|
| 2IX. Unauthorized Practice   | 0  | NR | 0 | 0 | 0  | 0  | 0  |
| X. Other <Infection Control, Supervision of PTA, etc.>   | NR | NR | 8 | 6 | NR | NR | NR |
| <p>* Number of decisions are corrected for formal complaints ICRC deemed frivolous and vexatious AND decisions can be regarding formal complaints and registrar’s investigations brought forward prior to 2021.</p> <p>++ The requested statistical information (number and distribution by theme) recognizes that formal complaints and Registrar’s Investigations may include allegations that fall under multiple themes identified above, therefore when added together the numbers set out per theme may not equal the total number of formal complaints or registrar’s investigations, or decisions.</p> <p><a href="#">NR</a></p> |    |    |   |   |    |    |    |
| <p>What does this information tell us? This information will help increase transparency on the type of decisions rendered by ICRC for different themes of formal complaints and Registrar’s Investigation and the actions taken to protect the public. In addition, the information may assist in further informing the public regarding what the consequences for a registrant can be associated with a particular theme of complaint or Registrar investigation and could facilitate a dialogue with the public about the appropriateness of an outcome related to a particular formal complaint.</p>                                  |    |    |   |   |    |    |    |
| <p>Additional comments for clarification (if needed)</p>   |    |    |   |   |    |    |    |

**Table 7 – Context Measure 11**

| DOMAIN 6: SUITABILITY TO PRACTICE   |      |   |
|---|------|--|
| Standard 13   |      |  |
| Statistical data collected in accordance with the recommended method or the College own method: Recommended<br>If College method is used, please specify the rationale for its use:   |      |  |
| Context Measure (CM)  |      |  |
| <b>CM 11.</b> 90 <sup>th</sup> Percentile disposal of:  | Days | <i>What does this information tell us? This information illustrates the maximum length of time in which 9 out of 10 formal complaints or Registrar’s investigations are being disposed by the College.</i>   |
| I. A formal complaint in working days in CY 2021  | 278  | <i>The information enhances transparency about the timeliness with which a College disposes of formal complaints or Registrar’s investigations. As such, the information provides the public, ministry and other stakeholders with information regarding the approximate timelines they can expect for the disposal of a formal complaint filed with, or Registrar’s investigation undertaken by, the College.</i> |
| II. A Registrar’s investigation in working days in CY 2021  | 589  |  |
| <a href="#">Disposal</a>  |      |  |
| Additional comments for clarification (if needed)   |      |  |
| <p>The adjustments to COVID has impacted the work at Committee. Cases delayed in 2020 due to meetings cancelled or postponed. This is had pushed decisions and length of cases of disposal. Additionally, the number of concerns and inquiries reported to the College increased from 230 in 2020 to 346 in 2021 which has impacted case volumes for investigators on the team.</p> <p>The Registrar Investigation cases are mostly medium to high risk cases that have many complexities with request for extensions, requiring peer or independent opinions and legal advice. Most cases were either referred to discipline or the committee ordered a SCERP, Caution or negotiated an acknowledgement and undertaking.</p> |      |  |

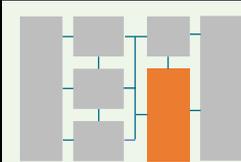
**Table 8 – Context Measure 12**

| DOMAIN 6: SUITABILITY TO PRACTICE  |      |    |
|--|------|---|
| Standard 13  |      |   |
| Statistical data collected in accordance with the recommended method or the College’s own method: Recommended<br><i>If a College method is used, please specify the rationale for its use:</i>   |      |   |
| Context Measure (CM)   |      |   |
| <b>CM 12.</b> 90th Percentile disposal of:   | Days | <i>What does this information tell us? This information illustrates the maximum length of time in which 9 out of 10 uncontested discipline hearings and 9 out of 10 contested discipline hearings are being disposed.</i>   |
| I. An uncontested discipline hearing in working days in CY 2021  | 643  | <i>The information enhances transparency about the timeliness with which a discipline hearing undertaken by a College is concluded. As such, the information provides the public, ministry and other stakeholders with information regarding the approximate timelines they can expect for the resolution of a discipline proceeding undertaken by the College.</i> |
| II. A contested discipline hearing in working days in CY 2021  | 707  |   |
| <a href="#">Disposal</a><br><a href="#">Uncontested Discipline Hearing</a><br><a href="#">Contested Discipline Hearing</a>   |      |   |
| <i>Additional comments for clarification (if needed)</i>   |      |   |
| <p>The College had eight uncontested hearing that concluded in CY2021, the shortest case took 88 business days to complete (from date of referral to the date the decision was released), and the longest one took 643 business days.</p> <p>The College only had one contested hearing that concluded in CY2021, and that case took 707 business days in total from date of referral to the date the decision was released.</p> <p>The College has created a scorecard for the Discipline Committee which tracks timelines associated with disciplinary proceedings (time from date of referral to hearing start date, date of referral to decision release date etc.). The College has a hearing start date target of six months from the referral date which is captured in this scorecard. This scorecard will be shared with College Counsel, Independent Legal Counsel and the Discipline Committee.</p> |      |   |

The committee has implemented new target decision writing timelines for both contested (60 days from hearing conclusion) and uncontested matters (30 days from hearing conclusion).

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**Table 9 – Context Measure 13**

| DOMAIN 6: SUITABILITY TO PRACTICE  |    |    |
|--|----|---|
| Standard 13  |    |   |
| Statistical data collected in accordance with the recommended method or the College’s own method: Recommended<br><i>If College method is used, please specify the rationale for its use:</i> |    |   |
| Context Measure (CM)   |    |   |
| <b>CM 13.</b> Distribution of Discipline finding by type*  |    |   |
| Type   | #  |   |
| I. Sexual abuse  | 0  |   |
| II. Incompetence   | 0  |   |
| III. Fail to maintain Standard   | 7  |   |
| IV. Improper use of a controlled act   | 0  |   |
| V. Conduct unbecoming  | 0  |   |
| VI. Dishonourable, disgraceful, unprofessional   | 7  |   |
| VII. Offence conviction  | 0  |   |
| VIII. Contravene certificate restrictions  | 0  |   |
| IX. Findings in another jurisdiction   | 0  |   |
| X. Breach of orders and/or undertaking   | 0  |   |
| XI. Falsifying records   | NR |   |
| XII. False or misleading document  | NR |   |
| XIII. Contravene relevant Acts   | 0  |   |
|  |    | <p><i>What does this information tell us? This information facilitates transparency to the public, registrants and the ministry regarding the most prevalent discipline findings where a formal complaint or Registrar’s Investigation is referred to the Discipline Committee by the ICRC.</i></p> |

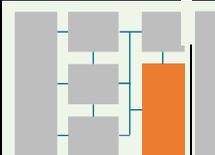
\* *The requested statistical information recognizes that an individual discipline case may include multiple findings identified above, therefore when added together the number of findings may not equal the total number of discipline cases.*

[NR](#)

*Additional comments for clarification (if needed)*

DRAFT

**Table 10 – Context Measure 14**

| DOMAIN 6: SUITABILITY TO PRACTICE   |    | Standard 13   |  |
|---|----|---|---|
| Standard 13   |    |   |   |
| Statistical data collected in accordance with the recommended method or the College own method: Recommended<br><i>If a College method is used, please specify the rationale for its use:</i>  |    |   |   |
| Context Measure (CM)  |    |   |   |
| <b>CM 14.</b> Distribution of Discipline orders by type*  |    | <i>What does this information tell us? This information will help strengthen transparency on the type of actions taken to protect the public through decisions rendered by the Discipline Committee. It is important to note that no conclusions can be drawn on the appropriateness of the discipline decisions without knowing intimate details of each case including the rationale behind the decision.</i> |   |
| Type  | #  |   |   |
| I. Revocation   | 0  |   |   |
| II. Suspension  | 7  |   |   |
| III. Terms, Conditions and Limitations on a Certificate of Registration   | 7  |   |   |
| IV. Reprimand   | 7  |   |   |
| V. Undertaking  | NR |   |   |
| <p>* The requested statistical information recognizes that an individual discipline case may include multiple findings identified above, therefore when added together the numbers set out for findings and orders may not equal the total number of discipline cases.</p> <p> <a href="#">Revocation</a><br/> <a href="#">Suspension</a><br/> <a href="#">Terms, Conditions and Limitations</a><br/> <a href="#">Reprimand</a><br/> <a href="#">Undertaking</a><br/> <a href="#">NR</a> </p> |    |   |   |
| Additional comments for clarification (if needed)   |    |   |   |

## Glossary

**Alternative Dispute Resolution (ADR):** Means mediation, conciliation, negotiation, or any other means of facilitating the resolution of issues in dispute.

Return to: [Table 5](#)

**Contested Discipline Hearing:** In a contested hearing, the College and registrant disagree on some or all of the allegations, penalty and/or costs.

Return to: [Table 8](#)

**Disposal:** The day upon which all relevant decisions were provided to the registrant by the College (i.e., the date the reasons are released and sent to the registrant and complainant, including both liability and penalty decisions, where relevant).

Return to: [Table 5](#), [Table 7](#), [Table 8](#)

**Formal Complaint:** A statement received by a College in writing or in another acceptable form that contains the information required by the College to initiate an investigation. This excludes complaint inquiries and other interactions with the College that do not result in a formally submitted complaint.

Return to: [Table 4](#), [Table 5](#)

**Formal Complaints withdrawn by Registrar at the request of a complainant:** Any formal complaint withdrawn by the Registrar prior to any action being taken by a Panel of the ICRC, at the request of the complainant, where the Registrar believed that the withdrawal was in the public interest.

Return to: [Table 5](#)

NR: Non-reportable: Results are not shown due to < 5 cases (for both # and %). This may include 0 reported cases.

Return to: [Table 1](#), [Table 2](#), [Table 3](#), [Table 4](#), [Table 5](#), [Table 6](#), [Table 9](#), [Table 10](#)

**Registrar's Investigation:** Under s.75(1)(a) of the *Regulated Health Professionals Act, 1991* (RHPA) where a Registrar believes, on reasonable and probable grounds, that a registrant has committed an act of professional misconduct or is incompetent he/she can appoint an investigator which must be approved by the Inquiries, Complaints and Reports Committee (ICRC). Section 75(1)(b) of the RHPA, where the ICRC receives information about a member from the Quality Assurance Committee, it may request the Registrar to conduct an investigation. In situations where the Registrar determines that the registrant exposes, or is likely to expose, their patient to harm or injury, the Registrar can appoint an investigator immediately without ICRC approval and must inform the ICRC of the appointment within five days.

Return to: [Table 4](#), [Table 5](#)

**Revocation:** Of a member or registrant's Certificate of Registration occurs where the discipline or fitness to practice committee of a health regulatory College makes an order to "revoke" the certificate which terminates the registrant's registration with the College and therefore their ability to practice the profession.

Return to: [Table 10](#)

**Suspension:** A suspension of a registrant's Certificate of Registration occurs for a set period of time during which the registrant is not permitted to:

- Hold themselves out as a person qualified to practice the profession in Ontario, including using restricted titles (e.g. doctor, nurse),
- Practice the profession in Ontario, or
- Perform controlled acts restricted to the profession under the Regulated Health Professions Act, 1991.

Return to: [Table 10](#)

**Reprimand:** A reprimand is where a registrant is required to attend publicly before a discipline panel of the College to hear the concerns that the panel has with their practice.

Return to: [Table 10](#)

**Terms, Conditions and Limitations:** On a Certificate of Registration are restrictions placed on a registrant's practice and are part of the Public Register posted on a health regulatory College's website.

Return to: [Table 10](#)

**Uncontested Discipline Hearing:** In an uncontested hearing, the College reads a statement of facts into the record which is either agreed to or uncontested by the Respondent. Subsequently, the College and the respondent may make a joint submission on penalty and costs or the College may make submissions which are uncontested by the Respondent.

Return to: [Table 8](#)

**Undertaking:** Is a written promise from a registrant that they will carry out certain activities or meet specified conditions requested by the College committee.

Return to: [Table 10](#)



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**Motion No.: 12.0**

**Motion**

**Council Meeting  
March 23-24, 2022**

**Agenda #12: Committee Slate Amendment**

**It is moved by**

\_\_\_\_\_

**and seconded by**

\_\_\_\_\_

**that:**

Council approves the following proposed amendments to the committee slate:

- Appoint Laina Smith to the Discipline and Fitness to Practise Committees and Quality Assurance Committee.
- Appoint Anna Grunin to the Finance Committee.
- Remove Richard O'Brien from the Inquiries, Complaints, and Reports Committee.

|                       |                                    |
|-----------------------|------------------------------------|
| <b>Meeting Date:</b>  | March 23-24, 2022                  |
| <b>Agenda Item #:</b> | 12                                 |
| <b>Category</b>       | <i>Governance</i>                  |
| <b>Issue:</b>         | Committee Slate Amendment          |
| <b>Submitted by:</b>  | Elicia Persaud, Governance Analyst |

**Issue:**

The appointment of Myles McLeod has expired, and a new public appointee has been appointed to Council resulting in an amendment to the committee slate.

**Background:**

Public member Myles McLeod's appointment expired on January 27, 2022.

This means that he is no longer available to serve on the following committees:

- Quality Assurance Committee,
- Finance Committee and,
- Discipline/Fitness to Practice Committees.

Quality Assurance Committee requires two public members and currently has one.

Finance Committee requires one to two public members. The committee currently has one and meets public member requirements. However, the committee does require five committee members to remain constituted.

On February 17 the College received a new public appointee, Laina Smith.

Laina is being proposed to replace Myles on the Quality Assurance Committee. Laina has indicated she is willing to serve on this committee.

With respect to the Finance Committee, it is proposed that Myles be replaced on this committee by Anna Grunin. Anna has indicated she would be willing to serve on this committee. The rationale for proposing Anna was based on workload distribution.

On March 4 the Executive Committee appointed Laina to the Discipline and Fitness to Practise Committees through written resolution. This was done in response to an urgent matter relating to an

upcoming hearing. Considering timing, rather than have Council confirm the appointment through another written consent resolution it is being included as part of the recommendation for approval in the overall amended committee slate.

While all public members are appointed to the Discipline and Fitness to Practise Committees, those on ICRC are conflicted out and become ineligible to sit on Discipline hearings because they will have considered the matter as a member of the ICRC. This leaves a pool of three public members for Discipline hearings with no potential conflicts due to their work on the ICRC. By removing Richard from ICRC, it will increase the pool of public members eligible to sit on Discipline hearings.

Currently, there are approximately 15 Discipline cases in queue. As a reminder, Discipline panels require two public members and three professional members be appointed.

These appointments are short term appointments from March to June 2022.

Executive Committee reviewed this item and are recommending that Council approves the amended committee slate.

**Public Interest Assessment:**

To effectively engage in statutory work of the College, committees must be constituted to protect the public and ensure that physiotherapists are meeting standards.

**Decision Sought:**

Council approves the amended committee slate.

**Related Action Items:**

| Action item description                                      | Required by date |
|--|------------------|
| Committee Chair's to be informed of committee member changes | March 2022       |

**Attachments:**

- Revised Committee Slate (March 2022)



### Appendix 1: 2021-2022 Revised Committee Slate **DRAFT**

| COMMITTEE                                | REQUIRED COMMITTEE COMPOSITION  | PROPOSED MEMBERSHIP  | BRIEF DESCRIPTION OF STATUTORY COMMITTEE'S RESPONSIBILITIES  | Staff Support               |
|--|---|--|--|-----------------------------|
| EXECUTIVE                                | 5 people: <ul style="list-style-type: none"> <li>At least 3 Professional Members of Council</li> <li>At least 1 but not more than 2 Public Appointees</li> <li>Must include President and Vice President</li> </ul> | <b>Theresa Stevens (President)</b><br>Jennifer Clifford (VP)<br>Katie Schulz<br>Tyrone Skanes<br>Nitin Madhvani  | The Executive Committee provides leadership to Council, promotes governance excellence at all levels, facilitates effective functioning of the College, in certain circumstances, to act on behalf of Council between meetings and when required, to reconstitute itself as the College privacy committee to deal with appeals regarding the manner in which personal information is managed by the College. The Committee has all powers of the Council with respect to any matter that requires immediate attention, other than the power to make, amend or revoke a regulation or by-law. | Rod Hamilton<br>Barbara Hou |
| INQUIRIES, COMPLAINTS AND REPORTS (ICRC) | At least 5 people, at least: <ul style="list-style-type: none"> <li>2 Professional Members of Council</li> <li>2 Public Appointees</li> <li>1 Non-Council</li> </ul>  | Dennis Ng<br>Jennifer Clifford<br>Tyrone Skanes<br>Carole Baxter<br>Richard O'Brien<br>Gary Rehan, Chair<br>Monica Clarke  | ICRC investigates complaints and considers reports as per section 79 of the Code related to the conduct or action, competencies or capacity of registrants as it relates to their practicing the profession.   | Allan Mak                   |
| DISCIPLINE & FITNESS TO PRACTISE         | At least 10 people, at least: <ul style="list-style-type: none"> <li>2 Professional Members of Council</li> <li>3 Public Appointees</li> </ul>  | Janet Law<br>Paul Parikh<br>Hervé Cavanagh<br>Karen St. Jacques<br>Anna Grunin<br>Katie Schulz<br>Sharon Gabison<br>Nitin Madhvani<br>Jesse Finn<br>Myles Macleod<br>Laina Smith<br>Carole Baxter<br>Richard O'Brien | A panel of at least 3-5 persons convenes to hear allegations of conduct or incompetence as referred by the ICRC.<br>A panel of at least 3-5 persons convenes to hear allegations of incapacity as referred by the health inquiry panel of the ICRC.<br>Hearings are in a judicial setting and can last from one to several days.<br>Decisions and Reasons are documented in detail.  | Olivia Kisil                |

| COMMITTEE              | REQUIRED COMMITTEE COMPOSITION   | PROPOSED MEMBERSHIP  | BRIEF DESCRIPTION OF STATUTORY COMMITTEE'S RESPONSIBILITIES   | Staff Support                 |
|------------------------|--|--|---|-------------------------------|
|                        | <ul style="list-style-type: none"> <li>1 Non-Council</li> </ul>  | <b>James Wernham, Chair</b><br>Daniel Negro<br>Sue Grebe<br>Angelo Karalekas<br>Nicole Graham<br>Richa Rehan<br>Felix Umana<br>Theresa Kay   |   |                               |
| QUALITY ASSURANCE (QA) | At least 5 people, at least: <ul style="list-style-type: none"> <li>2 Professional Members of Council</li> <li>2 Public Appointees</li> <li>1 Non-Council</li> </ul>                           | <b>Dennis Ng</b><br><b>Hervé Cavanagh</b><br><br><b>Jesse Finn</b><br><del>Myles Macleod</del><br><u>Laina Smith</u><br><br><b>Antoinette Megens (Chair)</b><br>Elizabeth Bergmann | The Quality Assurance Committee is to administer the College's Quality Assurance program as defined in section 80.1 of the Code that is intended to assure the quality and safety of professional practice and promote continuing competence among the registrants. | Shelley Martin<br>Victoria Lo |
| REGISTRATION           | At least 5 people, at least: <ul style="list-style-type: none"> <li>1 Professional Member of Council</li> <li>1 Academic Member</li> <li>2 Public Appointees</li> <li>1 Non-Council</li> </ul> | <b>Katie Schulz</b><br><br><b>Sharon Gabison</b><br><br><b>Tyrone Skanes, Chair</b><br>Jesse Finn<br>Carole Baxter<br><br>Anastasia Newman   | The Registration Committee makes decisions on registration applications that do not meet the criteria for issuance of a certificate of registration by the Registrar and to ensure that processes related to entry are fair, transparent and objective.             | Melissa Collimore             |
| PATIENT RELATIONS      | At least 4 people, at least: <ul style="list-style-type: none"> <li>2 Professional Members of Council</li> <li>1 Public Appointee</li> <li>1 Non-Council</li> </ul>                            | <b>Karen St. Jacques (Chair)</b><br>Anna Grunin<br><br>Nitin Madhvani<br><br>Antoinette Megens   | The Patient Relations Committee is to advise Council with respect to the patient relations program and to administer the program to provide funding for therapy and counselling.  | Anita Ashton<br>Olivia Kisil  |

| COMMITTEE                  | REQUIRED COMMITTEE COMPOSITION  | PROPOSED MEMBERSHIP  | BRIEF DESCRIPTION OF STATUTORY COMMITTEE'S RESPONSIBILITIES   | Staff Support                |
|----------------------------|---|--|---|------------------------------|
| FINANCE<br>(non-statutory) | At least 5 people, at least: <ul style="list-style-type: none"> <li>President</li> <li>Vice President</li> <li>3 Councillors at least 1 or 2 Public Appointees</li> </ul> | <a href="#">Theresa Stevens, President</a><br><br><a href="#">Jennifer Clifford, VP</a><br><br><a href="#">Janet Law, Chair</a><br><del><a href="#">Myles MacLeod</a></del><br><a href="#">Anna Grunin</a><br><a href="#">Nitin Madhvani</a> | The Finance Committee is to monitor significant financial planning, management and reporting matters of the College, to make recommendations and deliver reports to Council, and to serve as the College's audit committee. | Rod Hamilton<br>Zoe Robinson |

#### ENTRY TO PRACTICE WORKING GROUP

- Darryn Mandel, non council committee member
- Theresa Stevens, President and council member
- Gary Rehan, non council committee member
- Tyrone Skanes, public member
- Martin Bilodeau, non council committee member
- Jennifer Clifford, Professional member

Staff support: Barb

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## **Agenda #13**

Committee Role Orientation

Presentation by Committee Chairs



COLLEGE OF  
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de l'ONTARIO

**Motion No.: 14.1**

**Council Meeting  
March 23-24, 2022**

**Agenda # 14: Development of an Alternative Clinical Exam**

**It is moved by**

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**and seconded by**

---

**that:**

Council approve the Ontario Clinical Exam blueprint (list of competency topics to be assessed and the domain breakdown).



COLLEGE OF  
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of ONTARIO

ORDRE DES  
**PHYSIOTHÉRAPEUTES**  
de l'ONTARIO

**Motion No.: 14.2**

**Council Meeting  
March 23-24, 2022**

**Agenda # 14: Development of an Alternative Clinical Exam**

**It is moved by**

---

**and seconded by**

---

**that:**

Council approve the Ontario Clinical Exam, once it has been developed, as an approved exam for registering in Independent Practice.

|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022  |
| <b>Agenda Item #:</b> | 14   |
| <b>Category</b>       | Strategic  |
| <b>Issue:</b>         | Development of an Alternative Clinical Exam<br><i>For Decision</i> |
| <b>Submitted by:</b>  | Rod Hamilton, Registrar<br>Joyce Huang, Strategic Projects Manager |

**Issue:**

This brief provides an update on the ongoing work to develop the Ontario Clinical Exam. Council is asked to approve the exam blueprint, and to approve the Ontario Clinical Exam, once it has been developed, as an approved exam for registering in Independent Practice.

**Background:**

For a detailed history and background on CAPR and their role in the College's registration process, please refer to the backgrounder on page 152.

In December 2021, Council approved the operational work and funding requirements to establish a clinical exam based on a behaviour-based interview tool similar to the one used in the Quality Assurance program.

Staff began work on the development of an Ontario Clinical Exam in January 2022. Broadly speaking, this work includes three components:

- The development of the assessment tool which will be a structured behaviour-based interview based on entry-level competencies
- The development of the program infrastructure, policies and procedures required to support the exam operationally
- The development of a technology platform to assist with the administration of the exam, which includes registration, exam delivery, scoring, and data analysis and reporting

**Part 1 – Project Status Update**

The current status of the work is as follows.

*Exam tool development:*

The College entered into a contract in January 2022 with iComp Consulting Inc. to lead the development of a clinical exam based on a structured behaviour-based interview model to assess entry-level competency of physiotherapy applicants. The tool development work involves these high-level components:

- Blueprint development (February 2022)
- Item writing (March/April 2022)
- Examiner recruitment and training (March-May 2022)
- Pre-test of the tools to check usability (April/May 2022)
- Pilot test of the tools to check validity and reliability (May-June 2022)
- Cut score setting following the administration of approximately 100 exams (timing is unknown at this time)

*Program and policy development:*

In December 2021, the College began recruitment for a new Manager of Credentialing and Examinations. The new manager started on March 7, 2022. It is expected that the new manager will lead the recruitment and hiring of staff required to support the exam program, and the development of policies and procedures to support the exam process. It is estimated that this work will occur from April to September 2022. The new manager will develop a more detailed and specific work plan and timeline in the coming weeks.

*Technology development:*

In January 2022, with support from an IT project manager, the College began work to survey the market of exam administration technology vendors, and to conduct outreach to perspective vendors. The College has identified a short-list of potential vendors and is in the process of conducting more in-depth assessment of the suitability of their product for meeting the College's needs. It is expected that by the end of March 2022, the College would be in a position to determine which vendor we could work with. From there, the College will work with the vendor to finalize the contract and project details, which will take one to two months. The specific timeline for delivery of the product is uncertain, however it is expected to take approximately five to seven months.

An overview of the various development activities and associated timelines is included in appendix 1.

Based on information currently available, it is expected that the Ontario Clinical Exam will begin administration in Q3 of this fiscal year, which is October-December 2022.

The total cost to develop the Ontario Clinical Exam is estimated to be approximately \$200,000, with some expenses occurring in the current fiscal year and the remainder to occur in the next fiscal year (FY2022-23).

## **Part 2 – Approval of Exam Blueprint and Use of Exam**

## Background

The exam development consultant has completed the first step in the examination development which is to establish the exam blueprint.

The primary function of the blueprint is to describe how the Ontario Clinical Exam, a high-stakes exam is to be developed. Specifically, this blueprint provides explicit instructions and guidelines on how the competencies are to be expressed within the exam and provides the parameters of the exam including the length of the exam, specific processes, and how the standard-setting (cut score or pass/fail score) will be established.

To develop the Ontario Clinical Exam blueprint several steps have been completed, including conducting focus groups and a validation survey with entry-level practitioners to confirm the competencies to be assessed.

## Blueprint Details

### *Assessment Methodology*

The Ontario Clinical Exam is based on the behaviour-based structured interview methodology (behaviour-based interview or BBI). This type of examination provides an opportunity to assess broad competence, including critical thinking while taking into consideration the individual professional's experience.

Through a series of scripted core questions, BBIs elicit the candidate's recounting of a past event and incident – when a specific skill or behaviour was exhibited – and then use this information as an indicator of competence. Probing or secondary questions ensure that missing situational details and, most importantly, scores are based on the behaviours or actions that have been identified as highly important to safe, competent and ethical entry-level practice. Where specific examples are not available candidates are able to discuss what they would do in a hypothetical scenario.

The Ontario Clinical Examination will be conducted virtually and will take 2 - 3 hours to complete. The structured questions will align to *the NPAG Competency Profile for Physiotherapists in Canada, 2017*.

### *Competencies to be Assessed*

To define the exam blueprint topics, two separate focus groups were held with physiotherapy residents (n= 11) and physiotherapists who supervise, educate and oversee the practice of physiotherapy residents and new registrants (n=15). The participants represented a wide range of practice areas and included both Canadian- and internationally-educated practitioners. During the focus groups, the participants ranked the competencies that were highly important to assess and

defined the topics of the core questions as listed below. This topic list also aligns with the survey data noted below.

1. Accepting the patient (assess personal knowledge and appropriateness for physiotherapy)
2. Informed consent
3. Assessment and clinical impression
4. Treatment plan
5. Develop goals, patient collaboration
6. Collaboration, consultation and referral to others
7. Monitor, reassess and modify plan, self-management
8. Supervision and assigning care to support personnel (PTAs, Rehabilitation Assistants)
9. Expectation of fees, billing and account oversight/accountability
10. Discharge planning or transitioning care
11. Addressing discrepancies between employer expectations and professional standards
12. Conflict resolution
13. Confidentiality and privacy
14. Infection control and prevention
15. Professional boundaries
16. Ethical issues
17. Prioritizing and time management
18. Physical and emotional safety of the patient
19. Adjusting communication strategies

A survey was conducted with physiotherapy residents and physiotherapists with less than 2 years of experience (n=41), who ranked the level of importance to public protection and the frequency in which the competency is performed. Based on this data the chart below outlines the number of core questions by domain and the overall percentage the competency domain will be represented on the examination.

This domain chart is a representative sample of the competencies that are noted as highly important to assess. The percentage represents the weighing or the number of core questions.

| Domain                                  | Percentage<br>(+/- 5%) | Number of questions<br>(17-20 core questions) |
|---|------------------------|---|
| <b>Domain 1 Physiotherapy Expertise</b> | 0.48                   | 8.22 – 9.67                                   |
| <b>Domain 2 Communication</b>           | 0.08                   | 1.42 – 1.67                                   |
| <b>Domain 3 Collaboration</b>           | 0.10                   | 1.70 - 2                                      |
| <b>Domain 4 Management</b>              | 0.15                   | 2.55 - 3                                      |
| <b>Domain 6 Scholarship</b>             | 0.08                   | 1.42- 1.67                                    |
| <b>Domain 7 Professionalism</b>         | 0.10                   | 1.70 - 2                                      |

**Note:** One to two core questions will be developed based on Domain 6. However, this domain represents critical thinking and evidence-based practice competencies, which will be embedded throughout the examination. There are no questions proposed for Domain 5 Leadership as this domain did not rank high enough in the focus group and survey responses.

The full list of competencies and performance indicators to be assessed is included in Appendix 2.

### **Approval of the Ontario Clinical Exam for Use**

The College's Registration Regulations provide the College's Council with the ability to approve examination(s) for the purpose of qualifying for registration in Independent Practice. To that end, Council is asked to approve the Ontario Clinical Exam, once it has been developed, as an approved exam for the purpose of registering for Independent Practice.

### **Public Interest Assessment:**

- *Protection:* Ensuring that the College has a robust entry to practice process is a critical step in ensuring that only qualified applicants are registered as physiotherapists, which ensures that the profession delivers safe, competent and ethical care to patients.
- *Quality Care:* Ensuring that applicants meet entry-level competency requirements help to ensure that care provided by physiotherapists are of high quality and meets the standard of care.

### **Decision Sought:**

1. That Council approve the Ontario Clinical Exam blueprint (list of competency topics to be assessed and the domain breakdown).
2. That Council approve the Ontario Clinical Exam, once it has been developed, as an approved exam for registering in Independent Practice.

### **Related Action Items:**

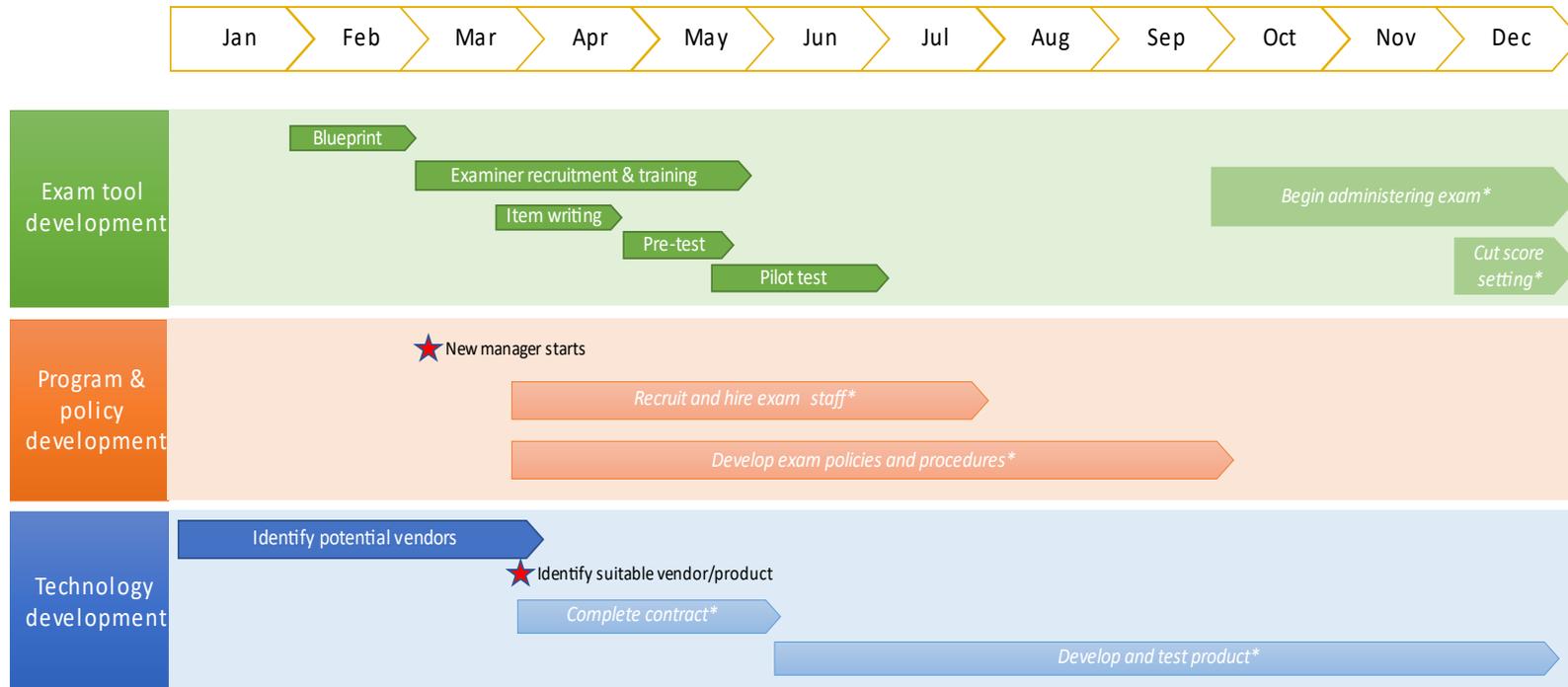
None.

### **Attachments:**

- Appendix 1: Exam Development Activities Overview
- Appendix 2: List of competencies and performance indicators to be assessed in the Ontario Clinical Exam



## Appendix 1: Exam Development Activities Overview



\* Timing is estimate only.

## Appendix 2: List of competencies and performance indicators to be assessed in the Ontario Clinical Exam

### Domain 1 Physiotherapy Expertise

#### 1.1 Employ a client-centered approach.

Act in a manner that respects client uniqueness, diversity and autonomy, and is in the client's best interest.

1.1.1

1.1.2 Provide the client with relevant information throughout care.

1.1.2

1.1.3 Actively involve the client in decision-making.

1.1.3

1.1.6 Ensure ongoing, informed client consent.

1.1.6

#### 1.2 Ensure physical and emotional safety of client.

1.2.1 Identify client-specific precautions, contraindications and risks.

1.2.1

1.2.2 Employ safe client handling techniques.

1.2.2

Apply assessment and intervention procedures in a manner that enhances the client's safety and comfort.

1.2.3

1.2.4 Monitor and respond to client's physical and emotional state throughout care.

1.2.4

#### 1.3 Conduct client assessment.

1.3.1 Interview client to obtain relevant information about health conditions, and personal and environmental factors.

1.3.1

1.3.2 Determine client's expectations, and their relevance to physiotherapy.

1.3.2

1.3.3 Obtain relevant information about client's status from other sources.

1.3.3

1.3.4 Identify comorbidities that impact approach to assessment.

1.3.4

1.3.5 Identify urgent health conditions that require immediate attention and take appropriate action.

1.3.5

1.3.7 Select and perform appropriate tests and measures.

1.3.7

**1.4 Establish a diagnosis and prognosis.**

- 1.4.1 Interpret assessment findings and other relevant information.
- 1.4.3 Develop a physiotherapy diagnosis.
- 1.4.4 Develop a working prognosis.
- 1.4.5 Determine if physiotherapy is indicated.
- 1.4.6 Determine if referral to another physiotherapist or another provider is indicated.

**1.5 Develop, implement, monitor and evaluate an intervention plan.**

- 1.5.1 Establish physiotherapy goals.
- 1.5.2 Determine an intervention plan.
- 1.5.3 Implement planned interventions.
- 1.5.5 Monitor and respond to client status during interventions.
- 1.5.6 Reassess client status and needs as appropriate.
- 1.5.7 Modify intervention plan as indicated.

**1.6 Complete or transition care.**

- 1.6.1 Evaluate client outcomes and goal attainment.
- 1.6.2 Develop a discharge or transition of care plan.
- 1.6.3 Prepare client for discharge or transition of care.
- 1.6.4 Ensure effective transfer of information at transition.

**Domain 2 Communication**

**2.3 Adapt communication approach to context.**

- 2.3.1 Adjust communication strategy consistent with purpose and setting.
- 2.3.2 Use appropriate terminology.
- 2.3.3 Adjust communication based on level of understanding of recipient.
- 2.3.4 Use appropriate terminology.
- 2.3.5 Ensure communication is timely.
- 2.3.5 Share information empathetically and respectfully.

**Domain 3 Collaboration**

**3.1 Promote an integrated approach to client services.**

- 3.1.1 Identify practice situations that may benefit from collaborative care.

**3.2 Facilitate collaborative relationships.**

- 3.1.2 Engage client as a team member.
- 3.2.3 Negotiate shared and overlapping roles and responsibilities.

### **3.3 Contribute to effective teamwork.**

3.3.4 Participate and be respectful of all members' participation in collaborative decision-making.

### **3.4 Contribute to conflict resolution.**

3.4.1 Recognize conflict or potential conflict, and respond constructively.  
3.4.2 Apply conflict resolution principles in a structured fashion.

## **Domain 4 Management**

### **4.1 Support organizational excellence.**

4.1.3 Address discrepancies between employer expectations and professional standards.

4.1.4 Follow proper business practices.

### **4.2 Utilize resources efficiently and effectively.**

4.2.3 Manage own time effectively.

### **4.3 Ensure a safe practice environment.**

4.3.1 Identify risks and mitigate hazards in the workplace.

4.3.4 Apply best practices for infection control.

### **4.5 Supervise others.**

4.5.1 Assess the competence of personnel involved in physiotherapy service delivery prior to assigning care.

4.5.2 Assign care to personnel involved in physiotherapy service delivery, and monitor delivery.

### **4.6 Manage practice information safely and effectively.**

4.6.3 Ensure secure retention, storage, transfer and destruction of documents.

4.6.4 Maintain confidentiality of records and data, with appropriate access.

## **Domain 6 Scholarship**

### **6.1 Use an evidence-informed approach in practice.**

6.1.1 Incorporate best available evidence into clinical decision-making.

6.1.2 Incorporate client context into clinical decision making.

6.1.3 Incorporate personal knowledge and experience into clinical decision-making.

6.1.4 Make decisions using an established clinical reasoning framework.

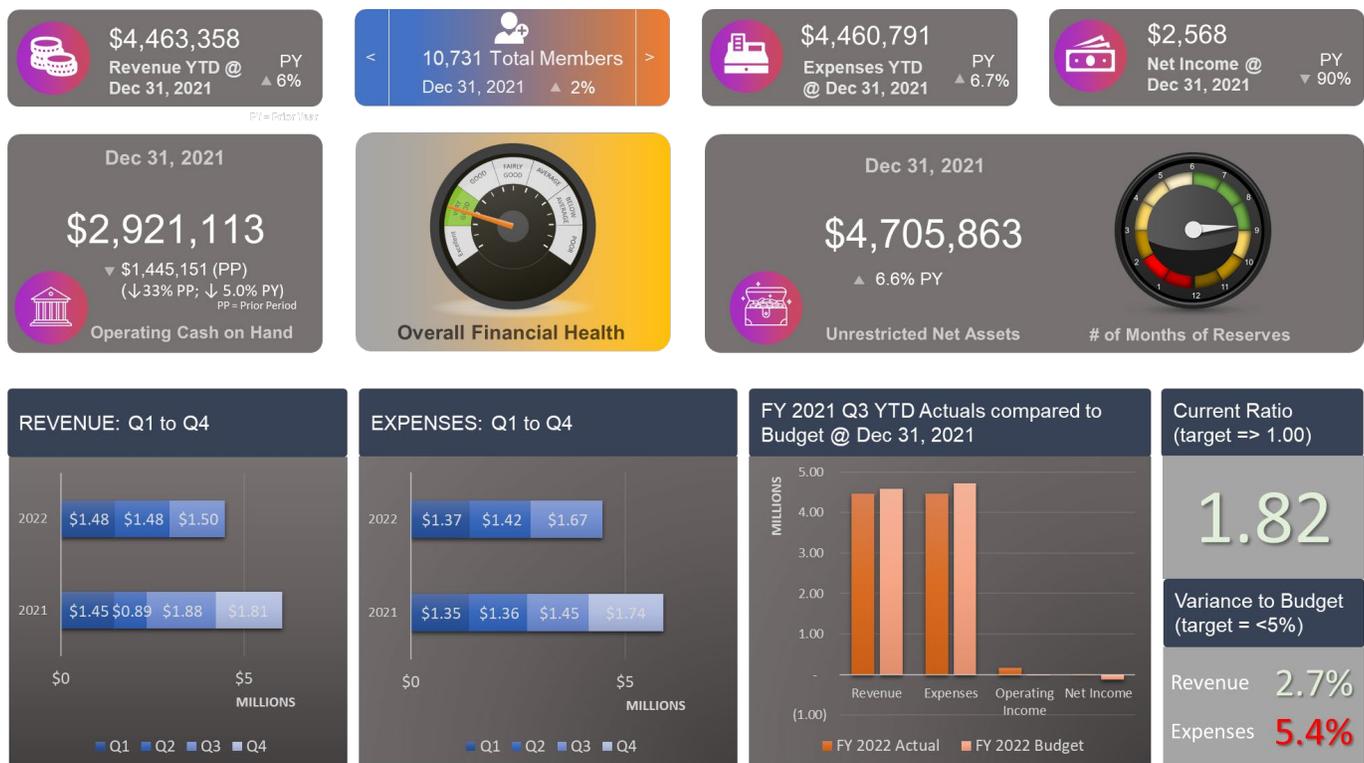
|  |       |   |
|--|-------|---|
|  | 6.1.5 | Use a structured approach to evaluate effectiveness of decisions.   |
| <b>Domain 7 Professionalism</b>                                    |       |   |
| <b>7.2 Behave ethically.</b>                                       | 7.2.1 | Use an ethical framework to guide decision-making. Address real, potential or perceived conflicts of                                  |
|  | 7.2.2 | interest.   |
|  | 7.2.3 | Promote services in an ethical manner. Demonstrate awareness of the social determinants of health and emerging trends that may impact |
| <b>7.3 Embrace social responsibility as a health professional.</b> | 7.3.2 | physiotherapy practice.   |
| <b>7.4 Act with professional integrity.</b>                        |       | Work within physiotherapy scope of practice and   |
|  | 7.4.3 | personal level of competence.   |
|  | 7.4.6 | Maintain professional boundaries.   |

|                       |  |
|-----------------------|--|
| <b>Meeting Date:</b>  | March 23-24, 2022                          |
| <b>Agenda Item #:</b> | 15   |
| <b>Issue:</b>         | FY 2022 Q3 Financial Management Report     |
| <b>Submitted by:</b>  | Zoe Robinson, Director, Corporate Services |

This report will provide a review of the College’s financial performance at the end of Q3, December 31, 2021. The report includes a summary of significant financial impacts on the College’s Statement of Operations (i.e., Income Statement) and Statement of Financial Position (i.e., Balance Sheet), including explanations of variances more than 5% of the budgeted amount as required by the College’s policy.

The College’s financial statements are presented on an accrual basis in accordance with Canadian Accounting Standards for Non-Profit Organizations (“ASNPO”) and reflect the financial performance for Fiscal Year (FY) 2022, Quarters 1-3, between April 1, 2021, and December 31, 2021, except where noted in the briefing note.

**Dashboard as of December 31, 2021**



**Background:**

Total revenue at the end Q3 was 97.3% of the projected amounts and within the 5% variance target established by the College.

Expenses were 5.4% lower than budgeted at the end of FY 2022 Q2 and slightly greater than the allowed 5% variance.

The current ratio (Current Assets divided by Current Liabilities) was 1.82 as of December 31, 2021 (target => 1.0).

\$81,412 of accrued expenses for Complaints and Discipline was added in Q2; 1 more case was closed and 3 new cases were added over Q3. The year-to-date accrued expenses for Complaints and Discipline as of December 31, 2021, is \$(88,062).

Figure 1 - Current Ratio by Quarter

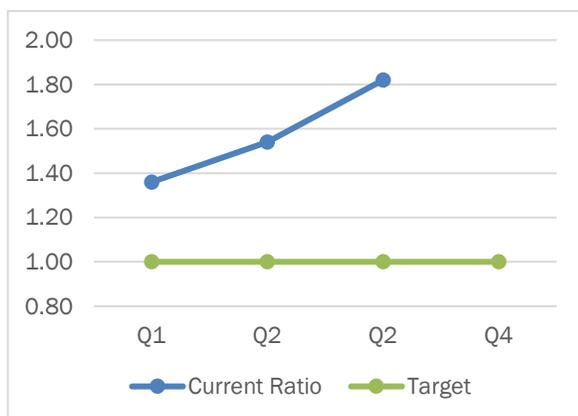
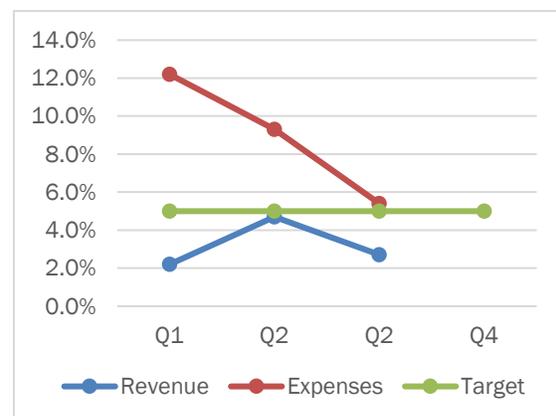


Figure 2 - Variance by Quarter



**Executive Summary**

The College continues to feel the impact of the lack of a viable PCE Clinical exam. A solution has not been identified as of September 30, 2021, and the College cannot realize revenue budgeted for applications and licenses for pro-rated Independent Practice Certificates. There are an estimated 1,045 Provisional Practice Certificate license holders who have not completed a clinical exam as of December 31, 2021. The financial impact is approximately \$350,000 in lost revenue.<sup>1</sup>

Overall year to date revenue as of December 31, 2021, is \$4,463,358 and 2.7% under the budgeted amount but still within the College's 5% variance target. We anticipate the variance will continue to decrease over Q4.

<sup>1</sup> This assumes 453 PPC holders from FY 2021 have not paid their IPC fees on a pro-rated or full fee basis; 592 PPC holders from FY 2022 who have not paid their IPC fees on a pro-rated basis. The calculation assumes an average IPC pro-rated fee of \$218.50 and 90% of the PPC holders eligible for the IPC.

Overall year to date expenses as of December 31, 2021, including amortization, is \$4,460,791 or 5.4% lower than budgeted for the end of Q#. The variance decreased from Q2 due to the activity of several projects continuing in Q3 including strategic planning, Council governance education, IEPT research, and regular meetings of the ETP Working Group.

Lower expenses were seen in some program areas:

- While the Executive Committee and ICRC met more often than planned, these increases were off set by Council and other committees meeting less often for a variety of reason, therefore realizing a decrease in per diems and expenses than budgeted.
- Information management has lower than budgeted expenses due to delay in projects and timing of contracts.
- Cash payments for professional fees, primarily legal fees, is higher than budgeted. The professional fees expenses recorded on the Statement of Operations is lower than budgeted due to accrued C&D expenses.
- The QA program are lower than budgeted as fewer assessors were train between Q1 and Q3 and some screening interviews were delay to Q4.

Management decided to track accrued expenses for complaints and discipline at the end of each quarter to reflect the closing of cases accrued as of March 31, 2021, and the addition of new cases over the fiscal year and avoiding potentially larger adjusting entries at year end. One (1) new case was closed between October and December 2021, for a total of ten (10) cases closed in Q1 to Q3, and three (3) new cases was added. As a result, C&D accrued expenses improved by \$81,238 resulting in a credit of \$88,062 in C&D accruals as of December 31, 2021.<sup>2</sup>

Table 1 provides a summary of the Statement of Operations separated for Q3 compared with FY 2021 Q2 and Table 2 provides a summary of the actuals compared to the budget for the Statement of Operations for the period April 1, 2021, to December 31, 2021.

*Table 1 - Summary - Statement of Operations – YTD Q3 Actuals to Prior Year*

| Item  | YTD<br>Apr – Dec<br>21 | YTD<br>Apr – Dec<br>20 | \$ Change         | % Change     |
|---|------------------------|------------------------|-------------------|--------------|
| <b>Revenues</b>                                     | \$4,463,358            | \$4,205,689            | \$257,669         | 6.1%         |
| <b>Expenses</b>                                     | \$4,305,414            | \$4,056,367            | \$249,047         | 6.8%         |
| <b>Net Operating Income</b>                         | \$157,994              | \$149,322              | \$8,672           | 5.8%         |
| <b>Less Amortization &amp; Depreciation</b>         | \$155,376              | \$123,406              | \$31,970          | 26.0%        |
| <b>Net Income (Excess of Expenses over Revenue)</b> | <b>\$2,568</b>         | <b>\$25,916</b>        | <b>\$(23,349)</b> | <b>90.0%</b> |

<sup>2</sup> A credit in an expense category lowers the expense.

*Table 2 – Summary Comparative Statement of Operations April 1, 2021, to September 30, 2021 – Actuals to Budget*

| Item  | Actual         | Budget            | Variance (\$)     | % Budget   | Variance (%) |
|---|----------------|-------------------|-------------------|------------|--------------|
| <b>Revenues</b>                                     | \$4,463,358    | \$4,586,473       | <b>-\$123,114</b> | 97.32%     | 2.68%        |
| <b>Expenses</b>                                     | \$4,305,414    | \$4,587,876       | <b>-\$282,461</b> | 93.84%     | 6.16%        |
| <b>Net Operating Income</b>                         | \$157,944      | <b>-\$1,403</b>   | \$159,347         | -11258.72% | 11358.72%    |
| <b>Less</b>   |                |                   |                   |            |              |
| <b>Amortization &amp; Depreciation</b>              | \$155,376      | \$128,604         | \$58,128          | 120.82%    | -20.82%      |
| <b>Net Income (Excess of Expenses over Revenue)</b> | <b>\$2,568</b> | <b>-\$130,007</b> | <b>\$101,219</b>  | -2%        | -78%         |

Table 3 presents the College's financial position which remains strong with \$4,377,264 in cash in operating accounts and unrestricted net assets of \$4,877,459 or 8.6 months of operating expenses. Figure 2 presents the trend in the College's current ratio, which measures the ability of the College to pay its current liabilities with assets that can be converted with one year (e.g., current assets), over Q1 and Q2. The College's current ratio as of September 30, 2021, is 1.56 (note: a quick ratio greater than 1.0 is good)

*Table 3 - Summary - Statement of Financial Position – Q3 compared to Q2 and Prior Year*

|  | <u>31 Dec 21</u>    | <u>30 Sep 21</u>    | <u>31 Dec 20</u>    |
|--|---------------------|---------------------|---------------------|
| <b>ASSETS</b>                                |                     |                     |                     |
| <b>Current Assets</b>                        |                     |                     |                     |
| <b>Chequing/Savings</b>                      |                     |                     |                     |
| <b>Total 1000 · Cash on Hand</b>             | 2,921,113.00        | 4,377,264.42        | 3,071,989.77        |
| <b>1100 · Investments</b>                    |                     |                     |                     |
| <b>1102 · Investments - Short Term</b>       | 1,260,700.52        | 1,262,647.80        | 1,032,365.48        |
| <b>1104 · Investments - Long Term</b>        | <u>3,954,758.80</u> | <u>3,933,550.73</u> | <u>4,082,425.14</u> |
| <b>Total 1100 · Investments</b>              | <u>5,215,459.32</u> | <u>5,196,198.53</u> | <u>5,114,790.62</u> |
| <b>Total Chequing/Savings</b>                | 8,136,572.32        | 9,573,462.95        | 8,186,780.39        |
| <b>Accounts Receivable</b>                   |                     |                     |                     |
| <b>1200 · Accounts Receivable</b>            |                     |                     |                     |
| <b>1207 · Employer Health Tax Receivable</b> | 0.00                | 10,478.84           | 0.00                |
| <b>1200 · Accounts Receivable - Other</b>    | <u>41,676.67</u>    | <u>40,662.74</u>    | <u>51,878.60</u>    |
| <b>Total 1200 · Accounts Receivable</b>      | <u>41,676.67</u>    | <u>51,141.58</u>    | <u>51,878.60</u>    |
| <b>Total Accounts Receivable</b>             | 41,676.67           | 51,141.58           | 51,878.60           |

|   |                     |                      |                     |
|---|---------------------|----------------------|---------------------|
| Total Other Current Assets                  | 82,019.42           | 133,451.50           | 17,744.17           |
| Total Current Assets                        | 8,260,268.41        | 9,758,056.03         | 8,256,403.16        |
| Total Fixed Assets                          | 551,434.84          | 603,332.72           | 669,628.42          |
| <b>TOTAL ASSETS</b>                         | <b>8,811,703.25</b> | <b>10,361,388.75</b> | <b>8,926,031.58</b> |
| <b>LIABILITIES &amp; EQUITY</b>             |                     |                      |                     |
| <b>Liabilities</b>                          |                     |                      |                     |
| <b>Current Liabilities</b>                  |                     |                      |                     |
| <b>Accounts Payable</b>                     |                     |                      |                     |
| 2000 · Accounts Payable                     | 75,336.09           | 69,760.39            | 67,014.93           |
| Total Accounts Payable                      | 75,336.09           | 69,760.39            | 67,014.93           |
| <b>Other Current Liabilities</b>            |                     |                      |                     |
| 2011 · Vacation Accrual                     | 207,119.34          | 207,119.34           | 133,902.98          |
| 2010 · Accrued Liabilities                  | 619,269.33          | 593,690.91           | 636,836.97          |
| Total 2100 · Deferred Revenue               | 1,452,932.80        | 2,829,412.16         | 1,759,873.10        |
| <b>2150 · Other Payables</b>                |                     |                      |                     |
| 2152 · Due to Manulife (RRSP)               | 0.00                | 25,987.78            | 0.00                |
| Total 2150 · Other Payables                 | 0.00                | 25,987.78            | 0.00                |
| Total Other Current Liabilities             | 2,279,321.47        | 3,656,210.19         | 2,530,613.05        |
| Total Current Liabilities                   | 2,354,657.56        | 3,725,970.58         | 2,597,627.98        |
| Total Long Term Liabilities                 | 144,572.57          | 151,349.40           | 171,679.89          |
| Total Liabilities                           | 2,499,230.13        | 3,877,319.98         | 2,769,307.87        |
| <b>Equity</b>                               |                     |                      |                     |
| 3000 · Unrestricted Net Assets              | 4,703,296.47        | 4,703,296.47         | 4,411,446.00        |
| 3001 · Invested in Capital Assets           | 506,609.00          | 506,609.00           | 619,361.00          |
| Total 3010 · Restricted Reserves Net Income | 1,100,000.00        | 1,100,000.00         | 1,100,000.00        |
|   | 2,567.65            | 174,163.30           | 25,916.71           |
| Total Equity                                | 6,312,473.12        | 6,484,068.77         | 6,156,723.71        |
| <b>TOTAL LIABILITIES &amp; EQUITY</b>       | <b>8,811,703.25</b> | <b>10,361,388.75</b> | <b>8,926,031.58</b> |

### Statement of Operations Analysis:

The year-to-date net income at the end of Q3 was \$2,568, \$132,574 more than budgeted.

The Statement of Operations provides information on the financial performance of the College over a period, in this case between April 1, 2021, to December 30, 2021, and consists of revenue and expenses. The financial performance in summary shown as:

- Net Operating Income = Revenues less Expenses
- Net Income (Excess of Revenues over Expenses) = Operating Income less Amortization and Depreciation

## **Revenue:**

### *Year-to-Date*

Total revenue for the period April 1, 2021 to December 30, 2021, was \$24,463,358 or 2.7 % lower than budgeted.

The main drivers of revenue for the College are:

- Independent Practice – Full Fees = 93.3% of total revenue
- Admin Fees – 2.4%
- Interest Income = 1.8%

For the period between April 1, 2021, and December 30, 2021, revenue from registration fees was \$4,271,258.

Total income from admin fees for the period between April 1, 2021, and December 31, 2021, is \$108,975.

Total interest income for the first nine months of FY 2022 totals \$81,240.

10,731 members were registered as of December 30, 2021 (IPC = 9,653; PPC = 1,078). This is a 2% increase over Q2.

## **Expenses:**

### *Year-to-Date*

Expenses for the period between April 1, 2021, and December 30, 2021, were \$4,460,791 or 5.4% lower than budgeted. The main drivers of expenses are:

- Staffing costs (including salaries and benefits) = 64% of total expense
- Office and General costs = 14%
- Information Management = 4.4%
- Council and Committee costs = 3.4%

The College continues to be under budget in a variety of program areas over Q1 to Q3:

| <b>Program Area</b>                       | <b>% Under Budget</b> |
|---|-----------------------|
| <b>Committee Per Diems &amp; Expenses</b> | 33%                   |
| <b>Information Management</b>             | 19%                   |
| <b>Regulatory Effectiveness</b>           | 17%                   |
| <b>Communications</b>                     | 34%                   |
| <b>Programs – QA Program</b>              | 37%                   |
| <b>Programs – Jurisprudence</b>           | 23%                   |

**Statement of Operations-Prior year comparison:**

Overall financial results for the first nine (9) months of the Fiscal Year 2022 were less favourable when compared to the same period in the prior year. Total revenue increased by 6.2% (\$257,669) and total expenses increased by 6.7% (\$281,018).

The increase in revenue is driven by timing of receipt of registration fees for Independent Practice Certificates between FY 2021 and FY 2022. Registrants were able to delay payment of their IPC registrations until the end of September 2020 during the prior fiscal year. Less revenue was recognized between April 2020 and September 2020 when compared to the revenue recognized between April 2021 and September 2021 and this has a lasting impact over Q3.

Expenses were higher in FY 2022 at the end of Q3 than FY 2021 Q2 for:

- Council and committee per diems and expenses as meetings were held on a regular basis as the College adjusted to the pandemic resulted in a \$54,910 increase in expenses compared to the prior year.
- The QA Program activity over FY 2022 Q1 to Q3 following the launch of the updated program in February 2021 resulted in a \$49,087 increase in expenses compared to the prior year.
- Projects related to strategic planning, council governance education, research of IEPTs, and the work of the ETP Working Group contributed to higher expenses for Regulatory Effectiveness, an increase \$78,819 over the prior year.
- Staffing costs were higher due to increases in the number of staff of the College over a comparable period resulting in a \$267,227 increase from the prior year.

Expenses were lower in FY 2022 Q1 than FY 2021 Q1 for:

- Information management due to changes in the College's costs to operate its database.
- Communications due to the lack of in-person activity as the College's communications switched to virtual platforms due the pandemic.

**Expenses for Complaints and Discipline:**

Management has elected to reconcile the complaints and discipline accounts on a quarterly basis beginning in FY 2022. This means the financial statements will reflect adjustments to the accrued expenses and accrued liabilities for complaints and discipline cases every 3 months. This process includes:

- Review cases accrued as of March 31, 2021. The future anticipated expenses to close an identified case are accrued at the end of a period. The accrued expenses will represent the costs for cases possibly over multiple fiscal years.
- Identify the expenses for the accrued cases paid during the current period.
- Identify the accrued cases that were closed during the period. If a case is closed, adjustments are made to reverse the balance of accrued expenses.
- Identify new cases that need to be accrued at the end of the period.

At the end of Q3, ten (10) cases that were accrued as of March 31, 2021, were closed by professional conduct and discipline and three (4) cases have been added.

Figure 5 highlights how the complaints and discipline accrued expenses are represented in the Statement of Operations. To summarize the impact on the Q1 financial statements:

Figure 3 - Extract Q3 Statement of Operations - Legal Costs

|  | Apr - Dec 21      | Budget           | \$ Over Budget   | % of Budget    |
|--|-------------------|------------------|------------------|----------------|
| <b>5760 - Legal</b>                              |                   |                  |                  |                |
| 5756 - C & D Accrual Expense                     | -88,061.96        | 0.00             | -88,061.96       | 100.0%         |
| 5758 - Legal - Practice Advice                   | 0.00              | 0.00             | 0.00             | 0.0%           |
| 5751 - Legal - QA                                | 1,152.60          | 8,136.00         | -6,983.40        | 14.17%         |
| 5752 - Legal - Registration                      | 23,520.95         | 23,800.00        | -279.05          | 98.83%         |
| <b>5753 - Legal - Professional Conduct</b>       |                   |                  |                  |                |
| 5760 - General Counsel                           | 44,183.16         | 18,000.00        | 26,183.16        | 245.46%        |
| 5761 - Independent Legal Advice                  | 30,927.53         | 23,250.01        | 7,677.52         | 133.02%        |
| 5762 - Hearing Counsel                           | 39,197.68         | 7,499.97         | 31,697.71        | 522.64%        |
| 5763 - Court Proceedings & Appeals               | 14,836.91         | 0.00             | 14,836.91        | 100.0%         |
| <b>Total 5753 - Legal - Professional Conduct</b> | <b>129,145.28</b> | <b>48,749.98</b> | <b>80,395.30</b> | <b>264.91%</b> |
| 5754 - Legal - Council Advice                    | 22,307.34         | 6,780.00         | 15,527.34        | 329.02%        |
| 5755 - General Legal                             | 6,516.71          | 3,954.50         | 2,562.21         | 164.79%        |
| 5757 - Legal - Executive Office                  | 14,222.75         | 4,500.00         | 9,722.75         | 316.06%        |
| <b>Total 5750 - Legal</b>                        | <b>108,803.67</b> | <b>95,920.48</b> | <b>12,883.19</b> | <b>113.43%</b> |

- Account 5756 – C&D Accrued Expenses increased the debit to the account by \$81,412 for a total credit of \$88,062 to the GL account. This lowers the overall expenses for legal costs for the Q3 period and lowers the accrued liabilities.
- Cash paid for legal costs between Q1 and Q3 totalled \$196,866.

The Statement of Operations shows all costs for complaints and discipline paid between Q1 and Q3, including costs paid related to cases accrued at the March 31, 2021. Table 4 demonstrates 73% of the budget for General Counsel (5760), Independent Legal Advice (5761), and Hearing Counsel (5762) has been spent by December 31, 2021.

Table 4 - Complaints and Discipline Budget Comparison between July and September 2021

| GL Account                         | PY Accrued Cases | Current Yr (CY)  | Total             | Budget (Annual)  | Variance CY to Budget Annual | \$               | %          |
|------------------------------------|------------------|------------------|-------------------|------------------|------------------------------|------------------|------------|
| <b>OB September 30, 2021</b>       | <b>60,542.17</b> | <b>42,322.12</b> | <b>102,864.29</b> | <b>71,000.00</b> | -                            | <b>28,677.88</b> | <b>60%</b> |
| 5760 - General Counsel             | 73.46            | 3,892.86         | 3,966.32          | 30,000.00        | -                            | 26,107.14        | 13%        |
| 5761 - Independent Legal Advice    | 508.50           | 5,610.45         | 6,118.95          | 31,000.00        | -                            | 25,389.55        | 18%        |
| 5762 - Hearing Counsel             | 1,083.37         | 275.44           | 1,358.81          | 10,000.00        | -                            | 9,724.56         | 3%         |
| 5763 - Court Proceedings & Appeals | -                | -                | -                 | -                | -                            | -                | 100%       |
| Sub Total Q2                       | 1,665.33         | 9,778.75         | 11,444.08         |                  |                              |                  |            |
| <b>Total</b>                       | <b>62,207.50</b> | <b>52,100.87</b> | <b>114,308.37</b> | <b>71,000.00</b> | -                            | <b>18,899.13</b> | <b>73%</b> |

### Statement of Financial Position Analysis:

Our statement of financial position remains strong at the end of Q3.

Total Current Assets equal \$4,305,510, long-term assets<sup>3</sup> (i.e. Long-term Investment) equal \$,3,954,759, and total Fixed Assets (net) equal \$551,435 for Total Assets of \$8,811,703,

<sup>3</sup> Long-term assets mature greater than 12 months. The College's current financial statements group investments together under Current Assets. This is done for ease of reading and understanding the full book value of the College's investments. Total Current Assets listed in the written report do not include Long-Term Investments (LTI). The current ratio calculation does not include the LTI.

Cash-on-hand decreased by \$1,456,151 to \$2,921,113 as of December 31, 2021 when compared to September 30, 2021.

Unrestricted net assets serve as the College's operational reserve, including net income for the period, and sits at \$4,703,296 or 7.7 months of operations as of December 31, 2021.

Investments have grown <1.0% over the prior year to \$5,226,968 when compared with December 31, 2020.

Figure 4 - Investment Activity October 2021 to December 2021

|               |                        |
|---------------|------------------------|
| Opening       | \$ 4,856,769.67        |
| Additions     | \$ -                   |
| Disposals     | \$ (199,378.29)        |
| <b>Ending</b> | <b>\$ 4,657,391.38</b> |
| FMV           | \$ 5,226,966.76        |
| Ending cash   | \$ -                   |
|               | <b>\$ 5,226,966.76</b> |

Figure 5 provides a summary of activity for the College's investment account. Two (2) investments matured during Q3 and were redeemed for \$199,378 (this includes interest earned upon redemption). This was used to purchase new mutual funds of \$262,107.

Total Liabilities for as of December 31, 2021 include Current Liabilities of \$2,354,658, and Long-term Liabilities of \$144,573 for a Total Liabilities of \$2,499,231. Total deferred revenue equals \$1,452,933, \$1,376,479 lower than the prior Q2 period as of September 30, 2021. Deferred revenue continues to decrease as revenue is recognized.

The College's equity includes unrestricted net assets of \$4,702,296 and net income of \$2,567 and represents 7.7 months of operating reserve. \$506,609 is invested in capital assets and restricted reserves total \$1,100,000. Total Equity equal \$6,312,472.

### Statement of Cash Flows

The College used \$1,436,891 of cash during Q3 for operations, ending the period on December 31, 2021, with \$8,136,572 of cash in the College's various operating bank and investment accounts (see Figure 6).

Figure 5 - Statement of Cash Flows as of December 31, 2021

| Item  | Amount        |
|---|---------------|
| Opening Balance Cash @ September 30, 2021 (includes investments)  | \$9,573,463   |
| Net Change in Cash between October 1, 2021, and December 31, 2021 | \$(1,436,891) |
| Closing Balance Cash @ December 31, 2021 (includes investments)   | \$8,136,572   |

## Financial Projections

Table 5 provides financial projections to March 31, 2022. Management is projecting higher revenues and lower expenses than budgeted at year end, March 31, 2022. Total revenue is projected to be close to the budget and equal \$6,215,890. Total expenses (excluding amortization) are projected to be 2.2% lower than budgeted and equal \$6,280,539. Net income is projected at a deficit of \$73,649 or an 83% improvement when compared to the approved budget.

*Table 5 - Financial Projections compared to Budget as of March 31, 2022*

| Item  | Projection       | Budget            | \$ Change         | % Change      |
|---|------------------|-------------------|-------------------|---------------|
|   | 22-Mar           | 22-Mar            |                   |               |
| <b>Revenues</b>                                     | \$6,215,890      | \$6,181,075       | \$34,815          | 0.56%         |
| <b>Expenses</b>                                     | \$6,089,744      | \$6,433,377       | <b>-\$343,633</b> | -5.34%        |
| <b>Net Operating Income</b>                         | \$126,146        | <b>-\$252,302</b> | \$378,448         | 150.00%       |
| <b>Less Amortization &amp; Depreciation</b>         | \$199,795        | \$173,023         | \$26,772          | 15.47%        |
| <b>Net Income (Excess of Expenses over Revenue)</b> | <b>-\$73,649</b> | <b>-\$425,325</b> | <b>\$351,676</b>  | <b>82.68%</b> |

The inability of PT residents to complete the PCE clinical exam is largest impact on the College's revenue from licenses and applications. Revenue from pro-rated Independent Practice Certificates is forecasted to be 71% less than budgeted with a forecasted amount of approximately \$56,000. This includes PPC holders who complete the Registration Committee exemption process over February and March 2022. Revenue from applications is forecasted to be 10% less than budgeted. In addition to the IPC pro-rated fees and the applications, PTs completing the registration committee exemption policy also pay \$800 to go through the exemption process and this will generate an additional \$221,600 in Q4.

### Appendices:

- Statement of Operations, Budget v Actual, April 2021 to December 2021
- Statement of Operations, Prior Year Comparison, April 2021 to December 2021
- Statement of Financial Position as of December 30, 2021, Prior Period and Prior Year comparison
- Statement of Operations, Forecast to March 31, 2022
- Statement of Operations, April 1, 2021 to December 31, 2021 – Variance Report

College of Physiotherapists of Ontario  
Profit & Loss Budget vs. Actual  
April through December 2021

|   | Apr - Dec 21        | Budget              | \$ Over Budget     | % of Budget    |
|---|---------------------|---------------------|--------------------|----------------|
| <b>Ordinary Income/Expense</b>              |                     |                     |                    |                |
| <b>Income</b>                               |                     |                     |                    |                |
| <b>4001 · Registration Fees</b>             |                     |                     |                    |                |
| 4011 · Independent Practice - \$575         | 4,163,208.59        | 4,195,631.25        | -32,422.66         | 99.23%         |
| 4012 · Independent Practice - ProRated      | 41,287.41           | 150,420.00          | -109,132.59        | 27.45%         |
| 4013 · Prof Corp Fees \$250                 | 77,500.00           | 76,500.00           | 1,000.00           | 101.31%        |
| 4014 · Provisional Practice Fees \$75       | 36,300.00           | 28,425.00           | 7,875.00           | 127.7%         |
| 4021 · Cross Border Fee \$100               | 0.00                | 0.00                | 0.00               | 0.0%           |
| 4007 · Registration fee credits             | -47,038.17          | -29,028.07          | -18,010.10         | 162.04%        |
| <b>Total 4001 · Registration Fees</b>       | <b>4,271,257.83</b> | <b>4,421,948.18</b> | <b>-150,690.35</b> | <b>96.59%</b>  |
| 4002 · Interest Income                      | 81,240.44           | 92,399.48           | -11,159.04         | 87.92%         |
| 4003 · Remediation Chargeback               | 0.00                | 0.00                | 0.00               | 0.0%           |
| 4010 · Miscellaneous Income                 | 1,885.00            | 0.00                | 1,885.00           | 100.0%         |
| <b>4008 · Admin Fees</b>                    |                     |                     |                    |                |
| 4015 · Application Fees \$100               | 71,600.00           | 40,000.00           | 31,600.00          | 179.0%         |
| 4016 · Letter of Prof Stand / NSF \$50      | 10,100.00           | 7,750.00            | 2,350.00           | 130.32%        |
| 4017 · Wall Certificates \$25               | 1,475.00            | 2,150.00            | -675.00            | 68.61%         |
| 4018 · Late Fees \$225                      | 2,700.00            | 4,725.00            | -2,025.00          | 57.14%         |
| 4019 · Prof Corp Application \$700          | 23,100.00           | 17,500.00           | 5,600.00           | 132.0%         |
| <b>Total 4008 · Admin Fees</b>              | <b>108,975.00</b>   | <b>72,125.00</b>    | <b>36,850.00</b>   | <b>151.09%</b> |
| <b>Total Income</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>-123,114.39</b> | <b>97.32%</b>  |
| <b>Gross Profit</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>-123,114.39</b> | <b>97.32%</b>  |
| <b>Expense</b>                              |                     |                     |                    |                |
| 5709 · Registration - Other                 | 3,361.75            |                     |                    |                |
| 5302 · Entry to Practice Review             | 0.00                | 0.00                | 0.00               | 0.0%           |
| <b>5000 · Committee Per Diem</b>            |                     |                     |                    |                |
| 5001 · Chairs meeting - per diem            | 0.00                | 3,060.00            | -3,060.00          | 0.0%           |
| 5002 · ICRC - per diem                      | 31,843.00           | 18,366.00           | 13,477.00          | 173.38%        |
| 5003 · Council - per diem                   | 31,888.00           | 48,029.00           | -16,141.00         | 66.39%         |
| 5005 · Discipline Committee - per diem      | 13,230.00           | 51,791.00           | -38,561.00         | 25.55%         |
| 5006 · Executive - per diem                 | 37,125.00           | 13,968.40           | 23,156.60          | 265.78%        |
| 5010 · Patient Relations - per diem         | 651.00              | 627.00              | 24.00              | 103.83%        |
| 5011 · QA Committee - per diem              | 4,521.50            | 16,128.00           | -11,606.50         | 28.04%         |
| 5012 · Registration Com. - per diem         | 3,072.00            | 5,151.00            | -2,079.00          | 59.64%         |
| 5017 · Finance Committee - per diem         | 2,110.00            | 9,776.00            | -7,666.00          | 21.58%         |
| <b>Total 5000 · Committee Per Diem</b>      | <b>124,440.50</b>   | <b>166,896.40</b>   | <b>-42,455.90</b>  | <b>74.56%</b>  |
| <b>5050 · Committee Reimbursed Expenses</b> |                     |                     |                    |                |
| 5051 · Chairs meeting - expenses            | 0.00                | 9,323.00            | -9,323.00          | 0.0%           |
| 5052 · ICRC - expenses                      | 3,229.33            | 1,530.00            | 1,699.33           | 211.07%        |
| 5053 · Council - expenses                   | 16,879.99           | 38,952.00           | -22,072.01         | 43.34%         |
| 5055 · Discipline Committee - expenses      | 0.00                | 0.00                | 0.00               | 0.0%           |
| 5056 · Executive Committee - expenses       | 10,488.31           | 4,971.00            | 5,517.31           | 210.99%        |
| 5062 · QA Committee - expenses              | 871.96              | 5,732.00            | -4,860.04          | 15.21%         |
| 5063 · Registration Comm. - expenses        | 0.00                | 0.00                | 0.00               | 0.0%           |

College of Physiotherapists of Ontario  
Profit & Loss Budget vs. Actual  
April through December 2021

|   | Apr - Dec 21      | Budget            | \$ Over Budget    | % of Budget    |
|---|-------------------|-------------------|-------------------|----------------|
| 5075 · Finance Committee - expenses               | -2,620.49         | 250.00            | -2,870.49         | -1,048.2%      |
| <b>Total 5050 · Committee Reimbursed Expenses</b> | <b>28,849.10</b>  | <b>60,758.00</b>  | <b>-31,908.90</b> | <b>47.48%</b>  |
| <b>5100 · Information Management</b>              |                   |                   |                   |                |
| 5101 · IT Hardware                                | 8,124.26          | 6,757.19          | 1,367.07          | 120.23%        |
| 5102 · Software                                   | 65,318.72         | 69,739.59         | -4,420.87         | 93.66%         |
| 5103 · IT Maintenance                             | 56,256.54         | 82,702.44         | -26,445.90        | 68.02%         |
| 5104 · IT Database                                | 65,363.53         | 82,034.61         | -16,671.08        | 79.68%         |
| 5105 · Information Management Strategy            | 0.00              | 0.00              | 0.00              | 0.0%           |
| <b>Total 5100 · Information Management</b>        | <b>195,063.05</b> | <b>241,233.83</b> | <b>-46,170.78</b> | <b>80.86%</b>  |
| 5200 · Insurance                                  | 9,632.52          | 11,068.04         | -1,435.52         | 87.03%         |
| 5300 · Networking                                 | 113.80            | 0.00              | 113.80            | 100.0%         |
| 5301 · Conferences and Travel                     | 4,802.50          | 15,000.00         | -10,197.50        | 32.02%         |
| <b>5400 · Office and General</b>                  |                   |                   |                   |                |
| 5402 · Bank & service charges                     | 18,085.16         | 27,364.50         | -9,279.34         | 66.09%         |
| 5403 · Maintenance & repairs                      | 1,876.41          | 3,640.00          | -1,763.59         | 51.55%         |
| 5405 · Memberships & publications                 | 20,571.96         | 24,757.32         | -4,185.36         | 83.09%         |
| 5406 · CAPR Fees                                  | 161,489.04        | 162,550.47        | -1,061.43         | 99.35%         |
| 5407 · Office & kitchen supplies                  | 2,044.11          | 7,800.00          | -5,755.89         | 26.21%         |
| 5408 · Postage & courier                          | 5,801.56          | 3,276.65          | 2,524.91          | 177.06%        |
| 5409 · Rent                                       | 357,076.77        | 360,042.17        | -2,965.40         | 99.18%         |
| 5411 · Printing, Filing & Stationery              | 19,781.36         | 17,782.18         | 1,999.18          | 111.24%        |
| 5412 · Telephone & Internet                       | 26,286.94         | 27,513.67         | -1,226.73         | 95.54%         |
| 5413 · Bad Debt                                   | 5,652.25          | 7,750.00          | -2,097.75         | 72.93%         |
| <b>Total 5400 · Office and General</b>            | <b>618,665.56</b> | <b>642,476.96</b> | <b>-23,811.40</b> | <b>96.29%</b>  |
| <b>5500 · Regulatory Effectiveness</b>            |                   |                   |                   |                |
| 5502 · Strategic Operations                       | 27,459.00         | 19,944.00         | 7,515.00          | 137.68%        |
| 5503 · Council Education                          | 38,698.41         | 15,212.00         | 23,486.41         | 254.39%        |
| 5504 · Elections                                  | 3,300.00          | 3,550.00          | -250.00           | 92.96%         |
| 5505 · Policy Development                         | 41,831.54         | 96,148.00         | -54,316.46        | 43.51%         |
| <b>Total 5500 · Regulatory Effectiveness</b>      | <b>111,288.95</b> | <b>134,854.00</b> | <b>-23,565.05</b> | <b>82.53%</b>  |
| <b>5600 · Communications</b>                      |                   |                   |                   |                |
| 5605 · French Language Services                   | 16,988.35         | 14,600.00         | 2,388.35          | 116.36%        |
| 5620 · Print Communication                        | 573.53            | 370.00            | 203.53            | 155.01%        |
| 5621 · Online Communication                       | 46,324.53         | 81,250.00         | -34,925.47        | 57.02%         |
| 5622 · In-Person Communication                    | -273.97           | 0.00              | -273.97           | 100.0%         |
| <b>Total 5600 · Communications</b>                | <b>63,612.44</b>  | <b>96,220.00</b>  | <b>-32,607.56</b> | <b>66.11%</b>  |
| <b>5700 · Professional fees</b>                   |                   |                   |                   |                |
| 4004 · Cost recovery from cost orders             | -68,500.00        | -27,064.74        | -41,435.26        | 253.1%         |
| 5701 · Audit                                      | 80.00             | 0.00              | 80.00             | 100.0%         |
| 5702 · Hearing Expenses                           | 1,584.26          | 4,377.12          | -2,792.86         | 36.19%         |
| <b>Total 5704 · Investigation Services</b>        | <b>63,894.07</b>  | <b>50,888.00</b>  | <b>13,006.07</b>  | <b>125.56%</b> |
| 5705 · Professional services - Other              | 18,063.73         | 52,963.00         | -34,899.27        | 34.11%         |
| 5706 · Investigator travel                        | 0.00              | 300.00            | -300.00           | 0.0%           |
| 5707 · Decision writing                           | 10,293.00         | 1,158.00          | 9,135.00          | 888.86%        |

College of Physiotherapists of Ontario  
**Profit & Loss Budget vs. Actual**  
April through December 2021

|  | <u>Apr - Dec 21</u> | <u>Budget</u>       | <u>\$ Over Budget</u> | <u>% of Budget</u> |
|--|---------------------|---------------------|-----------------------|--------------------|
| 5708 · Peer / Expert opinions          | 8,865.00            | 18,271.50           | -9,406.50             | 48.52%             |
| 5703 · Communications Consultant       | 23,984.25           |                     |                       |                    |
| <b>Total 5750 · Legal</b>              | <b>108,803.67</b>   | <b>95,920.48</b>    | <b>12,883.19</b>      | <b>113.43%</b>     |
| <b>Total 5700 · Professional fees</b>  | <b>167,067.98</b>   | <b>196,813.36</b>   | <b>-29,745.38</b>     | <b>84.89%</b>      |
| <b>5800 · Programs</b>                 |                     |                     |                       |                    |
| <b>Total 5810 · Quality Program</b>    | <b>84,746.00</b>    | <b>133,527.00</b>   | <b>-48,781.00</b>     | <b>63.47%</b>      |
| 5802 · Jurisprudence                   | 27,707.43           | 22,550.00           | 5,157.43              | 122.87%            |
| <b>Total 5880 · Remediation</b>        | <b>9,286.15</b>     | <b>6,169.49</b>     | <b>3,116.66</b>       | <b>150.52%</b>     |
| 4022 · Recovery of Therapy Costs       | -3,000.00           | -1,500.00           | -1,500.00             | 200.0%             |
| 5890 · Therapy and Counselling Fund    | 12,453.75           | 10,383.33           | 2,070.42              | 119.94%            |
| <b>Total 5800 · Programs</b>           | <b>131,193.33</b>   | <b>171,129.82</b>   | <b>-39,936.49</b>     | <b>76.66%</b>      |
| <b>5900 · Staffing</b>                 |                     |                     |                       |                    |
| 5901 · Salaries                        | 2,418,174.66        | 2,409,245.02        | 8,929.64              | 100.37%            |
| 5902 · Employer Benefits               | 88,182.11           | 86,665.38           | 1,516.73              | 101.75%            |
| 5903 · Employer RRSP Contribution      | 121,162.58          | 119,360.81          | 1,801.77              | 101.51%            |
| 5904 · Consultant fees                 | 47,883.79           | 44,201.34           | 3,682.45              | 108.33%            |
| 5905 · Staff Development               | 20,783.69           | 43,500.00           | -22,716.31            | 47.78%             |
| 5906 · Recruitment                     | 3,207.51            | 2,335.43            | 872.08                | 137.34%            |
| 5907 · Staff Recognition               | 12,351.07           | 12,687.50           | -336.43               | 97.35%             |
| 5908 · Registrar & Requested Education | 0.00                | 225.00              | -225.00               | 0.0%               |
| 5911 · CPP - Canadian Pension Plan     | 64,295.14           | 60,731.24           | 3,563.90              | 105.87%            |
| 5912 · EI - Employment Insurance       | 21,680.24           | 22,209.24           | -529.00               | 97.62%             |
| 5913 · EHT - Employer Health Tax       | 49,601.86           | 50,264.15           | -662.29               | 98.68%             |
| <b>Total 5900 · Staffing</b>           | <b>2,847,322.65</b> | <b>2,851,425.11</b> | <b>-4,102.46</b>      | <b>99.86%</b>      |
| 6001 · Amortization                    | 155,376.49          | 128,603.64          | 26,772.85             | 120.82%            |
| <b>Total Expense</b>                   | <b>4,460,790.62</b> | <b>4,716,479.16</b> | <b>-255,688.54</b>    | <b>94.58%</b>      |
| <b>Net Ordinary Income</b>             | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>132,574.15</b>     | <b>-1.98%</b>      |
| <b>Net Income</b>                      | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>132,574.15</b>     | <b>-1.98%</b>      |

College of Physiotherapists of Ontario  
Profit & Loss Budget vs. Actual  
April through December 2021

|   | Apr - Dec 21        | Budget              | \$ Over Budget     | % of Budget    |
|---|---------------------|---------------------|--------------------|----------------|
| <b>Ordinary Income/Expense</b>              |                     |                     |                    |                |
| <b>Income</b>                               |                     |                     |                    |                |
| <b>4001 · Registration Fees</b>             |                     |                     |                    |                |
| 4011 · Independent Practice - \$575         | 4,163,208.59        | 4,195,631.25        | -32,422.66         | 99.23%         |
| 4012 · Independent Practice - ProRated      | 41,287.41           | 150,420.00          | -109,132.59        | 27.45%         |
| 4013 · Prof Corp Fees \$250                 | 77,500.00           | 76,500.00           | 1,000.00           | 101.31%        |
| 4014 · Provisional Practice Fees \$75       | 36,300.00           | 28,425.00           | 7,875.00           | 127.7%         |
| 4021 · Cross Border Fee \$100               | 0.00                | 0.00                | 0.00               | 0.0%           |
| 4007 · Registration fee credits             | -47,038.17          | -29,028.07          | -18,010.10         | 162.04%        |
| <b>Total 4001 · Registration Fees</b>       | <b>4,271,257.83</b> | <b>4,421,948.18</b> | <b>-150,690.35</b> | <b>96.59%</b>  |
| 4002 · Interest Income                      | 81,240.44           | 92,399.48           | -11,159.04         | 87.92%         |
| 4003 · Remediation Chargeback               | 0.00                | 0.00                | 0.00               | 0.0%           |
| 4010 · Miscellaneous Income                 | 1,885.00            | 0.00                | 1,885.00           | 100.0%         |
| <b>4008 · Admin Fees</b>                    |                     |                     |                    |                |
| 4015 · Application Fees \$100               | 71,600.00           | 40,000.00           | 31,600.00          | 179.0%         |
| 4016 · Letter of Prof Stand / NSF \$50      | 10,100.00           | 7,750.00            | 2,350.00           | 130.32%        |
| 4017 · Wall Certificates \$25               | 1,475.00            | 2,150.00            | -675.00            | 68.61%         |
| 4018 · Late Fees \$225                      | 2,700.00            | 4,725.00            | -2,025.00          | 57.14%         |
| 4019 · Prof Corp Application \$700          | 23,100.00           | 17,500.00           | 5,600.00           | 132.0%         |
| <b>Total 4008 · Admin Fees</b>              | <b>108,975.00</b>   | <b>72,125.00</b>    | <b>36,850.00</b>   | <b>151.09%</b> |
| <b>Total Income</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>-123,114.39</b> | <b>97.32%</b>  |
| <b>Gross Profit</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>-123,114.39</b> | <b>97.32%</b>  |
| <b>Expense</b>                              |                     |                     |                    |                |
| 5709 · Registration - Other                 | 3,361.75            |                     |                    |                |
| 5302 · Entry to Practice Review             | 0.00                | 0.00                | 0.00               | 0.0%           |
| <b>5000 · Committee Per Diem</b>            |                     |                     |                    |                |
| 5001 · Chairs meeting - per diem            | 0.00                | 3,060.00            | -3,060.00          | 0.0%           |
| 5002 · ICRC - per diem                      | 31,843.00           | 18,366.00           | 13,477.00          | 173.38%        |
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| <b>5050 · Committee Reimbursed Expenses</b> |                     |                     |                    |                |
| 5051 · Chairs meeting - expenses            | 0.00                | 9,323.00            | -9,323.00          | 0.0%           |
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| 5063 · Registration Comm. - expenses        | 0.00                | 0.00                | 0.00               | 0.0%           |

College of Physiotherapists of Ontario  
Profit & Loss Budget vs. Actual  
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| 5075 · Finance Committee - expenses               | -2,620.49         | 250.00            | -2,870.49         | -1,048.2%      |
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| <b>5100 · Information Management</b>              |                   |                   |                   |                |
| 5101 · IT Hardware                                | 8,124.26          | 6,757.19          | 1,367.07          | 120.23%        |
| 5102 · Software                                   | 65,318.72         | 69,739.59         | -4,420.87         | 93.66%         |
| 5103 · IT Maintenance                             | 56,256.54         | 82,702.44         | -26,445.90        | 68.02%         |
| 5104 · IT Database                                | 65,363.53         | 82,034.61         | -16,671.08        | 79.68%         |
| 5105 · Information Management Strategy            | 0.00              | 0.00              | 0.00              | 0.0%           |
| <b>Total 5100 · Information Management</b>        | <b>195,063.05</b> | <b>241,233.83</b> | <b>-46,170.78</b> | <b>80.86%</b>  |
| 5200 · Insurance                                  | 9,632.52          | 11,068.04         | -1,435.52         | 87.03%         |
| 5300 · Networking                                 | 113.80            | 0.00              | 113.80            | 100.0%         |
| 5301 · Conferences and Travel                     | 4,802.50          | 15,000.00         | -10,197.50        | 32.02%         |
| <b>5400 · Office and General</b>                  |                   |                   |                   |                |
| 5402 · Bank & service charges                     | 18,085.16         | 27,364.50         | -9,279.34         | 66.09%         |
| 5403 · Maintenance & repairs                      | 1,876.41          | 3,640.00          | -1,763.59         | 51.55%         |
| 5405 · Memberships & publications                 | 20,571.96         | 24,757.32         | -4,185.36         | 83.09%         |
| 5406 · CAPR Fees                                  | 161,489.04        | 162,550.47        | -1,061.43         | 99.35%         |
| 5407 · Office & kitchen supplies                  | 2,044.11          | 7,800.00          | -5,755.89         | 26.21%         |
| 5408 · Postage & courier                          | 5,801.56          | 3,276.65          | 2,524.91          | 177.06%        |
| 5409 · Rent                                       | 357,076.77        | 360,042.17        | -2,965.40         | 99.18%         |
| 5411 · Printing, Filing & Stationery              | 19,781.36         | 17,782.18         | 1,999.18          | 111.24%        |
| 5412 · Telephone & Internet                       | 26,286.94         | 27,513.67         | -1,226.73         | 95.54%         |
| 5413 · Bad Debt                                   | 5,652.25          | 7,750.00          | -2,097.75         | 72.93%         |
| <b>Total 5400 · Office and General</b>            | <b>618,665.56</b> | <b>642,476.96</b> | <b>-23,811.40</b> | <b>96.29%</b>  |
| <b>5500 · Regulatory Effectiveness</b>            |                   |                   |                   |                |
| 5502 · Strategic Operations                       | 27,459.00         | 19,944.00         | 7,515.00          | 137.68%        |
| 5503 · Council Education                          | 38,698.41         | 15,212.00         | 23,486.41         | 254.39%        |
| 5504 · Elections                                  | 3,300.00          | 3,550.00          | -250.00           | 92.96%         |
| 5505 · Policy Development                         | 41,831.54         | 96,148.00         | -54,316.46        | 43.51%         |
| <b>Total 5500 · Regulatory Effectiveness</b>      | <b>111,288.95</b> | <b>134,854.00</b> | <b>-23,565.05</b> | <b>82.53%</b>  |
| <b>5600 · Communications</b>                      |                   |                   |                   |                |
| 5605 · French Language Services                   | 16,988.35         | 14,600.00         | 2,388.35          | 116.36%        |
| 5620 · Print Communication                        | 573.53            | 370.00            | 203.53            | 155.01%        |
| 5621 · Online Communication                       | 46,324.53         | 81,250.00         | -34,925.47        | 57.02%         |
| 5622 · In-Person Communication                    | -273.97           | 0.00              | -273.97           | 100.0%         |
| <b>Total 5600 · Communications</b>                | <b>63,612.44</b>  | <b>96,220.00</b>  | <b>-32,607.56</b> | <b>66.11%</b>  |
| <b>5700 · Professional fees</b>                   |                   |                   |                   |                |
| 4004 · Cost recovery from cost orders             | -68,500.00        | -27,064.74        | -41,435.26        | 253.1%         |
| 5701 · Audit                                      | 80.00             | 0.00              | 80.00             | 100.0%         |
| 5702 · Hearing Expenses                           | 1,584.26          | 4,377.12          | -2,792.86         | 36.19%         |
| <b>Total 5704 · Investigation Services</b>        | <b>63,894.07</b>  | <b>50,888.00</b>  | <b>13,006.07</b>  | <b>125.56%</b> |
| 5705 · Professional services - Other              | 18,063.73         | 52,963.00         | -34,899.27        | 34.11%         |
| 5706 · Investigator travel                        | 0.00              | 300.00            | -300.00           | 0.0%           |
| 5707 · Decision writing                           | 10,293.00         | 1,158.00          | 9,135.00          | 888.86%        |

College of Physiotherapists of Ontario  
Profit & Loss Budget vs. Actual  
April through December 2021

|  | Apr - Dec 21        | Budget              | \$ Over Budget     | % of Budget    |
|--|---------------------|---------------------|--------------------|----------------|
| 5708 · Peer / Expert opinions          | 8,865.00            | 18,271.50           | -9,406.50          | 48.52%         |
| 5703 · Communications Consultant       | 23,984.25           |                     |                    |                |
| <b>Total 5750 · Legal</b>              | <b>108,803.67</b>   | <b>95,920.48</b>    | <b>12,883.19</b>   | <b>113.43%</b> |
| <b>Total 5700 · Professional fees</b>  | <b>167,067.98</b>   | <b>196,813.36</b>   | <b>-29,745.38</b>  | <b>84.89%</b>  |
| <b>5800 · Programs</b>                 |                     |                     |                    |                |
| <b>Total 5810 · Quality Program</b>    | <b>84,746.00</b>    | <b>133,527.00</b>   | <b>-48,781.00</b>  | <b>63.47%</b>  |
| 5802 · Jurisprudence                   | 27,707.43           | 22,550.00           | 5,157.43           | 122.87%        |
| <b>Total 5880 · Remediation</b>        | <b>9,286.15</b>     | <b>6,169.49</b>     | <b>3,116.66</b>    | <b>150.52%</b> |
| 4022 · Recovery of Therapy Costs       | -3,000.00           | -1,500.00           | -1,500.00          | 200.0%         |
| 5890 · Therapy and Counselling Fund    | 12,453.75           | 10,383.33           | 2,070.42           | 119.94%        |
| <b>Total 5800 · Programs</b>           | <b>131,193.33</b>   | <b>171,129.82</b>   | <b>-39,936.49</b>  | <b>76.66%</b>  |
| <b>5900 · Staffing</b>                 |                     |                     |                    |                |
| 5901 · Salaries                        | 2,418,174.66        | 2,409,245.02        | 8,929.64           | 100.37%        |
| 5902 · Employer Benefits               | 88,182.11           | 86,665.38           | 1,516.73           | 101.75%        |
| 5903 · Employer RRSP Contribution      | 121,162.58          | 119,360.81          | 1,801.77           | 101.51%        |
| 5904 · Consultant fees                 | 47,883.79           | 44,201.34           | 3,682.45           | 108.33%        |
| 5905 · Staff Development               | 20,783.69           | 43,500.00           | -22,716.31         | 47.78%         |
| 5906 · Recruitment                     | 3,207.51            | 2,335.43            | 872.08             | 137.34%        |
| 5907 · Staff Recognition               | 12,351.07           | 12,687.50           | -336.43            | 97.35%         |
| 5908 · Registrar & Requested Education | 0.00                | 225.00              | -225.00            | 0.0%           |
| 5911 · CPP - Canadian Pension Plan     | 64,295.14           | 60,731.24           | 3,563.90           | 105.87%        |
| 5912 · EI - Employment Insurance       | 21,680.24           | 22,209.24           | -529.00            | 97.62%         |
| 5913 · EHT - Employer Health Tax       | 49,601.86           | 50,264.15           | -662.29            | 98.68%         |
| <b>Total 5900 · Staffing</b>           | <b>2,847,322.65</b> | <b>2,851,425.11</b> | <b>-4,102.46</b>   | <b>99.86%</b>  |
| 6001 · Amortization                    | 155,376.49          | 128,603.64          | 26,772.85          | 120.82%        |
| <b>Total Expense</b>                   | <b>4,460,790.62</b> | <b>4,716,479.16</b> | <b>-255,688.54</b> | <b>94.58%</b>  |
| <b>Net Ordinary Income</b>             | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>132,574.15</b>  | <b>-1.98%</b>  |
| <b>Net Income</b>                      | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>132,574.15</b>  | <b>-1.98%</b>  |

College of Physiotherapists of Ontario  
Profit & Loss Prev Year Comparison  
April through December 2021

|   | Apr - Dec 21        | Apr - Dec 20        | \$ Change          | % Change       | Apr - Dec 21        |
|---|---------------------|---------------------|--------------------|----------------|---------------------|
| <b>Ordinary Income/Expense</b>                    |                     |                     |                    |                |                     |
| <b>Income</b>                                     |                     |                     |                    |                |                     |
| <b>4001 · Registration Fees</b>                   |                     |                     |                    |                |                     |
| 4011 · Independent Practice - \$575               | 4,163,208.59        | 3,905,154.95        | 258,053.64         | 6.61%          | 4,163,208.59        |
| 4012 · Independent Practice - ProRated            | 41,287.41           | 29,379.16           | 11,908.25          | 40.53%         | 41,287.41           |
| 4013 · Prof Corp Fees \$250                       | 77,500.00           | 83,750.00           | -6,250.00          | -7.46%         | 77,500.00           |
| 4014 · Provisional Practice Fees \$75             | 36,300.00           | 30,075.00           | 6,225.00           | 20.7%          | 36,300.00           |
| 4021 · Cross Border Fee \$100                     | 0.00                | 600.00              | -600.00            | -100.0%        | 0.00                |
| 4007 · Registration fee credits                   | -47,038.17          | -29,601.82          | -17,436.35         | -58.9%         | -47,038.17          |
| <b>Total 4001 · Registration Fees</b>             | <b>4,271,257.83</b> | <b>4,019,357.29</b> | <b>251,900.54</b>  | <b>6.27%</b>   | <b>4,271,257.83</b> |
| 4002 · Interest Income                            | 81,240.44           | 93,182.15           | -11,941.71         | -12.82%        | 81,240.44           |
| 4010 · Miscellaneous Income                       | 1,885.00            | 0.00                | 1,885.00           | 100.0%         | 1,885.00            |
| <b>4008 · Admin Fees</b>                          |                     |                     |                    |                |                     |
| 4015 · Application Fees \$100                     | 71,600.00           | 56,900.00           | 14,700.00          | 25.84%         | 71,600.00           |
| 4016 · Letter of Prof Stand / NSF \$50            | 10,100.00           | 7,550.00            | 2,550.00           | 33.78%         | 10,100.00           |
| 4017 · Wall Certificates \$25                     | 1,475.00            | 1,750.00            | -275.00            | -15.71%        | 1,475.00            |
| 4018 · Late Fees \$225                            | 2,700.00            | 3,150.00            | -450.00            | -14.29%        | 2,700.00            |
| 4019 · Prof Corp Application \$700                | 23,100.00           | 23,800.00           | -700.00            | -2.94%         | 23,100.00           |
| <b>Total 4008 · Admin Fees</b>                    | <b>108,975.00</b>   | <b>93,150.00</b>    | <b>15,825.00</b>   | <b>16.99%</b>  | <b>108,975.00</b>   |
| <b>Total Income</b>                               | <b>4,463,358.27</b> | <b>4,205,689.44</b> | <b>257,668.83</b>  | <b>6.13%</b>   | <b>4,463,358.27</b> |
| <b>Gross Profit</b>                               | <b>4,463,358.27</b> | <b>4,205,689.44</b> | <b>257,668.83</b>  | <b>6.13%</b>   | <b>4,463,358.27</b> |
| <b>Expense</b>                                    |                     |                     |                    |                |                     |
| 5709 · Registration - Other                       | 3,361.75            | 4,562.38            | -1,200.63          | -26.32%        | 3,361.75            |
| <b>5000 · Committee Per Diem</b>                  |                     |                     |                    |                |                     |
| 5001 · Chairs meeting - per diem                  | 0.00                | 0.00                | 0.00               | 0.0%           | 0.00                |
| 5002 · ICRC - per diem                            | 31,843.00           | 9,356.00            | 22,487.00          | 240.35%        | 31,843.00           |
| 5003 · Council - per diem                         | 31,888.00           | 19,822.00           | 12,066.00          | 60.87%         | 31,888.00           |
| 5005 · Discipline Committee - per diem            | 13,230.00           | 7,853.00            | 5,377.00           | 68.47%         | 13,230.00           |
| 5006 · Executive - per diem                       | 37,125.00           | 16,768.42           | 20,356.58          | 121.4%         | 37,125.00           |
| 5010 · Patient Relations - per diem               | 651.00              | -94.00              | 745.00             | 792.55%        | 651.00              |
| 5011 · QA Committee - per diem                    | 4,521.50            | 14,558.50           | -10,037.00         | -68.94%        | 4,521.50            |
| 5012 · Registration Com. - per diem               | 3,072.00            | 1,585.00            | 1,487.00           | 93.82%         | 3,072.00            |
| 5017 · Finance Committee - per diem               | 2,110.00            | 1,035.00            | 1,075.00           | 103.87%        | 2,110.00            |
| <b>Total 5000 · Committee Per Diem</b>            | <b>124,440.50</b>   | <b>70,883.92</b>    | <b>53,556.58</b>   | <b>75.56%</b>  | <b>124,440.50</b>   |
| <b>5050 · Committee Reimbursed Expenses</b>       |                     |                     |                    |                |                     |
| 5051 · Chairs meeting - expenses                  | 0.00                | 0.00                | 0.00               | 0.0%           | 0.00                |
| 5052 · ICRC - expenses                            | 3,229.33            | 6,869.71            | -3,640.38          | -52.99%        | 3,229.33            |
| 5053 · Council - expenses                         | 16,879.99           | 13,527.31           | 3,352.68           | 24.79%         | 16,879.99           |
| 5055 · Discipline Committee - expenses            | 0.00                | 3,095.87            | -3,095.87          | -100.0%        | 0.00                |
| 5056 · Executive Committee - expenses             | 10,488.31           | 2,864.19            | 7,624.12           | 266.19%        | 10,488.31           |
| 5062 · QA Committee - expenses                    | 871.96              | 502.41              | 369.55             | 73.56%         | 871.96              |
| 5063 · Registration Comm. - expenses              | 0.00                | 78.40               | -78.40             | -100.0%        | 0.00                |
| 5075 · Finance Committee - expenses               | -2,620.49           | 557.38              | -3,177.87          | -570.14%       | -2,620.49           |
| <b>Total 5050 · Committee Reimbursed Expenses</b> | <b>28,849.10</b>    | <b>27,495.27</b>    | <b>1,353.83</b>    | <b>4.92%</b>   | <b>28,849.10</b>    |
| <b>5100 · Information Management</b>              |                     |                     |                    |                |                     |
| 5101 · IT Hardware                                | 8,124.26            | 26,657.60           | -18,533.34         | -69.52%        | 8,124.26            |
| 5102 · Software                                   | 65,318.72           | 39,590.74           | 25,727.98          | 64.99%         | 65,318.72           |
| 5103 · IT Maintenance                             | 56,256.54           | 56,794.19           | -537.65            | -0.95%         | 56,256.54           |
| 5104 · IT Database                                | 65,363.53           | 233,586.71          | -168,223.18        | -72.02%        | 65,363.53           |
| <b>Total 5100 · Information Management</b>        | <b>195,063.05</b>   | <b>356,629.24</b>   | <b>-161,566.19</b> | <b>-45.3%</b>  | <b>195,063.05</b>   |
| 5200 · Insurance                                  | 9,632.52            | 8,991.00            | 641.52             | 7.14%          | 9,632.52            |
| 5300 · Networking                                 | 113.80              | 194.02              | -80.22             | -41.35%        | 113.80              |
| 5301 · Conferences and Travel                     | 4,802.50            | 0.00                | 4,802.50           | 100.0%         | 4,802.50            |
| <b>5400 · Office and General</b>                  |                     |                     |                    |                |                     |
| 5402 · Bank & service charges                     | 18,085.16           | 62,242.28           | -44,157.12         | -70.94%        | 18,085.16           |
| 5403 · Maintenance & repairs                      | 1,876.41            | 1,929.24            | -52.83             | -2.74%         | 1,876.41            |
| 5405 · Memberships & publications                 | 20,571.96           | 17,577.50           | 2,994.46           | 17.04%         | 20,571.96           |
| 5406 · CAPR Fees                                  | 161,489.04          | 157,815.99          | 3,673.05           | 2.33%          | 161,489.04          |
| 5407 · Office & kitchen supplies                  | 2,044.11            | 4,010.57            | -1,966.46          | -49.03%        | 2,044.11            |
| 5408 · Postage & courier                          | 5,801.56            | 7,032.50            | -1,230.94          | -17.5%         | 5,801.56            |
| 5409 · Rent                                       | 357,076.77          | 347,767.85          | 9,308.92           | 2.68%          | 357,076.77          |
| 5411 · Printing, Filing & Stationery              | 19,781.36           | 33,186.73           | -13,405.37         | -40.39%        | 19,781.36           |
| 5412 · Telephone & Internet                       | 26,286.94           | 23,527.21           | 2,759.73           | 11.73%         | 26,286.94           |
| 5413 · Bad Debt                                   | 5,652.25            | -1,667.75           | 7,320.00           | 438.92%        | 5,652.25            |
| <b>Total 5400 · Office and General</b>            | <b>618,665.56</b>   | <b>653,422.12</b>   | <b>-34,756.56</b>  | <b>-5.32%</b>  | <b>618,665.56</b>   |
| <b>5500 · Regulatory Effectiveness</b>            |                     |                     |                    |                |                     |
| 5502 · Strategic Operations                       | 27,459.00           | 0.00                | 27,459.00          | 100.0%         | 27,459.00           |
| 5503 · Council Education                          | 38,698.41           | 14,670.18           | 24,028.23          | 163.79%        | 38,698.41           |
| 5504 · Elections                                  | 3,300.00            | 3,450.00            | -150.00            | -4.35%         | 3,300.00            |
| 5505 · Policy Development                         | 41,831.54           | 15,103.42           | 26,728.12          | 176.97%        | 41,831.54           |
| <b>Total 5500 · Regulatory Effectiveness</b>      | <b>111,288.95</b>   | <b>33,223.60</b>    | <b>78,065.35</b>   | <b>234.97%</b> | <b>111,288.95</b>   |
| <b>5600 · Communications</b>                      |                     |                     |                    |                |                     |
| 5605 · French Language Services                   | 16,988.35           | 1,522.96            | 15,465.39          | 1,015.48%      | 16,988.35           |
| 5620 · Print Communication                        | 573.53              | 2,045.27            | -1,471.74          | -71.96%        | 573.53              |
| 5621 · Online Communication                       | 46,324.53           | 67,250.67           | -20,926.14         | -31.12%        | 46,324.53           |
| 5622 · In-Person Communication                    | -273.97             | 0.00                | -273.97            | -100.0%        | -273.97             |
| <b>Total 5600 · Communications</b>                | <b>63,612.44</b>    | <b>70,818.90</b>    | <b>-7,206.46</b>   | <b>-10.18%</b> | <b>63,612.44</b>    |
| <b>5700 · Professional fees</b>                   |                     |                     |                    |                |                     |
| 4004 · Cost recovery from cost orders             | -68,500.00          | -48,774.96          | -19,725.04         | -40.44%        | -68,500.00          |
| 5701 · Audit                                      | 80.00               | -80.00              | 160.00             | 200.0%         | 80.00               |
| 5702 · Hearing Expenses                           | 1,584.26            | 944.68              | 639.58             | 67.7%          | 1,584.26            |
| <b>5704 · Investigation Services</b>              |                     |                     |                    |                |                     |
| 5711 · External Investigators                     | 51,974.92           | 32,769.38           | 19,205.54          | 58.61%         | 51,974.92           |
| 5712 · PC - Chart Review                          | 9,290.24            | 16,294.15           | -7,003.91          | -42.98%        | 9,290.24            |
| 5714 · Fees to Secure Records                     | 120.59              | 170.11              | -49.52             | -29.11%        | 120.59              |
| 5716 · Transcripts                                | 2,508.32            | 667.27              | 1,841.05           | 275.91%        | 2,508.32            |
| <b>Total 5704 · Investigation Services</b>        | <b>63,894.07</b>    | <b>49,900.91</b>    | <b>13,993.16</b>   | <b>28.04%</b>  | <b>63,894.07</b>    |

College of Physiotherapists of Ontario  
Profit & Loss Prev Year Comparison  
April through December 2021

|  | Apr - Dec 21        | Apr - Dec 20        | \$ Change         | % Change        | Apr - Dec 21        |
|--|---------------------|---------------------|-------------------|-----------------|---------------------|
| 5705 · Professional services - Other             | 18,063.73           | 6,299.75            | 11,763.98         | 186.74%         | 18,063.73           |
| 5707 · Decision writing                          | 10,293.00           | 6,063.46            | 4,229.54          | 69.76%          | 10,293.00           |
| 5708 · Peer / Expert opinions                    | 8,865.00            | 2,508.60            | 6,356.40          | 253.38%         | 8,865.00            |
| 5703 · Communications Consultant                 | 23,984.25           | 0.00                | 23,984.25         | 100.0%          | 23,984.25           |
| <b>5750 · Legal</b>                              |                     |                     |                   |                 |                     |
| 5756 · C & D Accrual Expense                     | -88,061.96          | 0.00                | -88,061.96        | -100.0%         | -88,061.96          |
| 5751 · Legal - QA                                | 1,152.60            | 17,808.80           | -16,656.20        | -93.53%         | 1,152.60            |
| 5752 · Legal - Registration                      | 23,520.95           | 18,950.11           | 4,570.84          | 24.12%          | 23,520.95           |
| <b>5753 · Legal - Professional Conduct</b>       |                     |                     |                   |                 |                     |
| 5760 · General Counsel                           | 44,183.16           | 28,801.02           | 15,382.14         | 53.41%          | 44,183.16           |
| 5761 · Independent Legal Advice                  | 30,927.53           | 34,284.22           | -3,356.69         | -9.79%          | 30,927.53           |
| 5762 · Hearing Counsel                           | 39,197.68           | 44,038.66           | -4,840.98         | -10.99%         | 39,197.68           |
| 5763 · Court Proceedings & Appeals               | 14,836.91           | 12,440.35           | 2,396.56          | 19.26%          | 14,836.91           |
| <b>Total 5753 · Legal - Professional Conduct</b> | <b>129,145.28</b>   | <b>119,564.25</b>   | <b>9,581.03</b>   | <b>8.01%</b>    | <b>129,145.28</b>   |
| 5754 · Legal - Council Advice                    | 22,307.34           | 5,375.99            | 16,931.35         | 314.94%         | 22,307.34           |
| 5755 · General Legal                             | 6,516.71            | 6,590.17            | -73.46            | -1.12%          | 6,516.71            |
| 5757 · Legal - Executive Office                  | 14,222.75           | 6,541.33            | 7,681.42          | 117.43%         | 14,222.75           |
| <b>Total 5750 · Legal</b>                        | <b>108,803.67</b>   | <b>174,830.65</b>   | <b>-66,026.98</b> | <b>-37.77%</b>  | <b>108,803.67</b>   |
| <b>Total 5700 · Professional fees</b>            | <b>167,067.98</b>   | <b>191,693.09</b>   | <b>-24,625.11</b> | <b>-12.85%</b>  | <b>167,067.98</b>   |
| <b>5800 · Programs</b>                           |                     |                     |                   |                 |                     |
| <b>5810 · Quality Program</b>                    |                     |                     |                   |                 |                     |
| 5811 · QA Program Development & Eval.            | 0.00                | 21,701.38           | -21,701.38        | -100.0%         | 0.00                |
| 5821 · Assessor Travel                           | 0.00                | 280.05              | -280.05           | -100.0%         | 0.00                |
| 5823 · Assessor Training                         | 7,836.00            | 12,552.00           | -4,716.00         | -37.57%         | 7,836.00            |
| 5824 · Assessor Onsite Assessment Fee            | 5,850.00            | 1,125.00            | 4,725.00          | 420.0%          | 5,850.00            |
| 5825 · Assessor Remote Assessment                | 71,060.00           | 0.00                | 71,060.00         | 100.0%          | 71,060.00           |
| <b>Total 5810 · Quality Program</b>              | <b>84,746.00</b>    | <b>35,658.43</b>    | <b>49,087.57</b>  | <b>137.66%</b>  | <b>84,746.00</b>    |
| 5802 · Jurisprudence                             | 27,707.43           | 13,088.85           | 14,618.58         | 111.69%         | 27,707.43           |
| <b>5880 · Remediation</b>                        |                     |                     |                   |                 |                     |
| 5881 · Remediation - QA                          | 1,351.35            | 0.00                | 1,351.35          | 100.0%          | 1,351.35            |
| 5871 · QA Practice Enhancement fees              | 4,631.03            | 1,568.59            | 3,062.44          | 195.24%         | 4,631.03            |
| <b>5882 · Remediation - ICRC</b>                 |                     |                     |                   |                 |                     |
| 4028 · ICRC Remediation Chargeback               | -9,221.49           | -2,273.40           | -6,948.09         | -305.63%        | -9,221.49           |
| 5882 · Remediation - ICRC - Other                | 9,109.74            | 4,183.55            | 4,926.19          | 117.75%         | 9,109.74            |
| <b>Total 5882 · Remediation - ICRC</b>           | <b>-111.75</b>      | <b>1,910.15</b>     | <b>-2,021.90</b>  | <b>-105.85%</b> | <b>-111.75</b>      |
| <b>5883 · Remediation - Registration</b>         |                     |                     |                   |                 |                     |
| 4027 · Registration Chargeback                   | -1,764.00           | -833.84             | -930.16           | -111.55%        | -1,764.00           |
| 5883 · Remediation - Registration - Other        | 1,917.75            | 1,105.06            | 812.69            | 73.54%          | 1,917.75            |
| <b>Total 5883 · Remediation - Registration</b>   | <b>153.75</b>       | <b>271.22</b>       | <b>-117.47</b>    | <b>-43.31%</b>  | <b>153.75</b>       |
| <b>5884 · Remediation - Discipline</b>           |                     |                     |                   |                 |                     |
| 4026 · Discipline Chargeback                     | -10,558.34          | -4,473.05           | -6,085.29         | -136.04%        | -10,558.34          |
| 5884 · Remediation - Discipline - Other          | 13,820.11           | 3,187.61            | 10,632.50         | 333.56%         | 13,820.11           |
| <b>Total 5884 · Remediation - Discipline</b>     | <b>3,261.77</b>     | <b>-1,285.44</b>    | <b>4,547.21</b>   | <b>353.75%</b>  | <b>3,261.77</b>     |
| <b>Total 5880 · Remediation</b>                  | <b>9,286.15</b>     | <b>2,464.52</b>     | <b>6,821.63</b>   | <b>276.79%</b>  | <b>9,286.15</b>     |
| 4022 · Recovery of Therapy Costs                 | -3,000.00           | -2,142.84           | -857.16           | -40.0%          | -3,000.00           |
| 5890 · Therapy and Counselling Fund              | 12,453.75           | 9,287.70            | 3,166.05          | 34.09%          | 12,453.75           |
| <b>Total 5800 · Programs</b>                     | <b>131,193.33</b>   | <b>58,356.66</b>    | <b>72,836.67</b>  | <b>124.81%</b>  | <b>131,193.33</b>   |
| <b>5900 · Staffing</b>                           |                     |                     |                   |                 |                     |
| 5901 · Salaries                                  | 2,418,174.66        | 2,190,274.39        | 227,900.27        | 10.41%          | 2,418,174.66        |
| 5902 · Employer Benefits                         | 88,182.11           | 82,655.13           | 5,526.98          | 6.69%           | 88,182.11           |
| 5903 · Employer RRSP Contribution                | 121,162.58          | 103,778.23          | 17,384.35         | 16.75%          | 121,162.58          |
| 5904 · Consultant fees                           | 47,883.79           | 47,639.64           | 244.15            | 0.51%           | 47,883.79           |
| 5905 · Staff Development                         | 20,783.69           | 23,204.94           | -2,421.25         | -10.43%         | 20,783.69           |
| 5906 · Recruitment                               | 3,207.51            | 1,536.99            | 1,670.52          | 108.69%         | 3,207.51            |
| 5907 · Staff Recognition                         | 12,351.07           | 8,684.54            | 3,666.53          | 42.22%          | 12,351.07           |
| 5911 · CPP - Canadian Pension Plan               | 64,295.14           | 55,209.47           | 9,085.67          | 16.46%          | 64,295.14           |
| 5912 · EI - Employment Insurance                 | 21,680.24           | 20,377.36           | 1,302.88          | 6.39%           | 21,680.24           |
| 5913 · EHT - Employer Health Tax                 | 49,601.86           | 46,735.45           | 2,866.41          | 6.13%           | 49,601.86           |
| <b>Total 5900 · Staffing</b>                     | <b>2,847,322.65</b> | <b>2,580,096.14</b> | <b>267,226.51</b> | <b>10.36%</b>   | <b>2,847,322.65</b> |
| 6001 · Amortization                              | 155,376.49          | 123,406.39          | 31,970.10         | 25.91%          | 155,376.49          |
| <b>Total Expense</b>                             | <b>4,460,790.62</b> | <b>4,179,772.73</b> | <b>281,017.89</b> | <b>6.72%</b>    | <b>4,460,790.62</b> |
| <b>Net Ordinary Income</b>                       | <b>2,567.65</b>     | <b>25,916.71</b>    | <b>-23,349.06</b> | <b>-90.09%</b>  | <b>2,567.65</b>     |
| <b>Net Income</b>                                | <b>2,567.65</b>     | <b>25,916.71</b>    | <b>-23,349.06</b> | <b>-90.09%</b>  | <b>2,567.65</b>     |

|  | 31 Dec 21                  | 31 Mar 21                   | 31 Dec 20                  |
|--|----------------------------|-----------------------------|----------------------------|
| <b>ASSETS</b>                                  |                            |                             |                            |
| <b>Current Assets</b>                          |                            |                             |                            |
| <b>Chequing/Savings</b>                        |                            |                             |                            |
| <b>1000 · Cash on Hand</b>                     |                            |                             |                            |
| 1001 · Petty Cash                              | 250.00                     | 250.00                      | 250.00                     |
| 1002 · Petty Cash (USD)                        | 0.00                       | 0.00                        | 0.00                       |
| 1003 · CC Clearing - RBC - 100-999-2           | 464.41                     | 202,099.22                  | 358.20                     |
| 1005 · Operating - RBC - 102-953-7             | 69,572.18                  | 74,336.83                   | 66,493.50                  |
| 1103 · Savings - RBC - 100-663-4               | 2,850,826.41               | 6,683,914.09                | 3,004,888.07               |
| 1000 · Cash on Hand - Other                    | 0.00                       | 0.00                        | 0.00                       |
| <b>Total 1000 · Cash on Hand</b>               | <u>2,921,113.00</u>        | <u>6,960,600.14</u>         | <u>3,071,989.77</u>        |
| <b>1100 · Investments</b>                      |                            |                             |                            |
| 1102 · Investments - Short Term                | 1,260,700.52               | 1,105,216.79                | 1,032,365.48               |
| 1104 · Investments - Long Term                 | 3,954,758.80               | 4,039,924.41                | 4,082,425.14               |
| <b>Total 1100 · Investments</b>                | <u>5,215,459.32</u>        | <u>5,145,141.20</u>         | <u>5,114,790.62</u>        |
| <b>Total Chequing/Savings</b>                  | <u>8,136,572.32</u>        | <u>12,105,741.34</u>        | <u>8,186,780.39</u>        |
| <b>Accounts Receivable</b>                     |                            |                             |                            |
| 1200 · Accounts Receivable                     | 41,676.67                  | 64,178.40                   | 51,878.60                  |
| <b>Total Accounts Receivable</b>               | <u>41,676.67</u>           | <u>64,178.40</u>            | <u>51,878.60</u>           |
| <b>Other Current Assets</b>                    |                            |                             |                            |
| 1206 · Accrued Receivable                      | 41,274.98                  | 30,277.92                   | 0.00                       |
| 1201 · Allowance for Doubtful Accounts         | -34,620.67                 | -42,468.42                  | -42,546.10                 |
| <b>1400 · Prepaid Expenses</b>                 |                            |                             |                            |
| 1401 · Prepaid Software                        | 8,266.70                   | 24,239.52                   | 0.00                       |
| 1403 · Prepaid IT services                     | 22,262.41                  | 40,437.72                   | 13,302.30                  |
| 1405 · Prepaid Insurance                       | 0.00                       | 1,696.68                    | 3,393.36                   |
| 1406 · Prepaid Membership                      | 1,725.00                   | 171,689.04                  | 1,609.44                   |
| 1408 · Prepaid staff development               | 0.00                       | 0.00                        | 0.00                       |
| 1410 · Prepaid meetings                        | 0.00                       | 0.00                        | 0.00                       |
| 1411 · Prepaid Rent                            | 43,111.00                  | 43,011.97                   | 41,985.17                  |
| <b>Total 1400 · Prepaid Expenses</b>           | <u>75,365.11</u>           | <u>281,074.93</u>           | <u>60,290.27</u>           |
| <b>Total Other Current Assets</b>              | <u>82,019.42</u>           | <u>268,884.43</u>           | <u>17,744.17</u>           |
| <b>Total Current Assets</b>                    | <u>8,260,268.41</u>        | <u>12,438,804.17</u>        | <u>8,256,403.16</u>        |
| <b>Fixed Assets</b>                            |                            |                             |                            |
| 1301 · Computer equipment                      | 104,255.43                 | 98,546.78                   | 98,546.78                  |
| 1302 · Computer Software                       | 110,740.00                 | 110,740.00                  | 0.00                       |
| 1305 · Computer equipment - Acc dep            | -69,786.21                 | -53,526.86                  | -48,318.50                 |
| 1306 · Computer Software - Acc Dep             | -64,598.32                 | -36,913.33                  | 0.00                       |
| 1310 · Furniture and Equipment                 | 377,049.09                 | 377,049.09                  | 377,049.09                 |
| 1312 · Furniture & Equipment -Acc Dep          | -333,397.46                | -282,177.95                 | -265,104.77                |
| 1320 · Leasehold Improvements                  | 793,263.20                 | 793,263.20                  | 793,263.20                 |
| 1322 · Leasehold Improvements -Acc dep         | -366,090.89                | -305,878.25                 | -285,807.38                |
| <b>Total Fixed Assets</b>                      | <u>551,434.84</u>          | <u>701,102.68</u>           | <u>669,628.42</u>          |
| <b>TOTAL ASSETS</b>                            | <u><b>8,811,703.25</b></u> | <u><b>13,139,906.85</b></u> | <u><b>8,926,031.58</b></u> |
| <b>LIABILITIES &amp; EQUITY</b>                |                            |                             |                            |
| <b>Liabilities</b>                             |                            |                             |                            |
| <b>Current Liabilities</b>                     |                            |                             |                            |
| <b>Accounts Payable</b>                        |                            |                             |                            |
| 2000 · Accounts Payable                        | 75,336.09                  | 48,866.34                   | 67,014.93                  |
| <b>Total Accounts Payable</b>                  | <u>75,336.09</u>           | <u>48,866.34</u>            | <u>67,014.93</u>           |
| <b>Other Current Liabilities</b>               |                            |                             |                            |
| 2011 · Vacation Accrual                        | 207,119.34                 | 207,119.34                  | 133,902.98                 |
| 2010 · Accrued Liabilities                     | 619,269.33                 | 864,190.58                  | 636,836.97                 |
| 2100 · Deferred Revenue                        |                            |                             |                            |
| 2101 · Deferred Registration Fees              |                            |                             |                            |
| 2102 · Deferred Full Fee Revenue               | 1,378,878.75               | 5,505,625.00                | 1,710,468.50               |
| 2103 · Pro-Rated Fee Revenue                   | 25,482.91                  | 11,076.75                   | 17,618.26                  |
| <b>Total 2101 · Deferred Registration Fees</b> | <u>1,404,361.66</u>        | <u>5,516,701.75</u>         | <u>1,728,086.76</u>        |
| 2110 · Banked refunds                          | 48,571.14                  | 28,220.31                   | 31,786.34                  |
| <b>Total 2100 · Deferred Revenue</b>           | <u>1,452,932.80</u>        | <u>5,544,922.06</u>         | <u>1,759,873.10</u>        |
| 2150 · Other Payables                          |                            |                             |                            |
| 2154 · Citizen's Advisory Group                | 0.00                       | 0.00                        | 0.00                       |
| 2152 · Due to London Life (RRSP)               | 0.00                       | 0.00                        | 0.00                       |
| <b>Total 2150 · Other Payables</b>             | <u>0.00</u>                | <u>0.00</u>                 | <u>0.00</u>                |
| <b>Total Other Current Liabilities</b>         | <u>2,279,321.47</u>        | <u>6,616,231.98</u>         | <u>2,530,613.05</u>        |
| <b>Total Current Liabilities</b>               | <u>2,354,657.56</u>        | <u>6,665,098.32</u>         | <u>2,597,627.98</u>        |
| <b>Long Term Liabilities</b>                   |                            |                             |                            |
| 2125 · Deferred Rent - Tenant Incentiv         | 144,572.57                 | 164,903.06                  | 171,679.89                 |
| <b>Total Long Term Liabilities</b>             | <u>144,572.57</u>          | <u>164,903.06</u>           | <u>171,679.89</u>          |
| <b>Total Liabilities</b>                       | <u>2,499,230.13</u>        | <u>6,830,001.38</u>         | <u>2,769,307.87</u>        |
| <b>Equity</b>                                  |                            |                             |                            |
| 3000 · Unrestricted Net Assets                 | 4,703,296.47               | 4,524,198.00                | 4,411,446.00               |

|   | <u>31 Dec 21</u>           | <u>31 Mar 21</u>            | <u>31 Dec 20</u>           |
|---|----------------------------|-----------------------------|----------------------------|
| 3001 · Invested in Capital Assets                 | 506,609.00                 | 506,609.00                  | 619,361.00                 |
| 3010 · Restricted Reserves                        |                            |                             |                            |
| 3011 · Professional Conduct Expense / Contingency | 1,000,000.00               | 1,000,000.00                | 1,000,000.00               |
| 3012 · Sexual Abuse Therapy / Fee Stabilization   | 100,000.00                 | 100,000.00                  | 100,000.00                 |
| 3013 - Strategic Initiatives                      | 0.00                       | 0.00                        | 0.00                       |
| 3014 - IT Improvements                            | 0.00                       | 0.00                        | 0.00                       |
| Total 3010 · Restricted Reserves                  | <u>1,100,000.00</u>        | <u>1,100,000.00</u>         | <u>1,100,000.00</u>        |
| 3900 · Retained Earnings                          | 0.00                       | 0.00                        | 0.00                       |
| Net Income  | <u>2,567.65</u>            | <u>179,098.47</u>           | <u>25,916.71</u>           |
| Total Equity                                      | <u>6,312,473.12</u>        | <u>6,309,905.47</u>         | <u>6,156,723.71</u>        |
| <b>TOTAL LIABILITIES &amp; EQUITY</b>             | <b><u>8,811,703.25</u></b> | <b><u>13,139,906.85</u></b> | <b><u>8,926,031.58</u></b> |

College of Physiotherapists of Ontario  
Forecast to March 31, 2022  
Prepared: November 5, 2021

|   | <u>Projected</u>       | <u>TOTAL - Projected</u> | <u>TOTAL - Budget</u>   | <u>Variance (\$)</u> | <u>Variance (%)</u> |
|---|------------------------|--------------------------|-------------------------|----------------------|---------------------|
|   | <u>Jan 22 - Mar 22</u> | <u>Apr '21 - Mar 22</u>  | <u>Apr '21 - Mar 22</u> |                      |                     |
| <b>Ordinary Income/Expense</b>                    |                        |                          |                         |                      |                     |
| <b>Income</b>                                     |                        |                          |                         |                      |                     |
| <b>4001 · Registration Fees</b>                   |                        |                          |                         |                      |                     |
| 4011 · Independent Practice - \$575               | 1,398,543.75           | 5,561,752.34             | 5,594,175.00            | -32,422.66           | -0.6%               |
| 4012 · Independent Practice - ProRated            | 13,608.33              | 54,895.74                | 191,503.75              | -136,608.01          | -71.3%              |
| 4013 · Prof Corp Fees \$250                       | 33,750.00              | 111,250.00               | 102,000.00              | 9,250.00             | 9.1%                |
| 4014 · Provisional Practice Fees \$75             | 9,675.00               | 45,975.00                | 33,750.00               | 12,225.00            | 36.2%               |
| 4021 · Cross Border Fee \$100                     | 0.00                   | 0.00                     | 0.00                    | 0.00                 | 0.0%                |
| 4007 · Registration fee credits                   | -6,287.56              | -53,325.73               | -38,704.09              | -14,621.64           | 37.8%               |
| <b>Total 4001 · Registration Fees</b>             | <u>1,449,289.52</u>    | <u>5,720,547.35</u>      | <u>5,882,724.66</u>     | <u>-162,177.31</u>   | <u>-2.8%</u>        |
| <b>4008 · Admin Fees</b>                          | 0.00                   |                          |                         |                      |                     |
| 4015 · Application Fees \$100                     | 46,900.00              | 118,500.00               | 132,400.00              | -13,900.00           | -10.5%              |
| 4016 · Letter of Prof Stand / NSF \$50            | 3,450.00               | 13,550.00                | 11,000.00               | 2,550.00             | 23.2%               |
| 4017 · Wall Certificates \$25                     | 725.00                 | 2,200.00                 | 3,000.00                | -800.00              | -26.7%              |
| 4018 · Late Fees \$225                            | 0.00                   | 2,700.00                 | 4,950.00                | -2,250.00            | -45.5%              |
| 4019 · Prof Corp Application \$700                | 9,100.00               | 32,200.00                | 28,000.00               | 4,200.00             | 15.0%               |
| <b>Total 4008 · Admin Fees</b>                    | <u>60,175.00</u>       | <u>169,150.00</u>        | <u>179,350.00</u>       | <u>-10,200.00</u>    | <u>-5.7%</u>        |
| <b>4030 - ETP Assessment Fees</b>                 | 377,600.00             | 377,600.00               | 0.00                    | 377,600.00           | 100.0%              |
| <b>4002 · Interest Income</b>                     | 21,467.68              | 102,708.12               | 119,000.00              | -16,291.88           | -13.7%              |
| <b>4003 · Remediation Chargeback</b>              | 0.00                   | 0.00                     | 0.00                    | 0.00                 | 0.0%                |
| <b>4010 · Miscellaneous Income</b>                | 0.00                   | 1,885.00                 | 0.00                    | 1,885.00             | 100.0%              |
| <b>Total Income</b>                               | <u>1,908,532.20</u>    | <u>6,371,890.47</u>      | <u>6,181,074.66</u>     | <u>190,815.81</u>    | <u>3.1%</u>         |
| <b>Gross Profit</b>                               | 1,908,532.20           | 6,371,890.47             | 6,181,074.66            | 190,815.81           | 3.1%                |
| <b>Expense</b>                                    | 0.00                   |                          |                         |                      |                     |
| 6001 · Amortization                               | 44,418.89              | 199,795.38               | 173,022.53              | 26,772.85            | 15.5%               |
| 5301 · Conferences and Travel                     | 0.00                   | 4,802.50                 | 15,000.00               | -10,197.50           | -68.0%              |
| <b>Total 5000 · Committee Per Diem</b>            | 57,640.50              | 182,081.00               | 224,536.90              | -42,455.90           | -18.9%              |
| <b>Total 5050 · Committee Reimbursed Expenses</b> | 12,496.78              | 41,345.88                | 74,014.00               | -32,668.12           | -44.1%              |
| <b>Total 5100 · Information Management</b>        | 68,022.32              | 263,129.18               | 380,533.03              | -117,403.85          | -30.9%              |
| 5200 · Insurance                                  | 0.00                   | 9,632.52                 | 11,068.04               | -1,435.52            | -13.0%              |
| 5300 · Networking                                 | 0.00                   | 113.80                   | 0.00                    | 113.80               | 0.0%                |
| <b>Total 5400 · Office and General</b>            | 227,880.74             | 843,450.81               | 923,041.19              | -79,590.38           | -8.6%               |
| <b>Total 5500 · Regulatory Effectiveness</b>      | 30,074.00              | 141,362.95               | 158,928.00              | -17,565.05           | -11.1%              |
| <b>Total 5600 · Communications</b>                | 27,370.00              | 91,034.12                | 123,590.00              | -32,555.88           | -26.3%              |
| <b>Total 5700 · Professional fees</b>             | 167,939.72             | 338,369.45               | 351,453.08              | -13,083.63           | -3.7%               |
| <b>Total 5800 · Programs</b>                      | 116,220.36             | 250,413.69               | 243,103.33              | 7,310.36             | 3.0%                |
| <b>Total 5900 · Staffing</b>                      | 1,076,684.77           | 3,924,007.42             | 3,928,109.88            | -4,102.46            | -0.1%               |
| <b>Total Expense</b>                              | <u>1,828,748.08</u>    | <u>6,289,538.70</u>      | <u>6,606,399.98</u>     | <u>-316,861.28</u>   | <u>-4.8%</u>        |
| <b>Net Ordinary Income</b>                        | <u>79,784.12</u>       | <u>82,351.77</u>         | <u>-425,325.32</u>      | <u>507,677.09</u>    | <u>-119.4%</u>      |
| <b>Net Income</b>                                 | <u>79,784.12</u>       | <u>82,351.77</u>         | <u>-425,325.32</u>      | <u>507,677.09</u>    | <u>-119.4%</u>      |

**College of Physiotherapists of Ontario**  
**Statement of Operations - Budget vs. Actual**  
April 2021 through March 2022

|   | Q3 YTD              |                     |                | Notes for Council   |
|---|---------------------|---------------------|----------------|---|
|   | Apr - Dec 21        | Budget              | % of Budget    |   |
| <b>Ordinary Income/Expense</b>              |                     |                     |                |   |
| <b>Income</b>                               |                     |                     |                |   |
| <b>4001 · Registration Fees</b>             |                     |                     |                |   |
| 4011 · Independent Practice - \$575         | 4,163,208.59        | 4,195,631.25        | 99.23%         |   |
| 4012 · Independent Practice - ProRated      | 41,287.41           | 150,420.00          | 27.45%         | Number of applications decreased since there has not been a PCE-Clinical administered.  |
| 4013 · Prof Corp Fees \$250                 | 77,500.00           | 76,500.00           | 101.31%        |   |
| 4014 · Provisional Practice Fees \$75       | 36,300.00           | 28,425.00           | 127.70%        | Number of applications higher since candidates are not able to take the clinical exam.  |
| 4007 · Registration fee credits             | -47,038.17          | -29,028.07          | 162.04%        | More PTs resigned at the beginning of the year resulting in a greater fee credit.   |
| <b>Total 4001 · Registration Fees</b>       | <b>4,271,257.83</b> | <b>4,421,948.18</b> | <b>96.59%</b>  |   |
| <b>4008 · Admin Fees</b>                    |                     |                     |                |   |
| 4015 · Application Fees \$100               | 71,600.00           | 40,000.00           | 179.00%        | Applicants have continued to apply for a provisional practice certificate.  |
| 4016 · Letter of Prof Stand / NSF \$50      | 10,100.00           | 7,750.00            | 130.32%        | Increased number of PTs requesting letters of professional standing, possibly moving to other jurisdictions due to lack of an exam.     |
| 4017 · Wall Certificates \$25               | 1,475.00            | 2,150.00            | 68.61%         | This service is optional, so fewer PTs requested it.  |
| 4018 · Late Fees \$225                      | 2,700.00            | 4,725.00            | 57.14%         | The number of PTs who did not renew on time was lower than expected.  |
| 4019 · Prof Corp Application \$700          | 23,100.00           | 17,500.00           | 132.00%        | An increase in the number of PTs pursuing a professional corporation certificate.   |
| <b>Total 4008 · Admin Fees</b>              | <b>108,975.00</b>   | <b>72,125.00</b>    | <b>151.09%</b> |   |
| 4002 · Interest Income                      | 81,240.44           | 92,399.48           | 87.92%         | Interest rates dropped due to pandemic.   |
| 4010 · Miscellaneous Income                 | 1,885.00            | 0.00                | 100.00%        | Cost recovered from a Privacy webinar for Physiotherapists.   |
| <b>Total Income</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>97.32%</b>  |   |
| <b>Gross Profit</b>                         | <b>4,463,358.27</b> | <b>4,586,472.66</b> | <b>97.32%</b>  |   |
| <b>Expense</b>                              |                     |                     |                |   |
| 6001 · Amortization                         | 155,376.49          | 128,603.64          | 120.82%        | Purchase of Regulate 365 software is capitalized as an intangible asset rather than expensed during the audit per recommendation.       |
| 5709 · Registration - Other                 | 3,361.75            | 0.00                | 0.00%          | Registration Committee requested an IME for one of their cases - required an external provider.   |
| 5301 · Conferences and Travel               | 4,802.50            | 15,000.00           | 32.02%         | Bundled virtual online CNAR conference was less expensive, covid restructions limited in-person meeting.                                |
| <b>5000 · Committee Per Diem</b>            |                     |                     |                |   |
| 5001 · Chairs meeting - per diem            | 0.00                | 3,060.00            | 0.00%          | No Committee Chairs meeting held.   |
| 5002 · ICRC - per diem                      | 31,843.00           | 18,366.00           | 173.38%        | More frequent and hybrid meetings to address backlog.   |
| 5003 · Council - per diem                   | 31,888.00           | 48,029.00           | 66.39%         | Due to Covid restrictions, June, Sept, Oct and Dec Council meeting held as a hybrid meeting.  |
| 5005 · Discipline Committee - per diem      | 13,230.00           | 51,791.00           | 25.55%         | Due to Counsel delays, cases have not progressed as planned.  |
| 5006 · Executive - per diem                 | 37,125.00           | 13,968.40           | 265.78%        | Meetings necessitated more billing time and and 2020 claims submitted in Q1.  |
| 5010 · Patient Relations - per diem         | 651.00              | 627.00              | 103.83%        |   |
| 5011 · QA Committee - per diem              | 4,521.50            | 16,128.00           | 28.04%         | Fewer cases referred for assessments resulted in fewer cases considered by QAC; therefore shorter meetings and less prep time required. |
| 5012 · Registration Com. - per diem         | 3,072.00            | 5,151.00            | 59.64%         | Underspent due to virtual meetings.   |
| 5017 · Finance Committee - per diem         | 2,110.00            | 9,776.00            | 21.58%         | Full day meetings not required.   |
| <b>Total 5000 · Committee Per Diem</b>      | <b>124,440.50</b>   | <b>166,896.40</b>   | <b>74.56%</b>  |   |
| <b>5050 · Committee Reimbursed Expenses</b> |                     |                     |                |   |
| 5051 · Chairs meeting - expenses            | 0.00                | 9,323.00            | 0.00%          | No Committee Chairs meeting held.   |
| 5052 · ICRC - expenses                      | 3,229.33            | 1,530.00            | 211.07%        | More frequent and hybrid meetings to address backlog.   |
| 5053 · Council - expenses                   | 16,879.99           | 38,952.00           | 43.34%         | Due to Covid restrictions, June, Sept, Oct and Dec Council meeting held as a hybrid meeting.  |
| 5056 · Executive Committee - expenses       | 10,488.31           | 4,971.00            | 210.99%        | Year 2020 claims submitting in Q1.  |
| 5062 · QA Committee - expenses              | 871.96              | 5,732.00            | 15.21%         | Fewer cases referred for assessments resulted in fewer cases considered by QAC; therefore shorter meetings and less prep time required. |

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|   | Q3 YTD            |                   |                | Notes for Council  |
|---|-------------------|-------------------|----------------|--|
|   | Apr - Dec 21      | Budget            | % of Budget    |  |
| 5075 · Finance Committee - expenses               | -2,620.49         | 250.00            | -1048.20%      | Reversal of prior year expenses over-accrued for a member.   |
| <b>Total 5050 · Committee Reimbursed Expenses</b> | <b>28,849.10</b>  | <b>60,758.00</b>  | <b>47.48%</b>  |  |
| <b>5100 · Information Management</b>              |                   |                   |                |  |
| 5101 · IT Hardware                                | 8,124.26          | 6,757.19          | 120.23%        | Final payment of laptop lease expired in last fiscal Q4, charged in Q1 this fiscal year.   |
| 5102 · Software                                   | 65,362.53         | 69,739.59         | 93.72%         | QA Enhancement services deferred to Q4.  |
| 5103 · IT Maintenance                             | 56,256.54         | 82,702.44         | 68.02%         | Provisioned work not realized due to office closure.   |
| 5104 · IT Database                                | 65,363.53         | 82,034.61         | 79.68%         | Timing of Software Support Agreement renovation.   |
| <b>Total 5100 · Information Management</b>        | <b>195,106.86</b> | <b>241,233.83</b> | <b>80.88%</b>  |  |
| 5200 · Insurance                                  | 9,632.52          | 11,068.04         | 87.03%         | Cost of insurance lower due to fewer insurance claims.   |
| 5300 · Networking                                 | 113.80            | 0.00              | 0.00%          | Some travel was required that was not planned.   |
| <b>5400 · Office and General</b>                  |                   |                   |                |  |
| 4022 · Recovery of Therapy Costs                  | -3,000.00         | -1,500.00         | 200.00%        | Higher receivable than assumed due to a change in accounting treatment for recording accrued receivable.   |
| 5402 · Bank & service charges                     | 18,085.16         | 27,364.50         | 66.09%         | Bank charges lower due to timing of membership renewal. No fee extension this year. Bank charges for the registration fees were recorded in March 2021 resulting in lower fees in April. |
| 5403 · Maintenance & repairs                      | 1,876.41          | 3,640.00          | 51.55%         | Provisioned work not realized due to office closure.   |
| 5405 · Memberships & publications                 | 20,571.96         | 24,757.32         | 83.09%         | Memberships and publications subscription have not yet come due.   |
| 5406 · CAPR Registration Levy                     | 161,489.04        | 162,550.47        | 99.35%         |  |
| 5407 · Office & kitchen supplies                  | 2,044.11          | 7,800.00          | 26.21%         | Office reopening was planned for June. Supplies not ordered as needed.   |
| 5408 · Postage & courier                          | 5,801.56          | 3,276.65          | 177.06%        | Courier to staff increased.  |
| 5409 · Rent                                       | 357,076.77        | 360,042.17        | 99.18%         |  |
| 5411 · Printing, Filing & Stationery              | 19,781.36         | 17,782.18         | 111.24%        | Actual number of boxes and images to scan and destroy higher than planned.   |
| 5412 · Telephone & Internet                       | 26,286.94         | 27,513.67         | 95.54%         |  |
| 5413 · Bad Debt                                   | 5,652.25          | 7,750.00          | 72.93%         | An account collected in Q3.  |
| <b>Total 5400 · Office and General</b>            | <b>615,665.56</b> | <b>640,976.96</b> | <b>96.05%</b>  |  |
| <b>5500 · Regulatory Effectiveness</b>            |                   |                   |                |  |
| 5502 · Strategic Operations                       | 27,459.00         | 19,944.00         | 137.68%        | Cost of Strategic planning session higher than expected.   |
| 5503 · Council Education                          | 38,698.41         | 15,212.00         | 254.39%        | Two governance training facilitator sessions and CAPR workshop held not planned.   |
| 5504 · Elections                                  | 3,300.00          | 3,550.00          | 92.96%         | Election costs lower than expected.  |
| 5505 · Policy Development                         | 41,831.54         | 96,148.00         | 43.51%         | ETP exam cancellation delayed the overall ETP review.  |
| <b>Total 5500 · Regulatory Effectiveness</b>      | <b>111,288.95</b> | <b>134,854.00</b> | <b>82.53%</b>  |  |
| <b>5600 · Communications</b>                      |                   |                   |                |  |
| 5605 · French Language Services                   | 16,988.35         | 14,600.00         | 116.36%        | More requests for translation than anticipated.  |
| 5620 · Print Communication                        | 573.53            | 370.00            | 155.01%        | Additional printing required.  |
| 5621 · Online Communication                       | 46,280.72         | 81,250.00         | 56.96%         | Website project deferred to Q4   |
| 5622 · In-Person Communication                    | -273.97           | 0.00              | 0.00%          | Airfare from prior year reimbursed due to cancelled travel.  |
| <b>Total 5600 · Communications</b>                | <b>63,568.63</b>  | <b>96,220.00</b>  | <b>66.07%</b>  |  |
| <b>5700 · Professional fees</b>                   |                   |                   |                |  |
| 4004 · Cost recovery from cost orders             | -68,500.00        | -27,064.74        | 253.10%        | Higher cost order revenue recognized than anticipated  |
| 5701 · Audit                                      | 80.00             | 0.00              | 100.00%        | A difference in the amount of accrual and actual invoice.  |
| 5702 · Hearing Expenses                           | 1,584.26          | 4,377.12          | 36.19%         | Due to Counsel delays, cases have not progressed as planned.   |
| <b>5704 · Investigation Services</b>              |                   |                   |                |  |
| 5711 · External Investigators                     | 51,974.92         | 30,000.00         | 173.25%        | More investigations required due to backlog.   |
| 5712 · PC - Chart Review                          | 9,290.24          | 18,000.00         | 51.61%         | Fewer chart reviews conducted.   |
| 5713 · Summons - Conduct fees                     | 0.00              | 750.00            | 0.00%          | Summons not required.  |
| 5714 · Fees to Secure Records                     | 120.59            | 150.00            | 80.39%         | Fewer records required.  |
| 5715 · Corporate Searches                         | 0.00              | 188.00            | 0.00%          | Corporate searches not required.   |
| 5716 · Transcripts                                | 2,508.32          | 1,800.00          | 139.35%        | Cost of transcripts increased due to increased number of cases.  |
| <b>Total 5704 · Investigation Services</b>        | <b>63,894.07</b>  | <b>50,888.00</b>  | <b>125.56%</b> |  |
| 5705 · Professional services - Other              | 18,063.73         | 52,963.00         | 34.11%         | Review of performance management system and Consultant for Employees' growth and development deferred to future period.  |
| 5706 · Investigator travel                        | 0.00              | 300.00            | 0.00%          | Travel for investigators not required.   |
| 5707 · Decision writing & Undercover              | 10,293.00         | 1,158.00          | 888.86%        | Staff on parental leave required external decision writer.   |
| 5708 · Peer / Expert opinions                     | 8,865.00          | 18,271.50         | 48.52%         | Expert advice not required as planned.   |

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|  | Apr - Dec 21      | Budget            | % of Budget    |   |
| 5703 · Communications Consultant                 | 23,984.25         | 0.00              | 0.00%          | Crisis and Support Services not budgeted.   |
| <b>5750 · Legal</b>                              |                   |                   |                |   |
| 5756 · C & D Accrual Expense                     | -88,061.96        | 0.00              | 0.00%          | Closed cases decreased accrued expense account.   |
| 5751 · Legal - QA                                | 1,152.60          | 8,136.00          | 14.17%         | Less legal advice required due to fewer cases.  |
| 5752 · Legal - Registration                      | 23,520.95         | 23,800.00         | 98.83%         |   |
| <b>5753 · Legal - Professional Conduct</b>       |                   |                   |                |   |
| 5760 · General Counsel                           | 44,183.16         | 18,000.00         | 245.46%        | Invoices for legal services paid relates to prior year closed cases.  |
| 5761 · Independent Legal Advice                  | 30,927.53         | 23,250.01         | 133.02%        | Costs associated with orientation and training higher than expected and cases not proceeded as planned.                           |
| 5762 · Hearing Counsel                           | 39,197.68         | 7,499.97          | 522.64%        | Invoices for legal services paid relates to prior year closed cases.  |
| 5763 · Court Proceedings & Appeals               | 14,836.91         | 0.00              | 0.00%          | Cost of an appeal not planned.  |
| <b>Total 5753 · Legal - Professional Conduct</b> | <b>129,145.28</b> | <b>48,749.98</b>  | <b>264.91%</b> |   |
| 5754 · Legal - Council Advice                    | 22,307.34         | 6,780.00          | 329.02%        | Additional legal counsel was required.  |
| <b>5755 · General Legal</b>                      | <b>6,516.71</b>   | <b>3,954.50</b>   | <b>164.79%</b> | Number of legal service requests higher than budgeted. Mandatory COVID policy and teleworking provisions in employment contracts. |
| 5757 · Legal - Executive Office                  | 14,222.75         | 4,500.00          | 316.06%        | Additional legal services for Executive Office required.  |
| <b>Total 5750 · Legal</b>                        | <b>108,803.67</b> | <b>95,920.48</b>  | <b>113.43%</b> |   |
| <b>Total 5700 · Professional fees</b>            | <b>167,067.98</b> | <b>196,813.36</b> | <b>84.89%</b>  |   |
| <b>5800 · Programs</b>                           |                   |                   |                |   |
| 4025 · Office of Registrar Chargeback            | 0.00              | -375.00           | 0.00%          | There were no remediation matters under the authority of the Registrar.   |
| <b>5810 · Quality Program</b>                    |                   |                   |                |   |
| 5821 · Assessor Travel                           | 0.00              | 3,627.00          | 0.00%          | Assessments were conducted virtually due to Covid and travel was not required.  |
| 5823 · Assessor Training                         | 7,836.00          | 22,050.00         | 35.54%         | Fewer assessors were trained and change in timing of training.  |
| 5824 · Assessor Onsite Assessment Fee            | 5,850.00          | 18,090.00         | 32.34%         | Fewer assessments completed than estimated.   |
| 5825 · Assessor Remote Assessment                | 71,060.00         | 89,760.00         | 79.17%         | Screening interviewes deferred to Q4.   |
| <b>Total 5810 · Quality Program</b>              | <b>84,746.00</b>  | <b>133,527.00</b> | <b>63.47%</b>  |   |
| 5802 · Jurisprudence                             | 27,707.43         | 22,550.00         | 122.87%        | Cost of hosting and license fees higher than expected.  |
| <b>5870 · Practice Enhancement - QA</b>          |                   |                   |                |   |
| 5871 · QA Practice Enhancement fees              | 4,631.03          | 0.00              | 0.00%          | Coaching sessions for QA required but not planned.  |
| <b>Total 5870 · Practice Enhancement - QA</b>    | <b>4,631.03</b>   | <b>0.00</b>       | <b>0.00%</b>   |   |
| <b>5880 · Remediation</b>                        |                   |                   |                |   |
| 5881 · Remediation - QA                          | 1,351.35          | 0.00              | 0.00%          | Remediation for QA required but not planned.  |
| 5882 · Remediation - ICRC                        |                   |                   |                |   |
| 4028 · ICRC Remediation Chargeback               | -9,221.49         | -4,800.00         | 192.11%        | Scheduling of coaching sessions did not occur as planned.   |
| 5882 · Remediation - ICRC - Other                | 9,109.74          | 12,169.50         | 74.86%         |   |
| <b>Total 5882 · Remediation - ICRC</b>           | <b>-111.75</b>    | <b>7,369.50</b>   | <b>-1.52%</b>  |   |
| 5883 · Remediation - Registration                |                   |                   |                |   |
| 4027 · Registration Chargeback                   | -1,764.00         | -2,950.00         | 59.80%         | Scheduling of coaching sessions did not occur as planned.   |
| 5883 · Remediation - Registration - Other        | 1,917.75          | 1,749.99          | 109.59%        |   |
| <b>Total 5883 · Remediation - Registration</b>   | <b>153.75</b>     | <b>-1,200.01</b>  | <b>-12.81%</b> |   |
| 5884 · Remediation - Discipline                  |                   |                   |                |   |
| 4026 · Discipline Chargeback                     | -10,558.34        | -24,500.01        | 43.10%         | Scheduling of coaching sessions did not occur as planned  |
| 5884 · Remediation - Discipline - Other          | 13,820.11         | 24,500.01         | 56.41%         |   |
| <b>Total 5884 · Remediation - Discipline</b>     | <b>3,261.77</b>   | <b>0.00</b>       | <b>0.00%</b>   |   |
| 5886 · Remediation - Office+Registrar            | 0.00              | 375.00            | 0.00%          | There were no remediation matters under the authority of the Registrar  |
| <b>Total 5880 · Remediation</b>                  | <b>4,655.12</b>   | <b>6,544.49</b>   | <b>71.13%</b>  |   |
| 5890 · Therapy and Counselling Fund              | 12,453.75         | 10,383.33         | 119.94%        | Counselling session did not take place as planned.  |
| <b>Total 5800 · Programs</b>                     | <b>134,193.33</b> | <b>172,629.82</b> | <b>77.74%</b>  |   |
| <b>5900 · Staffing</b>                           |                   |                   |                |   |
| 5901 · Salaries                                  | 2,418,174.66      | 2,409,245.02      | 100.37%        |   |
| 5902 · Employer Benefits                         | 88,182.11         | 86,665.38         | 101.75%        |   |
| 5903 · Employer RRSP Contribution                | 121,162.58        | 119,360.81        | 101.51%        |   |
| 5904 · Consultant fees                           | 47,883.79         | 44,201.34         | 108.33%        | More practice advice hours required due to sick time.   |
| 5905 · Staff Development                         | 20,758.69         | 43,500.00         | 47.72%         | Virtual training courses less expensive due to Covid.   |
| 5906 · Recruitment                               | 3,207.51          | 2,335.43          | 137.34%        | Number of new job postings higher than expected.  |
| 5907 · Staff Recognition                         | 12,376.07         | 12,687.50         | 97.55%         |   |

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|  | Apr - Dec 21        | Budget              | % of Budget   |   |
| 5908 · Registrar & Requested Education | 0.00                | 225.00              | 0.00%         | Registrar & Requested education not required. |
| 5911 · CPP - Canadian Pension Plan     | 64,295.14           | 60,731.24           | 105.87%       |   |
| 5912 · EI - Employment Insurance       | 21,680.24           | 22,209.24           | 97.62%        |   |
| 5913 · EHT - Employer Health Tax       | 49,601.86           | 50,264.15           | 98.68%        |   |
| <b>Total 5900 · Staffing</b>           | <b>2,847,322.65</b> | <b>2,851,425.11</b> | <b>99.86%</b> |   |
| <b>Total Expense</b>                   | <b>4,460,790.62</b> | <b>4,716,479.16</b> | <b>94.58%</b> |   |
| <b>Net Ordinary Income</b>             | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>-1.98%</b> |   |
| <b>Net Income</b>                      | <b>2,567.65</b>     | <b>-130,006.50</b>  | <b>-1.98%</b> |   |

## **Agenda #16**

President, Vice-President and Executive Committee Election

Election will take place on the day of Council via electronic voting

## **Agenda # 17**

Member's Motion/s