International Summit on Direct Access & Advanced Practice in Physical Therapy

Evolving Scope of Practice: Ontario Style

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&

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The Ontario Landscape

• Close to 7000 physiotherapists registered in Ontario
• Present in all streams and sectors of health system
• 45% in publicly funded sectors and 55% in privately funded
The Ontario Landscape

Tripartite Leadership – The Ontario Physiotherapy Leadership Consortium

- The College of Physiotherapists of Ontario
- The Ontario Physiotherapy Association
- The Chairs of Ontario Physiotherapy University Programs
Physiotherapy and Regulation in Ontario

- Canada Health Act and Provincial health systems
- Provincial regulation of professions
- Physiotherapy regulated since early 1920s under Drugless Practitioners Act
- Introduction of omnibus legislation – Regulated Health Professions Act, 1991 (RHPA) and profession specific acts including the Physiotherapy Act, 1991
RHPA and the Physiotherapy Act

• Responsibility given for self-regulation and creation of College of Physiotherapists of Ontario
• Protection of title, non-exclusive scope statements and established 13, now 14, controlled acts
• Licensure vs. registration
Physiotherapy Act, 1991

The practice of physiotherapy is the assessment of physical function and the treatment, rehabilitation and prevention of physical dysfunction, injury or pain, to develop, maintain, rehabilitate or augment function or to relieve pain. 1991, c. 37, s. 3.

2 authorized acts: Spinal manipulation and tracheal suctioning
Evolving Practice: Setting the Scene

- Several steps forward and a couple back – Drugless Practitioners Act to Physiotherapy Act and RHPA
- Expanding competencies and roles
- Alternate authority mechanisms (delegation)
- Advanced practice physiotherapy
Evolving Practice: Setting the Scene

- College Forum on Evolving Practice
- OPA led task force – scope of practice and advanced practice
- Ontario Physiotherapy Leadership Consortium (OPLC) advocacy strategy
Evolving Practice: Setting the Scene

• Joint letter to Minister of Health and Long-Term Care requesting referral to Health Professions Regulatory Advisory Council (HPRAC)

• Interprofessional Collaborative Care referral and HPRAC letter for Scope of Practice Review
April 2008

- new strategic focus
- interest to outcomes
Positioning grounded in

1. the public interest

- access
- wait times
- chronic disease management
- community care
Positioning grounded in

2. health systems initiatives (government)

• patient centered care
• interprofessional collaboration
Positioning grounded in

3. commitment to self-regulation
Narrowed the team

- timeline
- considerable information known
- no longer a debate
- opportunity present
Leveraged Ontario Physiotherapy Leadership Consortium
Hired PT expert

• researcher
• familiar with advanced practice
• known within community
Established PT advisory committee
Hired external writers/researchers

- know system players
- know government
- have written successful submissions
Submission principles

• taught (entry &/or post graduate)
• competence
• evidence
3 point test

• meet all 3 ➔ in
• meet less than 3 ➔ out

(became a future role)
Debate on extended class of registration model
Extended classes not working
(nursing example)
Back to definitions

• scope of practice (profession)
• scope of practice (individual)
Beyond or extended scope

• Is it still physiotherapy?
Chose open model

- profession has authority (full scope)
- individual demonstrates competence (individual scope)
- All = physiotherapy
Process

• Jurisdictional scan (international, multi professional)
• Evidence researched against each proposed authority
• Curriculum review against each proposed authority
• Scope statement review (models)
## Physiotherapy Act, 1991

<table>
<thead>
<tr>
<th>Current</th>
<th>New</th>
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<tbody>
<tr>
<td>Scope of practice 3. The practice of physiotherapy is the assessment of physical function and the treatment, rehabilitation and prevention of physical dysfunction, injury or pain, to develop, maintain, rehabilitate or augment function or to relieve pain. 1991, c. 37, s. 3.</td>
<td>Scope of practice 3. The practice of physiotherapy is the assessment of neuromuscular, musculoskeletal and cardio respiratory systems, the diagnosis of diseases or disorders associated with physical dysfunction, injury or pain and the treatment, rehabilitation and prevention or relief of physical dysfunction, injury or pain to develop, maintain, rehabilitate or augment function and promote mobility.</td>
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<tr>
<td>N/a</td>
<td>1. Communicating a diagnosis.</td>
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<td>1. Spinal Manipulation.</td>
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<td>2. Tracheal suctioning.</td>
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<tr>
<td>N/A</td>
<td>4. Treating a wound below the dermis.</td>
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<td>N/A</td>
<td>5. Entering body orifices to manage pelvic conditions</td>
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<td>N/A</td>
<td>6. Ordering the application of diagnostic ultrasound.</td>
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<td>7. Administering a substance by inhalation.</td>
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<td><strong>Authorized Acts - Regulations under the Laboratory and Specimen Collection Centre Licensing Act</strong></td>
<td>1. Government has stated intent of permitting PTs to order some lab tests.</td>
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<td><strong>Authorized Act - Regulations under the Public Hospitals Act</strong></td>
<td>1. Government has stated intent of permitting PTs to order care in hospitals.</td>
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Suggested removal of system barriers

- Public Hospitals Act
- Insurance Act
Consulted other affected professions

• separately
Participated jointly in Ministry initiatives

- provincial public consultation
- referral on drug prescribing
- Ministry requested meetings
Purposely stayed under media radar
Invited to Premier’s announcement of the legislative initiative and to sit in the House for the first reading of the Bill in May 2009
Continual review of strategy

No rest !!!
Legislation successfully passed 2nd reading and at Committee
No opposition to Physiotherapy scope changes to date
Expect legislative change by December 2009
Implementation considerations

• setting a proclamation date that promotes confidence
• defining framework for application to each authority with post graduate requirements
Implementation considerations

- setting expert panels to develop standards
- developing new standards
- making required requests to government committees to develop appropriate additional regulations
Implementation considerations

- educate, educate, educate
- Multi-layered communication plan
- public register changes
Beyond Bill 179

- Regulation/legislative barriers e.g. Public Hospitals Act
- System/funding changes needed to support authorities in the private and public system
- Education programming for post-entry level and continuing education needs
Success Factors

- active listening to changes in the environment
  - government discussions
  - PT role changes
- positive, respectful working relationships (internal and external)
- flexible strategy – ever evolving
Success Factors

- limited “ego”
- focussed collaboration
  - clarity of roles
- political astuteness
- laser sharp on the public interest
Questions?
College of Physiotherapists of Ontario
www.collegept.org

Ontario Physiotherapy Association
www.opa.on.ca