

## **NSCP UPDATE**

### **February 25, 2013**

#### **Greetings:**

**Jeff Rooney, Chair of the Board**

**2013 Registration Renewals:** The renewal process was completed in early 2013. All members have been accounted for and as of today we have:

- 34 Members Non Practicing (NPLOA)
- 07 Members Practicing outside NS
- 03 Members Practicing 3 Month
- 21 Members Practicing (Administration)
- 25 Members Practicing (Sponsored)
- 10 Members Practicing (Teaching/Research)
- 03 Members Practicing (Clinical Speciality)
- 562 Members Practicing
- 665 On the Register

**CONGRATUALIONS are extended to the winner of this year's Physiotherapist of the Year Award; Andrea McAllister.** Since graduating from Dalhousie in 1995 Andrea has been an active member of our profession. She has taught countless students through work as an instructor at Dalhousie since 2003 and has worked as a clinical preceptor for two students per year since 2005. Andrea facilitates continued learning and skill development of new employees in her primary job and has worked as an Orthopaedic Division instructor since 2009. In addition, she has been a volunteer provincially for the past thirteen years and nationally for five years for the Orthopaedic Division. She has sat on a variety of NSPA committees and has received the Award of Excellence in recognition of her work in 2009. She is an inspiration in the way she gives of her time for our profession. The Award will be presented at the AGM.

**Website:** The NSCP website was updated over the past weeks in stages. On February 25th the Membership lists and the Facility lists were updated for the second time in 2013. Board minutes, new Downloadable forms (Sponsor Forms), Practice Standards both new and for review have all been uploaded, the new Advisories Statements heading has been added to the Standards, Policy etc. tab and two advisories were placed under the heading and some administrative alterations have been made as well.

#### **Practice Standards Committee**

**Todd Lewin, Chair**

At present there is only one Standard that requires your review. That Standard is: Use of Titles and Credentials.

**New Advisories:** The Registrar with the Practice Standards Committee have developed a new communications device to assist you the members in understanding Practice Standards, Policies, Code of Ethics etc. These documents entitled Advisory Statement will be emailed to all members as developed. By now each of you should have received the first two Advisories: 1) Calibration and 2) Termination of Treatment. If you do not remember seeing them then go to the NSCP Website at: [www.nsphysio.com](http://www.nsphysio.com) and click on the Standards, Policy etc. Tab.

#### **Peer Assessment Committee**

##### **Mike Sangster**

The list of those who will be required to participate in the 2013 Portfolio Reviews is now complete:

130 Members fell into the 1993 to 1999 Graduation Period

002 Who were excused from last year

132 Total number of members eligible for review

012 Members excluded because they had theirs done in 2009 or 2010

120 Members to have their Portfolios reviewed in 2013

The Portfolio notices were emailed on February 6th to those who are required to provide Portfolios by March 31, 2013. This marks the third consecutive year that we have undertaken Portfolio Reviews and that means at the end of this cycle 60 % of the membership will have completed the requirement.

#### **March 23, 2013 is the Date of the NSPA and NSCP Annual General Meetings:**

The Nova Scotia Physiotherapy Association (NSPA) and the Nova Scotia College of Physiotherapists (NSCP) extend a warm welcome to the province's physiotherapists to join us for our Annual General Meetings on Saturday, March 23, 2013. The NSCP annual General Meeting starts at 8:30 am in the Imperial Ballroom at the Lord Nelson Hotel. The days program includes professional development, and the 5<sup>th</sup> annual NSPA Exhibit and Job Fair. The workshops are free for members of the College and/or Association, however advance on-line registration is required. Free registration for event attendees can be completed by visiting <http://2013-nscp-nspa-agm.eventbrite.com>

#### **AGM - March 23 - Update on the College CE during the NSCP AGM:**

##### **Joan Ross, Registrar**

I hope you are all surviving winter and looking forward to our AGM on March 23, in the Imperial Ballroom at the Lord Nelson hotel. After the business portion of the NSCP Annual

Meeting (scheduled for 8:30 am to 9:30 am) there will be an education session (9:30am to 10:30am ) on the impact of the *Personal Health Information Act* and the *Personal Directives Act* and will include a Q&A opportunity on any of the other health care legislation changes that may impact your practice (see below). I have included here some interesting reading for your long evenings. I have prepared an update and brief précis on some of the Acts that have been passed in the past few years that you may not have heard about. Please read and enjoy as you will be hearing more about the more recent ones at the AGM. See Legislation Briefs immediately following:

## **Legislation Briefs**

For those of you who work in long term care facilities, residential care facilities, homes for special care, hospitals or other health facility, you should be aware of the...

### **Protection for Persons in Care Act**

Bill No.110

Chapter 33 of the Acts of 2004 (Enacted October 1, 2007)

This Act is an extra safeguard from abuse for patients and residents 16 years of age and older, who are receiving care from Nova Scotia's hospitals, residential care facilities, nursing homes, homes for the aged or disabled persons (Homes for Special Care). Under this Act, abuse may be physical, emotional, sexual, financial, or related to neglect or the administering of medication. The Act requires health facility administrators and service providers (including staff and volunteers) to promptly report all allegations or instances of abuse. The duty to report applies even if the information may be considered confidential and disclosure restricted by legislation (exclusion being solicitor –client relationship).

### **Personal Information International Disclosure Protection Act**

Bill No.19

Chapter 3 of the Acts of 2006 (Enacted March 26, 2008)

This Act applies to every public body, all directors, officers and employees of a public body and all employees and associates of a service provider. It applies to all records in custody or under control of a public body.

A person as referred to above who has access, whether authorized or unauthorized, to personal information in the custody or under the control of a public body shall not disclose that information unless authorized. An individual must identify the information and consent, in writing, to the disclosure of that information inside or outside of Canada as the case may be.

# Health Professions Disciplinary Proceedings Protection (2008) Act

Bill No.127

Chapter 3 of the Acts of 2008 (Enacted August 2008)

This Act was an omnibus type of legislation that protected the confidentiality of disciplinary proceedings and information gathered and produced for the purpose of an investigative, disciplinary or hearing process of the College. Section 13 of this Act adds a Section 60A to our legislation.

## Apology Act

Bill No.233

Chapter 34 of the Acts of 2008 (Enacted Nov 25, 2008)

This Act states that an apology made by or on behalf of a person in relation to any matter, does not constitute an admission of fault or liability by the person. Such an apology is therefore not admissible in any civil, administrative proceeding or arbitration as evidence of the fault or liability of any person in relation to that matter.

## Fair Registration Practices Act

Bill No. 211

Chapter 38 of the Acts of 2008 (Enacted in 2008)

For our purposes, this Act is about facilitating the free movement of people throughout Canada (under the Agreement on Internal Trade between the Government of Canada and the governments of all the provinces of Canada that came into force on July 1, 1995, as implemented by the Province under the Internal Trade Agreement Implementation Act.) . It is all about registration practices and transparency of processes. It is relevant to the College and its processes but not to the practice of individual members. The Review Officer was appointed last year and things are starting to move forward in that area.

## Personal Directives Act

Bill No.163

Chapter 8 of the Acts of 2008 (Enacted April 1 2010)

This Act enables Nova Scotians to document their wishes regarding what personal care decisions are made for them, and/or who makes them, in the event that they are incapacitated and are unable to make these decisions themselves. Personal care decisions include those related to health care, nutrition, hydration, shelter, residence, clothing, hygiene, safety, comfort, recreation, social activities and support services. It does not invalidate authorizations made under the Medical Consent Act prior to November 22, 2009

The Act allows for:

1. Making a personal directive to plan for any instance when the maker lacks the capacity to make personal care decisions by:

- Appointing a delegate to make a personal care decisions for the maker and/or
  - setting out instructions, values, beliefs or general principles about what or how personal care decisions should be made for the maker.
2. Choosing a statutory substitute decision maker to make decisions regarding health care, placement in a continuing care home and home care where the individual has not prepared a personal directive in relation to those decisions. (Guardian, nearest relative.min.19yrs, Public Trustee)

Health care providers will continue to ensure a client's informed consent for any service they provide just as they do now. The common law presumption that persons have the capacity to make health care or treatment decisions does not change. If the health care provider cannot determine whether or not the client has capacity to consent to treatment or service being provided, they may request an assessment of capacity to be performed by a physician. The assessment when required is for capacity to consent to a particular treatment or service, it is not necessary to assess global capacity.

The Key duties of the Health Care Provider (e.g. licensed /registered health care provider) are found under Sec. 18 of the Act. Key duties when a person lacks capacity are:

- Inquire as to whether or not there is a personal directive, request a copy and include it in the health record.
- Follow a delegate's instructions as they abide by the instructions in the directive.
- Follow clear instructions in a personal directive.
- Follow the instructions of a substitute decision maker if there is no personal directive. There is a hierarchy for substitute decision makers. (Guardian, then nearest relative beginning with Spouse and finally the Public Trustee (Sec 2(i) and 14 of the PDA Act.

## Personal Health Information Act

Bill No.89 Amended under Bill 76 May 2012

Chapter 41 of the Acts of 2010 (Enacted June 1, 2013)

This Act sets out the rules for how health information is collected, used, disclosed, retained and destroyed by health care providers in Nova Scotia. It provides one consistent set of rules across all health care providers and will eliminate the requirement for informed consent for the sharing of health information among regulated health professionals. It moves to something called "knowledgeable implied consent" meaning that a health provider is entitled to assume that an individual consents to them sharing information with other health professionals unless they specifically have indicated that they do not consent. As stated, the health professionals who are entitled to information under the circle of care legislation are defined as anyone who has a current relationship of care to the client.

It defines the health information custodian as "***an individual or organization who has custody or control of personal health information as a result of or in connection with performing...duties of work***" This includes in part, all regulated health professionals)

Clients will continue to be able to view or receive a copy of their health record and request the correction be made if they think the information is incorrect or incomplete. They can also ask for a copy of an audit that shows who has accessed their electronic health record. Every healthcare provider who has access to a person's personal health information will be required to have clear privacy practices and policies. The new Act applies to electronic health records as well as paper records. Clients will also be told about any privacy breach of their personal health information and notified if there was a theft, loss or an authorized access of their health information.

# Regulated Health Professions Network Act

Bill No.147

Chapter 48 of the Acts of 2012 (to be Enacted soon)

This Act allows for increased collaboration among the 22 Network members (regulated health professions) to support an increase in inter-professional practice while strengthening the protection that regulation provides to the public. It provides the opportunity to: voluntarily share best practices and resources, be a common training mechanism for regulators and serve as one forum in influencing and improving health care delivery.

This legislation will also enable voluntary collaborative processes to address matters such as:

- scope of practice - Regulators will be able to reach agreements on interpretation of scopes of practice with confidence that they are being made with legal authority without having to modify scopes of practice through the legislative amendment process.
- collaborative investigation - We can share resources and collaborate on investigations of complaints, the information can be shared, and yet the decisions rest with each professions own disciplinary process. We maintain our autonomy.
- registration review processes – Under the Fair Registration Practices Act we are all required to have in place a formal registration review and appeals process. This is difficult for smaller Colleges with limited staff and resources, the ability of regulatory bodies to share a committee to conduct these reviews/appeals is a great benefit.

## **Professional Development at the AGM - Concussion Epidemiology, Assessment and Management:**

On March 23 NSPA and the College will co-host a Professional Development Session on Concussion following the Annual General Meetings. The session presented by Laura Lundquist and Steven MacNeil will review the current literature with regard to concussion epidemiology, assessment and management. Particular attention will be drawn to its incidence in sport, motor vehicle accidents and slip/fall incidents and the resulting relevance to physiotherapists working in both inpatient and outpatient settings. Strategies for assessment will be presented (including vestibular considerations) and an opportunity to practice with colleagues will be provided. Discussion regarding progressive return to normal function including work, school and sport will help clinicians understand how to assist their clients return to pre-injury activity level. The course is free to members who attend the AGM's however you must pre-register at <http://2013-nscp-nspace-agm.eventbrite.com>