

# Update CPTBC

SUMMER 2009 • VOLUME 10 ISSUE 2

## IMPORTANT NOTICE 2010 REGISTRATION RENEWAL - IMPORTANT CHANGES

This message is to inform you that the College Board approved a change in the process for managing annual renewals. Effective for the 2010 registration renewal year registrants are required to renew their registration through the College website.

Therefore please be advised that effective for the 2010 registration renewal year the College will be notifying you by mail, by means of a **POSTCARD** notice that your registration for 2010 is due.

**YOU WILL NOT BE RECEIVING A RENEWAL FORM IN THE MAIL UNLESS YOU CONTACT THE COLLEGE AND REQUEST A FORM.**

In addition to the postcard notice which will be mailed to you in mid-November the Registrar will send you an e-mail reminder on November 30th and December 15th. The November 30th reminder will include your log-in credentials to enable you to renew your registration on-line. **ON-LINE RENEWAL WILL BE AVAILABLE DECEMBER 1, 2009 AT 8:00 A.M. PST.**

Please ensure that the College has your current e-mail on file in order to receive these reminder notices. To update your email address, please contact the College at 604 730 9193 or email at [info@cptbc.org](mailto:info@cptbc.org).

## COLLEGE BOARD OF DIRECTORS: 2009-2010

- **Victor Brittain** – Elected Registrant and Board Chair
- **Jason Giesbrecht** – Elected Registrant and Board Vice-Chair
- **Annick de Gooyer** – Elected Registrant
- **Jane Gates** – Elected Registrant
- **Michael Lam** – Appointed Public Representative
- **Freeman Qu** – Elected Registrant
- **Anne Scott** – Elected Registrant
- **John Zimmer** – Appointed Public Representative

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INSERT:  
Where's the Line Brochure

## ANNUAL GENERAL MEETING

The Annual General Meeting (AGM) was held on Saturday, April 4, 2009 at the Plaza 500 Hotel & Convention Centre in Vancouver, British Columbia. There were one hundred (100) members in attendance carrying twenty six (26) proxies; therefore a quorum of registrants was present as required under section 4(1) of the College's Bylaws.

The Chair welcomed the registrants and the following guests to the meeting:

**Dr. Brenda Loveridge**, *Interim Director, Department of Physical Therapy, Faculty of Medicine, UBC*

**Mr. Anthony G.V. Tobin**, *Tobin & Associates, Legal Counsel to CPTBC*

**Ms. Angela Sartori**, *Morrow & Company, Certified General Accountants*

**Dr. Meena Sran**, *President, PABC*

**Mr. Scott Brolin**, *Incoming President, PABC*

**Ms. Rebecca Bing Tunnacliffe**, *CEO, PABC*

**Mrs. Madge Wiesman**, *CPTBC Honorary Member*

The Chair and committee reports and the 2008 financial statements were received and placed on file.

**Jane Gates** and **Freeman Qu** were each elected for a first two-year term to the Board of Directors and **Jason Giesbrecht** was elected to a second two-year term on the Board.

## RECOGNITION AWARDS

- **Nancy Cho**  
Patient Relations Committee from March 2005 to July 2008
- **Garrett Gabriel**  
Quality Assurance Program, Annual Self Report Subcommittee from October 2002 to September 2008 including Subcommittee chair from October 2006, Quality Assurance Program, Communications Subcommittee from September 2007 to January 2009, and Legislative Committee from April 2006 to January 2009
- **Jan Halliday**, Public Representative  
Discipline Committee from January 1995 to June 2008
- **Kerry Moore**, Public Representative  
Patient Relations Committee from January 2003 to January 2009
- **Ann Parsons**  
Discipline Committee from May 1996 to December 2008
- **Carla Vendrame**  
Quality Assurance Committee, Annual Self Report Subcommittee from September 2003 to May 2008 including Subcommittee vice-chair from November 2005
- **Denise Walters**  
Registration Committee from July 2004 to July 2008 including Committee chair
- **Penny Wilson**  
Patient Relations Committee from January 2003 to January 2009
- **Roy Emperingham**, Public Representative  
Board of Directors from May 2007 to March 2009, Registration Committee from June 2007 to March 2009 and Quality Assurance Committee from June 2007 to March 2009
- **Christa Robertson**  
Board of Directors, Physical Therapy Student Representative from November 2006 to September 2008
- **Jeffrey Garrett**  
Board of Directors from May 2005 to April 2009
- **Margaret Harris**  
Board of Directors from November 2003 to April 2009 including Board Chair from July 2005 to April 2008 and Finance Committee from May 2004 to April 2009

## BIOGRAPHIES – NEW BOARD MEMBERS

### JANE GATES

Jane graduated from the University of Manitoba in 1968 with a Diploma in Medical Rehabilitation (Physiotherapy). She worked for C.A.R.S in rural Manitoba until moving to Regina in the fall of 1969. While working for the South Saskatchewan Hospital Center, Jane's experience varied from Senior Neurosciences Therapist, Wascana Rehabilitation Hospital; Director of Physiotherapy, Pasqua Hospital (1973-1975) and Director of PT, Plains Health Center (1975-1978). During this time Jane was very active in CPA Saskatchewan Branch and served on the Canadian Physiotherapy Association Board from 1970-1972.

Jane moved to Kelowna in January 1978 where she continued to practice at Kelowna General Hospital (1978-1987) while raising her family. She was Senior Therapist, Rehabilitation Unit before moving to Cottonwoods Extended Care as the Director of Rehabilitation Services in 1987. In 1988 Jane completed the CHA Departmental Management Program and received a Gerontology Certificate in 1990 from OUC. In 1993 Jane became the Professional Practice Leader, PT, at Kelowna General Hospital and earned her Bachelors of Health Science from the Open Learning Agency in 1996. Jane continued to be a supporter of CPA throughout these years. After retiring in 2007, Jane continued to provide the physiotherapy services for the Kelowna MS Clinic, a part time job which leaves her time to be involved in volunteer activities. She is looking forward to being involved with CPTBC and feels privileged to serve on the Board.

### FREEMAN QU

Originally from China, Freeman became a registered physiotherapist in Canada in 1991 after completing a one-year graduate study, passing the National Physiotherapy Exam, and fulfilling the CPA residency requirement. Freeman first worked at the Glace Bay General Hospital in Cape Breton, Nova Scotia for one year, and then spent the next 14 years working in private practice in Ontario, including operating his own consulting service and small clinic in Toronto for 6 years. In 2005 Freeman moved to Kelowna, BC and returned to hospital practice at Kelowna General Hospital. He is currently working full time in acute care at Penticton Regional Hospital.

## COLLEGE INFORMATION

### Board Elections

Due to a delay in mailing the election and AGM notices the deadline for submitting your vote was extended. The Registrar immediately notified via e-mail those registrants who have an e-mail address listed with the College. Registrants who called the office were informed of this extension and asked to communicate this information with their colleagues.

Only two ballots were received in the College office after the votes were counted and the total number of ballots received was not significantly different than that for the last election in 2005.

The College apologizes for this inconvenience.

### Making Contact

There may be times when the College needs to urgently reach you regarding College business. Please make sure that the College has **your current address, telephone number AND e-mail address**. Contact information can be updated by calling 604 730 9193 or online at [www.cptbc.org](http://www.cptbc.org). Go to the heading “Registrants” drop down and click on “Registrant Login”. Once you are logged in, you can update your personal profile.

### Professional Fees by Province/Territory

The annual cost of maintaining a registration to practice physical therapy is often a hot topic of conversation – especially when registrants receive notice that their annual dues will be increasing. The following table contains comparison information on annual renewal fees for registering to practice in a Canadian jurisdiction:

Province/Territory	2009 Fees	# of Practicing Members	Province/Territory	2009 Fees	# of Practicing Members
Ontario	\$600.00	4109	Nova Scotia	\$310.00	575
Alberta	\$550.00	2070	Newfoundland	\$295.00	196
Quebec	\$506.00	N/A	New Brunswick	\$275.00	478
Manitoba	\$425.00	647	Prince Edward Island	\$200.00	50*
Saskatchewan	\$375.00	650	Yukon (not self regulated)	\$200.00	32
British Columbia	\$350.00	2661			

\* Represents an approximate number.

\* This chart is presented for your information only.

## COMMITTEE REPORTS

### REGISTRATION COMMITTEE REPORT

#### 1. Criminal Records Review Program

- i. The BC Ministry of Public Safety and Solicitor General's Criminal Records Review Program revised their Criminal Record Check form effective April 24, 2009 to include the authorization listed below:

*"I hereby authorize the release to the Deputy Registrar any documents in the custody of the police, the court and crown counsel relating to an outstanding charge or conviction of any relevant offence as defined under the Criminal Records Review Act."*

- ii. Provincial law requires that registered physical therapists undergo a criminal record review (CRR) every five years. If you have not undergone a review since 2003 the College will notify you by mail in September 2009. You are required to complete the forms that will be sent to you and return the completed forms to the College for processing.

#### 2. Malpractice (liability) Insurance

Don't wait until December! Send in proof of your 2010 malpractice (liability) insurance to the College when you receive your new policy from your insurance agency. You may either send a photocopy of your policy to the College by mail, by fax at 604 730 9273 or by e-mail to [info@cptbc.org](mailto:info@cptbc.org). The College will retain your document on file and process it as part of your 2010 registration renewal.

#### 3. Changes to the Supervision Plan for Interim Registrants

Individuals applying for interim registration with the College are required to work under the supervision of fully registered physical therapist(s) and to submit a supervision plan which must be approved by the Registration Committee.

Supervision is defined as the oversight and critical appraisal of an individual's knowledge, skills and abilities. Direct supervision is defined as the observation of an individual in the execution of a task, process or activity where the supervising physical therapist observes a portion of patient interaction.

Indirect supervision means the supervising physical therapist, working out of the same facility, is readily available in person or by electronic communications.

The purpose of supervising an interim registrant is to critically observe the interim registrant; to reaffirm or to correct clinical actions when necessary and to enable the interim registrant to consolidate the knowledge he or she has learned.

Supervising physical therapists are expected to use their professional judgment and tailor the supervision plan to meet the needs of the interim registrant and the amount of supervision will vary depending on the nature of the employment setting, the area of practice, the interim registrant's job description and available resources.

The Board approved the following changes to the current supervision requirement:

- The supervisor must provide direct supervision for at least 5 hours/week for an interim registrant working on a full-time basis. The number of supervised hours required would be proportional to the hours worked for registrants working on a part-time basis.
- The ratio of the number of interim registrant(s) to one supervisor must be reasonable. This is to ensure the supervisor can provide adequate supervision to the supervisee(s). If the ratio of interim registrants to supervisor reaches the threshold of 4:1 or more, the Registration Committee will review and determine if the level of supervision is sufficient.
- Interim registration will not be granted if the interim registrant is working in a sole-charge environment where there is an absence of full registrant practicing at the same location.
- Interim registrants may practice dry needling techniques as part of their physical therapy practice **ONLY** when (1) they have applied to the College and are successfully credentialed by the College's Acupuncture Credentialing Subcommittee, and (2) the supervising therapist has the competencies required to supervise this area of practice and submits proof of their dry-needling credentials along with the supervision plan.

Candidates applying for interim registration following failure of either components of the examination will be required to have at least 50% direct supervision during the time of their practice.

For inquires regarding interim registration and supervision please contact the Deputy Registrar, Ann Lo at [ann\\_lo@cptbc.org](mailto:ann_lo@cptbc.org). If you have any questions on the dry needling requirement please contact the Practice Advisor, Susan Paul at [susan\\_paul@cptbc.org](mailto:susan_paul@cptbc.org).

## INCORPORATION REPORT

Recently the College has received numerous corporation name approval requests from registrants. However some of these requests were not followed up by an application to the College for a corporation permit.

If your corporation is providing physical therapy services to the public your corporation **must** obtain a permit from the College in accordance to Part 4 of the *Health Professions Act* and Part VII of the College Bylaw. Please contact the Deputy Registrar, Ann Lo at [ann\\_lo@cptbc.org](mailto:ann_lo@cptbc.org) if you are unsure whether your corporation requires a permit with the College.

## CPTBC AND PABC JOINT INITIATIVES COMMITTEE EDUCATION SESSION 2009

On Saturday, April 4th the Joint Initiatives Committee (JIC) held an education session on clinical ethical decision-making following the CPTBC and PABC Annual General Meetings. JIC invited Carina Herman from the College of Registered Nurses of BC to present on Professional Boundaries, and Fraser Health Authority's ethicist Bashir Jiwani spoke on ethics. Below is a practice scenario that highlights several of the points that Carina made during her presentation. PABC will have a companion article on "hugs and kisses" boundaries in its summer edition of *Directions*.

*Tracy treated Ben three times a week for three months following orthopedic surgery. A mutual attraction developed, and dinner one night developed into a dating relationship during the treatment period. They saw it as a relationship between two consenting adults...*

The essential nature of a therapeutic or professional relationship is a focus on the patient's well being. The relationship exists for the benefit of the patient not for the benefit of the physical therapist. The therapeutic relationship differs from a personal relationship in that the professional relationship inherently creates an unequal power balance because the physical therapist:

- is in a position of power because they are providing care,
- is in close physical contact with a patient in varying degrees of undress,
- is responsible for establishing trust in their professional competence and
- must respect the patient's wishes.

Some professional boundaries are absolute such as having sexual relations with a patient which is judged as sexual misconduct, while other boundaries are grey and require careful consideration. In the case study, Tracy believes that she can maintain her professional judgment with Ben as his physical therapist and that there is no risk of harm. Consider, however, the following potential development:

*After dating for two months, Tracy ends the romantic relationship with Ben who is hurt and wants the relationship to continue. She wishes to transfer him to another physical therapist but he disagrees because he has a good therapeutic relationship with Tracy who comes highly recommended by Ben's surgeon. Ben feels like his care is being compromised and wants to discuss the situation with Tracy but she is adamant and stops returning his calls. He then files a complaint with CPTBC.*

Carina effectively stressed that when you retrace your steps in a therapeutic relationship gone wrong you can usually find where you stumbled over the professional boundary. Tracy could retrace her misstep as accepting that first invitation to dinner. Carina alerted us to be on the lookout for 'yellow lights' indicating a boundary may be blurring.

Yellow lights include:

- Frequently thinking of a client when away from work
- Spending free time with a client
- Sexual content in client conversation
- Having romantic or sexual thoughts about a client
- Hiding aspects of relationship with a client from colleagues and others

In hindsight, it is obvious that Tracy violated a boundary and that Ben's health interests were not served. Carina reiterated that regardless of the patient's behaviour or comments, it is entirely the physiotherapist's responsibility to ensure that boundaries are maintained.

For more information on professional boundaries please review the new College resource "*Where's the Line?*" *Professional Boundaries in a Therapeutic Relationship* – included as an insert with this newsletter.

## QUALITY ASSURANCE PROGRAM CORNER

### WHAT'S NEW in the DEVELOPMENT of the QUALITY ASSURANCE PROGRAM?

2009 has been the busiest year so far in the development of the program. The College has been fortunate in having many physical therapists from around the province take part in the development of the program framework. Each day more and more registrants are becoming familiar with the program as a result of the presentations done by the College staff at in-services around the Lower Mainland. The College is planning visits to other BC regions in the fall to speak about the program. Anyone interested in assisting the staff in arranging a visit is requested to contact the program coordinator at 604 730 9193 or at [olga\\_nesic@cptbc.org](mailto:olga_nesic@cptbc.org).

The Annual Self Report Subcommittee (ASR) has been working on developing their component of the QA program. The Board approved the subcommittee's recommendation that this component of the QA program be web based. This will allow physical therapists to readily access resources to assist them in completing the annual self report. The subcommittee is planning to pilot this component of the QA program in early 2010.

The Registrants Competence Assessment (RCA) Subcommittee has recruited twenty eight (28) volunteers/physical therapists to participate in the development of examination questions. These twenty eight (28) volunteers are divided into eight (8) teams and they are currently completing their first phase of training and initial question development cycle. The College is in the process of establishing and training two more teams from the Okanagan. Soon there will be thirty four (34) practicing physical therapists from both the public and private sectors involved in the development process.

Please stay tuned for current information about the Program in future editions of *Update*.

#### Interested in hearing more about the Quality Assurance Program?

Request an in-service? Ask questions? Please call the QAP Coordinator Olga Nesic at 604-730-9193 or e-mail her at [olga\\_nesic@cptbc.org](mailto:olga_nesic@cptbc.org).

## MEMBER ADVISORY

### Health Canada – Notice to Hospitals

Important safety information: **BHM/Medi-Man Combi Sling** – Possible Stitching Failure, BHM Medical Inc.

BHM Medical Inc. advises Canadian healthcare professionals to visually inspect the slings prior to use and discard the products if there is thread breakage at the junction of the shoulder strap and sling body.

For more information please visit: [http://www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/\\_2009/index-eng.php](http://www.hc-sc.gc.ca/dhp-mps/medeff/advisories-avis/prof/_2009/index-eng.php).

## PATIENT RELATIONS CORNER

The Patient Relations Committee has spent the last year developing a resource for registrants concerning boundary issues. It can be found as an insert with this newsletter and is now ready for your perusal on the College website at [http://www.cptbc.org/pdf/Where\\_is\\_the\\_line.pdf](http://www.cptbc.org/pdf/Where_is_the_line.pdf).

### What is it called?

**“Where’s the line? Professional Boundaries in a Therapeutic Relationship”**

### Why should I read it?

Maintaining a professional relationship with our patients is essential for the patient to feel safe in the therapeutic environment and for physical therapists to treat with integrity. Once a boundary has been crossed it is always the physical therapist's responsibility to readjust the relationship and make appropriate changes to ensure that the professional relationship is reestablished. If the professional relationship cannot be restored, alternate treatment arrangements must be made.

Overstepping boundaries can be costly. It can lead to communication and practice challenges for the physical therapist and patient and it may give rise to a patient making a formal complaint to the College.

**Highlights of the document:**

- Brief outline of the differences between a professional and a personal relationship
- Description of the attributes of a therapeutic relationship under subheadings of power, trust, respect, and personal closeness
- Definition of professional boundary
- Examples of ‘yellow lights’ - warnings signs for potential boundary crossing
- If in doubt, there are pointers for self reflection
- Guidance as to how to proceed when a boundary is crossed
- Brief outline and reference to *Handbook on Sensitive Practice for Health Professionals*

**Key Points to Remember:**

- Set the stage for a professional relationship
- Check those ‘yellow lights’
- Establish and reestablish professional boundaries
- Document any actions taken to restore the professional relationship
- Maintain clear boundaries to protect you and your patient

Thanks for taking the time to read this, it could make a difference to you, your patients and your practice.

*Submitted by a member of the Patient Relations Committee*

## FAXING AND EMAILING PATIENT INFORMATION

Do you, your staff or others in your clinic regularly use fax or email to transmit patient information? Read on. Mistakes in faxing and e-mailing personal information occur a lot more than we may think and certainly a lot more than they should. “*Personal information*” is “*information about an identifiable individual*” which would likely include almost any information on a patient. Since fax and email are quick and easy ways of sharing patient information with others, they are widely used.

Unlike a regular letter in the mail, which generally ends up at the correct address, fax and email can mistakenly be misdirected or intercepted and end up in the hands of unauthorized individuals. Patient confidentiality must be guarded with the same vigilance as paper medical records. According to the legislation in the *Personal Information and Privacy Act* (PIPA), and the *Freedom of Information and Protection of Privacy Act* (FOIPPA), all reasonable steps must be taken to protect personal information from unauthorized use. The Office of the Information and Privacy Commissioner for BC ([www.oipcbc.org/pdfs/public/fax-emailguidelines\(Feb2005\).pdf](http://www.oipcbc.org/pdfs/public/fax-emailguidelines(Feb2005).pdf)) has a guideline on the transmission of health information by facsimile or email which is recommended reading for all physical therapists. The following is a brief summary of the guidelines:

- Fax machine should be dedicated and secure and accessible only to staff who are normally trusted with this information. This must be placed in a private and secure place away from unauthorized access. Sharing fax machine with non physiotherapists is discouraged.
- Fax and email addresses should be checked and rechecked before sending information. Programming for speed dial may reduce the chance of an error.
- Sensitive or confidential information sent by email should be encrypted with access allowed only to those with an access code.
- Senders of fax or email must be aware of the recipients fax machine or the security of the email account and who has access to it.
- It is recommended that the recipient be notified that confidential information is being sent, allowing for confirmation of receipt.
- Faxes or emails about urgent personal information should not be considered a substitute for personal communication. In many cases the recipient may not be accessing their email or the fax can remain in the in-tray.

Remember that physiotherapists should take common sense precautions to reduce the risk of unauthorized access to personal patient information. It’s an ethical requirement.

**Other Resources:**

- College of Physicians and Surgeons of British Columbia. Fax- Use of facsimile transmission and email by physicians. Available from: <https://www.cpsbc.ca/files/u6/Fax-Use-of-Facsimile-Transmission-and-Email-by-Physicians.pdf>.
- Canadian Health Information Management Association. Professional Practice Brief. Facsimile transmission of health information. Ontario: Canadian Health Information Management Association; 2008.

*Submitted by the Standards of Practice Sub-committee*

## INQUIRY SUMMARIES

### Professional Misconduct

The Inquiry Committee moved to investigate a registrant's conduct under section 33(4) of the *Health Professions Act* for a potential breach of an Undertaking with the College.

Following an investigation into this matter the Inquiry Committee determined that there was information before it to substantiate the allegation that the physical therapist had breached his Undertaking and decided under section 33(6)(c) of the *Health Professions Act* to act under sections 36(1)(c) and 36(1)(d) of the *Health Professions Act* and request the physical therapist to:

- a. Consent to a reprimand and
- b. Consent to the suspension of his registration as a physical therapist with the College of Physical Therapists of British Columbia for a period of two months.

### Professional Misconduct

The Inquiry Committee moved to investigate a registrant's conduct under section 33(4)(c) of the *Health Professions Act* for professional misconduct in offering to pay a patient a substantial amount of money if the patient signed a statement absolving him from any wrong doing in a complaint filed against the physical therapist with the College.

Following an investigation into this matter the Inquiry Committee determined that based on the materials before it and concerns about possible professional misconduct under section 53 of the College's Bylaws there was cause to take action against the physical therapist under section 36(6)(c) of the *Health Professions Act* to act under sections 36(1)(c) and 36(1)(d) of the *Health Professions Act* and request the physical therapist to:

- a. Consent to a reprimand and
- b. Consent to the suspension of his registration as a physical therapist with the College of Physical Therapists of British Columbia for a period of two months.

### Professional Misconduct

The Inquiry Committee moved to investigate a registrant's conduct under section 33(4)(c) of the *Health Professions Act* for professional misconduct based on allegations that the physical therapist was billing the Medical Services Plan for physical therapy services rendered during the term of his suspension.

Following an investigation into this matter the Inquiry Committee determined that on the face of the information before it this could be explained as a clerical error and therefore there was no reason for the committee to take action against the physical therapist under the *Health Professions Act*. The file was closed.

### Professional Misconduct

The College received a written complaint against a physical therapist alleging that the physical therapist used foul language in the complainant's presence, made comments that could allegedly be sexual in nature and touched her thigh in a manner that made her feel uncomfortable. Following an investigation the Inquiry Committee determined to act under section 33(6)(c) of the *Health Professions Act* to act under section 36(1)(c) of the Act and request that the physical therapist agree to a reprimand for use of unprofessional language in the workplace and to undertake to not repeat such behavior.

### Professional Misconduct – Billing

The College received a written complaint against a physical therapist alleging that the physical therapist over charged the complainant for two treatment sessions.

Following an investigation the committee determined that there was no reason for it to take action against the physical therapist under the *Health Professions Act* for having breached the College Bylaw Standards of Practice sections:

s.57(1)(a) - Standards of Practice - Business Practice Standards - A registrant must not charge fees for services which have not been provided;

s.57(4) - Standards of Practice - Business Practice Standards - Where the client is assessed a fee for physical therapy services, the client must be notified of the charges in advance and

s.57(5) - Standards of Practice - Business Practice Standards - The physical therapist shall verify all accounts rendered on a fee-for-service basis for his or her services. The file was closed.

### Professional Misconduct

The College received a written complaint against a physical therapist alleging that the physical therapist spoke to the complainant in an unprofessional manner and questioned why he was not back at work following his injury.

Following an investigation the committee determined that there was no reason for it to take action against the physical therapist under the *Health Professions Act* for having breached the College Bylaw Standards of Practice section 55(1.6) - Responsibilities to the Client: Physical therapists are responsible for recognizing their limitations, continuing to develop their own level of competence, and confirming clinical diagnosis and management in those areas of practice in which they have been educated. The file was closed.

**Professional Misconduct**

The College received a written complaint against a physical therapist alleging that the physical therapist told the complainant that his injury was cured but proceeded to treat him and then allegedly refused to document in his clinical record her comment that he was cured.

Following an investigation the committee determined that there was no reason for it to take action against the physical therapist under the *Health Professions Act* for having breached the College Bylaw Standards of Practice section 55(1.6) - Responsibilities to the Client: Physical therapists are responsible for recognizing their limitations, continuing to develop their own level of competence, and confirming clinical diagnosis and management in those areas of practice in which they have been educated. The file was closed.

**Professional Misconduct – Billing**

The College received a written complaint against a physical therapist alleging that the physical therapist treated an individual who suffers from Alzheimer without her, nor the family's consent, billed the Medical Services Plan for these treatments and did not document the physical therapy assessment or care plan.

Following an investigation into this matter the Inquiry Committee determined that based on the materials before it and concerns about possible professional misconduct under section 53 of the College's Bylaws there was cause to take action against the physical therapist under section 36(6)(c) of the *Health Professions Act* to act under sections 36(1)(c) and 36(1)(d) of the *Health Professions Act* and request the physical therapist to:

- a. Consent to a reprimand and
- b. Undertake to not repeat the conduct regarding billing that resulted in the complaint.

**Incompetence – Exacerbation of Injury**

The College received a written complaint against a physical therapist alleging that the physical therapist left the complainant unattended for a lengthy period of time while the complainant was receiving acupuncture/cupping. This resulted in a burn to the complainant's upper back.

Following an investigation into this matter the Inquiry Committee determined that based on the materials before it and concerns about possible professional misconduct under section 53 of the College's Bylaws there was cause to take action against the physical therapist under section 36(6)(c) of the *Health Professions Act* to act under sections 36(1)(c) and 36(1)(d) of the *Health Professions Act* and request the physical therapist to:

- a. Consent to a reprimand and
- b. Undertake to not repeat the behavior of leaving her patients unattended for an extended period of time.

**Non-compliant with the criminal record review requirement under the *Criminal Records Review Act* and therefore in breach of the College Bylaw 55(2.1)**

Thirteen registrants were in non-compliance with the criminal record review requirement under the *Criminal Records Review Act* and therefore in breach of the College Bylaw 55(2.1).

Following notification from the College Inquiry Committee these registrants submitted the necessary documents to the College for processing. The College determined that there was no reason for it to take action against the physical therapists under the *Health Professions Act* for having breached the College Bylaw 55(2.1). The files were closed.

**Professional Misconduct**

The College received a written complaint against a physical therapist alleging that the physical therapist had been sexually abusing the complainant's daughter for several years. The letter was addressed to the Physiotherapy Association of British Columbia. A written request to readdress the complaint to the College did not result in the College receiving a letter of complaint. Consequently the College's Inquiry Committee moved to investigate the physical therapist's conduct under Section 33(4) of the *Health Professions Act* and a new file was opened.

**Professional Misconduct (Conduct Unbecoming a Physical Therapist)**

The College received notification of criminal charges laid against a registered physical therapist and moved to investigate the physical therapist's conduct under Section 33(40) of the *Health Professions Act*.

Following an investigation into this matter the Inquiry Committee determined that there was sufficient information before it to substantiate the allegation. The committee decided under Section 33(6)(c) of the *Health Professions Act* to act under section 36(1)(d) of the *Health Professions Act* and request the physical therapist to:

- a. Consent to the suspension of his registration as a physical therapist with the College of Physical Therapists of British Columbia for a period of four (4) months,
- b. Consent to not provide any physical therapy assessment or treatment services to any female minor under the age of nineteen (19) years of age until such time as he provides the Inquiry Committee with a psychiatric evaluation that he is no longer at risk to treat a female minor and
- c. Consent to a permanent restriction on providing internal pelvic examinations and treatment on female minors.

**Professional Misconduct**

The College received notification of criminal charges laid against a physical therapist and moved to investigate the physical therapist's conduct under Section 33(40) of the *Health Professions Act*.

The physical therapist was charged with fraud in excess of five thousand dollars contrary to Section 380(1)(a) of the Criminal Code.

The allegations are that the physical therapist provided physical therapy services while not a registrant of the College and billed a third party payer for these services using a registered physical therapist's provider number.

The Inquiry Committee lost jurisdiction over this matter when the physical therapist did not renew his registration for 2009. The file was closed.

**Professional Misconduct**

The College received a written complaint against a physical therapist alleging that the physical therapist provided a false invoice to a third party payer for the purchase of a TENS Unit for a patient. In addition the College was advised that the physical therapist was charged with fraud pursuant to Section 42,1(2)(b) of the Criminal Code of Canada related to this matter.

The Committee thoroughly reviewed all the evidence before it. On the basis of the Provincial Court of British Columbia's decision to find the physical therapist not guilty of fraud pursuant to Section 42,1(2)(b) of the Criminal Code of Canada there was no reason for the Committee to take action against the physical therapist under the *Health Professions Act* for having breached the College Bylaws section 53(1)(n) – submitting an account or charge for services that the registrant knows is false or misleading and Section 57(1)(a) - Standards of Practice - Business Practice Standards - A registrant must not charge fees for services which have not been provided. The file was closed.

**NOTICE TO THE PROFESSION****Mr. Jacob (Jaap) Kalkman – Registration #03198**

As a result of Mr. Jacob (Jaap) Kalkman pleading guilty to an offence under section 152 of the Criminal Code of Canada in the Supreme Court of British Columbia, Mr. Kalkman consented to enter into an Undertaking with the College of Physical Therapist of BC arising from this conviction which has resulted in the following restrictions placed on his rights to practice:

- i. a four month suspension commencing on January 1, 2009 on all his rights to practice physical therapy and to the use of all related professional titles;
- ii. to not provide any physical therapy assessment or treatment services to any female person under the age of nineteen (19) years until Mr. Kalkman provides evidence to the Inquiry Committee that he will not at any time in the future present a risk to female patients who are minors; and
- iii. a permanent practice restriction to providing any internal pelvic examination, assessment or treatment of any female person under the age of nineteen (19) years.

**Mr. Laurence Wong – Registration #04812**

As a result of Mr. Laurence Wong's conviction under Section 163 of the Criminal Code in the Provincial Court of British Columbia, Mr. Wong consented to enter into an Undertaking with the College of Physical Therapist of BC which has resulted in the following restrictions placed on his rights to practice:

- i. a suspension on all his right to practice physical therapy and to the use of all related professional titles until December 21, 2009;
- ii. to not provide any physical therapy assessment or treatment services to any female person under the age of nineteen (19) years for a period of five (5) years; and
- iii. upon expiration of the practice restriction in paragraph (ii) a permanent practice restriction that prevents Mr. Wong from providing physical therapy services of any kind to any minors unless that minor is accompanied by an adult person who remains present at all times during the provision of physical therapy services to that minor.

**In Memoriam****Karen Yim**

May 16, 2009

Richmond, B.C.

**ARE YOU MOVING?  
CHANGING YOUR STATUS?  
CHANGING YOUR NAME?  
MAIL OR FAX COUPON TO:**

Registration Program  
College of Physical Therapists of B.C.  
302-1765 West 8th Avenue  
Vancouver, BC V6J 5C6  
Phone: (604) 730-9193  
Fax: (604) 730-9273  
Email: registration@cptbc.org

**MOVING OR CHANGING JOBS?**

Name: \_\_\_\_\_

Full: \_\_\_\_\_ Inactive: \_\_\_\_\_ Interim: \_\_\_\_\_

Effective date of change: \_\_\_\_\_

**New Home Address**

\_\_\_\_\_  
\_\_\_\_\_

Phone/Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**New Business Address**

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone/Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**CHANGING YOUR NAME?**

Reg. No. \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

Attach a copy of official change of name form or marriage certificate and \$25 each for a new certificate or registration card.

**GOING INACTIVE**

**CHANGE MY REGISTRATION STATUS**

\_\_\_\_\_  
(Print Name) & (Signature)

\_\_\_\_\_  
Registration Number

I am a full registrant in good standing with the CPTBC and intend to cease practice as a physical therapist in British Columbia. If I choose inactive registration, I understand that as an inactive registrant I no longer need to carry malpractice insurance, may not work in BC as a physical therapist and **MUST** renew my registration by December 31. Please change my registration status to:

- Cancelled in good standing
- Retired
- Inactive\*

on \_\_\_\_\_ (m/d/y)

\*If you choose inactive registration, please be aware of the following:

1. You must be a full registrant to qualify for inactive status. You must request this change in writing, either with this form, with a letter to the Deputy Registrar or on your annual renewal form.
2. You **must** change to inactive registration in BC if you no longer carry malpractice insurance.
3. There is no refund in whole or part of the annual registration fee when you change status during the year.
4. Inactive registrants may not work as physical therapists in any capacity, either clinically or non-clinically **and must report practice hours on renewal of registration.**
5. Inactive registrants continue to be listed in the register, receive the newsletter and any College mailouts.
6. To change from **inactive to full** registration at **any time during the year** you must first contact the office and obtain an application package. Allow three weeks for processing. Call the Deputy Registrar if you have any questions.

### ADVERTISING RATES

The College of Physical Therapist newsletter **Update** is published three times per year (spring, summer and fall).

Contact the College for submission deadlines.

<b>Rates:</b>	\$100	up to 3¼" x 3¼"
	\$150	3¼" x 4½"
	\$200	3¼" x 8½"
	\$400	full page (black and white)

Contact the College for quotes for color ads

### WHO TO CONTACT AT THE COLLEGE

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