



**CPTBC**

College of Physical Therapists  
of British Columbia

# Update

newsletter

Fall 2014 • Volume 16 • Issue 3



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January 31, 2015

April 25, 2015

July 18, 2015

September 26, 2015

November 28, 2015

## Your 2015 registration renewal is due by January 1, 2015!



Pursuant to section 44(3) of the College Bylaws, please be advised that your registration with the College of Physical Therapists of BC must be renewed by January 1, 2015.

### Instructions

- Your login ID and password will be emailed to you on November 28, 2014.
- Online renewal will be available as of 8:00 am PST on December 1, 2014.
- Login at [www.cptbc.org](http://www.cptbc.org) and click on the renewal link on the upper left-hand side of your profile page.
- To retrieve your password – find your registration number on the Registrant Public Directory as you will need it to retrieve your password, or call the office at 604 730 9193 and we will be pleased to resend your login information to you.

### Registration Fee

	December 1, 2014 to January 1, 2015	LATE FEE January 2, 2015 to January 31, 2015	REINSTATEMENT February 1, 2015 to December 31, 2015
Full, Interim, Limited	\$425.00	\$510.00 (fee +20%)*	\$573.75 (fee + 35%)**
Inactive	\$100.00	\$120.00 (fee +20%)*	\$135.00 (fee + 35%)**

\* Bylaws Section 44(6)

\*\* Bylaws Section 44(7)(c)

*Remember, you must not work as a physical therapist in BC if your registration is cancelled on February 1st!*

**Registration Information continued on page 3...**

## Office Hours During the Holiday Season

The office will maintain regular office hours (8:30 am – 4:30 pm) during the holiday season with the exception of the following day:

Wednesday December 24, 2014

8:30 am – 3:00 pm

The office will be closed on Christmas Day, Boxing Day, and New Year's Day.



## Save the Date

### 2015 Annual General Meeting and Physiotherapy Forum:

**Saturday April 25, 2015** at the Marriott Pinnacle Hotel  
1128 West Hastings Street Vancouver, BC

*Attending the Annual General Meeting is open to all (no charge).  
There will be a nominal charge for the Forum.*



## Please Note:

- Please contact the College immediately if you plan to change your registration from *inactive* to *full* for 2015.
- The College Registration Committee does not meet between December 10, 2014 and January 7, 2015. Consequently, NO applications for change-of-status, from *inactive* to *full*, or new applications will be processed during this time. Apply early – the Committee can approve your application with an effective date of January 1, 2015.
- **Don't want to pay before December 31<sup>st</sup>?** Complete your online renewal any time in December and send us a cheque post-dated for December 31<sup>st</sup>.
- **Going to *inactive* status? Having problems changing your status online?** Before changing status to *inactive*, go to the employment section on your Profile page, edit the

Employment Status to *not working* or *retired*, then edit your employer by setting an expiry date for your employment (setting a date into the future is allowed), unclick the Primary Employment box, and click Save. Set the expiry date for any other employers as well.

- **Everyone**, please provide an estimate of your 2014 year-end Practice Hours.\*\* (See definition below.) This information is important for Health Human Resources planning and is used extensively by government and researchers for many purposes.

\*\* *Practice hours, in the context of the College Bylaws, are defined as hours worked in physical therapy practice. This includes clinical practice, physical therapy administration, teaching, management, research, and consultation where the knowledge, skills, and abilities of a physical therapist constitute the basis for the job responsibilities.*

*It does not include continuing education, volunteer work, professional association or College activities, vacation leave, sick leave, family leave, leave of absence, education leave, or statutory holidays.*

- Please make sure that only one email address is linked with your registrant's account. An attempt to add two addresses will cause an error in the system and we will not be able to reach you by email.

Contact the College at 604 730 9193 or email at [registration@cptbc.org](mailto:registration@cptbc.org) if you have any questions.

## A Message to Clinic Owners

You will notice that a new field has been added to the Workplace section of the database requesting that you identify yourself as the owner of the

clinic where you are working. Please complete this section if you own the clinic as this will enable the College to contact you more easily in the future.



## A Message from the Board Chair

Dear Registrants,

It has been a busy year for the College and our staff, and there is much to update you on since my last message.

If you were able to attend the College AGM, you would have witnessed the Oath of Office taken by Board Director Anne Harris and myself. This has usually been performed at the Board meeting following the AGM, however, this year it was decided to recite the Oath at the AGM itself. Our Oath of Office is something the Board takes very seriously. We hope that by making this ceremony more public and visible, it will help to demystify some of the responsibilities that each Director takes on in joining the Board.

The Board was in an unusual position of being able to appoint a Director to fill a vacancy. This occurred when the call for nominations only revealed two candidates for three positions. After much discussion at the following Board meeting, the Board agreed on a candidate and was delighted when Heather Leslie (our former MPT student representative) accepted the appointment. Heather has proved to be a valuable addition during her time as a student representative. Please join me in welcoming Heather to the Board of Directors.

Earlier this year, the College ran a pretest to assess the state of the Quality Assurance Program (QAP). I am pleased to say that the pretest was a success. We have learned a lot about the way the system works and also obtained some preliminary data which was very useful to our psychometrician. Some of you will have already received an invitation to be involved in the pilot test this November. Thank you to everyone who has agreed to participate. The pilot test is another important step in the development of a defensible program.

Over the next 12 months, I encourage you to visit the QAP page of the CPTBC website. We will be providing regular updates on the progress of the Program's development.

Recently the College was notified that there will be an increase to the staffing levels in the Ministry of Health offices. This is welcome news. It means that our College, and several others who have been waiting for ministry approval of our Bylaws, are likely to have this approval in the foreseeable future.

As you are no doubt aware, the primary role of the College is the protection of the public. This is achieved

through a number of the College's initiatives and activities. We all know that the decisions of the Inquiry Committee are the most frequented part of this newsletter. A lesser-known role of the College is the protection of our titles as "physical therapist" and "physiotherapist". Over the last year there have been several complaints requiring the Board's attention relating to the unlawful use of our protected titles. The College has been successful in preventing this unlawful use of title from continuing. I want to highlight this as an example of one of the many ways that the College is working for you not only by protecting the public, but also by protecting the integrity of the profession.

In a past message I mentioned that the Health Profession Regulators of BC had begun an advertising campaign. You may have seen the ads in a bus shelter, newspaper, or even visited their website ([www.bchealthregulators.ca](http://www.bchealthregulators.ca)). The message is clear and simple: health professionals in BC are regulated and require a license to practice. The campaign continues this year with a focus on minority groups and new immigrants who may be unaware of clinical health regulation in BC. Keep an eye out for these ads coming soon to TV audiences.

As part of our ongoing plan to increase the knowledge network of the College and stay abreast of current news and issues affecting our profession, we have had representatives attend regulatory conferences; one such conference being the Canadian Network of National Associations of Regulators (CNNAR). It is not only an excellent way to share ideas and updates with our colleagues from other provinces, but also a great opportunity to hear of issues and concerns affecting other regulators such as engineers and the real estate industry. It is evident that we all face similar issues and pressures when it comes to self-regulation.

In closing, I would like to personally thank all the College staff, executive officers, Committee chairs, and Committee members for their continued dedication. The College of Physical Therapists of BC is a very functional organization with increasingly engaged registrants who care about the profession and its future.

Sincerely,  
Phil Sweeney, Chair  
Board of Directors



## Nominations Committee

### Call for Nominations for Board of Directors Positions

Are you interested in making a valuable contribution to your profession?

Do you want to gain experience and insight into professional health regulation issues including registration, inquiry, discipline, quality assurance, patient relations, legislation and finance?

Are you interested in learning more about the *Health Professions Act* and the College Bylaws, and in gaining some insight into the legal process?

If so, now is the time to consider serving on the College Board.

NOMINATIONS ARE NOW OPEN for three Board positions, each to be elected for a two-year term.

The College Board has a total of nine members: six are physical therapists

elected by College registrants and three are public representatives appointed by the Ministry of Health. Two physical therapy student representatives from the University of British Columbia's Department of Physical Therapy also attend the meetings.

Board members are expected to attend all Board meetings and to serve on one or more College Committees. Board meetings are held a minimum of five times a year, usually on Saturdays in Vancouver. Some Committee meetings occur around the same time as Board meetings to facilitate travel for out-of-town members.

Full registrants from all parts of the province, who practice either in the public or private sector, are encouraged to accept nominations for the three upcoming vacancies on the Board.

For further information about this opportunity, please contact the College

Nominations Committee c/o the Registrar at [brenda\\_hudson@cptbc.org](mailto:brenda_hudson@cptbc.org) or 604 730 9193. Nomination forms can be obtained from the College office by contacting Susan Fawcett at 604 730 9193 or [susan\\_fawcett@cptbc.org](mailto:susan_fawcett@cptbc.org)

**Deadline for Nominations:**

**February 24, 2015**



## Finance Committee

The Finance Committee is seeking a physical therapist to join its Committee.

The mandate of the Committee is to assist the Board in fulfilling its oversight responsibilities under the *Health Professions Act*.

Subject to the powers and duties of the Board the Finance Committee is responsible for:

- a) reviewing and recommending financial policy to the Board;
- b) implementing Board-approved policies;

- c) reviewing the budget development process and making recommendations to the Board for revisions as required;
- d) developing an annual budget for the Board's review and approval;
- e) reviewing the monthly financial statements provided to the Board;
- f) preparing financial reports as requested by the Board;
- g) making recommendations to the Board on registration and other fees payable to the College for financial planning; and

- h) receiving and reviewing the Auditor's Report for Board approval.

The Committee meets six times per year. At least three of these meetings are from 5:15 pm – 6:15 pm in the College boardroom. The remaining meetings are held at 12:15 pm by teleconference.

For further information contact the Registrar at [brenda\\_hudson@cptbc.org](mailto:brenda_hudson@cptbc.org) or 604 730 9193.



# Quality Assurance Program Update

## Annual Self Report (ASR)

As of October 31, 2014, the 2014 cycle of the Annual Self Report (ASR) will already be complete!

There were a few registrants who contacted the College to discuss the new 'rank order format' question in the Annual Self Report this year. The physical therapists who volunteer to write the ASR questions were asked to draft some self-quiz questions using the rank order format as an alternate question type. What has become clear with the two ASR rank order questions this year is that there may be variation in the order that a physical therapist performs some steps, depending on the context of the question. The questions were set based on assigning tasks to physical therapist support workers; in particular, getting patient consent for the support worker's involvement in patient care, and ensuring that the support worker is competent. The 'correct' ranking indicated that patient consent comes first, followed by

ensuring competence; which matches the order the 'steps in assigning a task' are listed in Practice Standard No. 3.

The question that arose was "Why would I get patient consent before ensuring the support worker is competent? If I establish that he/she is not competent for a given task, then there is no need to ask for patient consent." In this scenario, the difference in practice would likely relate to the details of the practice context. For example, if I routinely work with an RA and we have worked in the general surgery unit for two years, I may ask the patient if it is okay for the RA to participate in their care, and then discuss the details of the assignment and ensure competence as the second step. However, if I am working with a new RA, or I'm filling in for another physical therapist, I might decide that I should discuss the task and ensure competence as the first step, prior to asking for patient consent. In the second scenario, I might want to establish that the RA is

comfortable and competent in carrying out the task I intended to assign before bringing it up with the patient. As a result, the rank order question could still meet the Practice Standard requirement if steps 1 and 2 were reversed. It demonstrates that where a rank order question is used, it must be in a scenario where the Practice Standard would in fact be breached if the order was incorrect; perhaps in an infection control question where infection control procedures must be carried out in a specific order for them to be effective. The discussion around this question has been very useful and will help the item writers determine what types of questions might be suited to the 'rank order' format if it is used again in the future.

## Registrant Competence Assessment (RCA) 2015 NOTICE

Please be advised that the first full administration of the Registrant Competence Assessment (RCA) will take place November 1 – 15, 2015 (exact dates to be determined). In early 2015, half of all full and limited registrants will be selected and notified. All registrants will have to complete the RCA once every six years. Please refer to the 'Physical Therapists' tab on the College website for further information.

## Registrant Competence Assessment – update and information on analysis

By the time you read this article, the pilot test of the Registrant Competence Assessment will have taken place.

It is anticipated that registrants who completed the pilot test will receive their results in late January. One of the purposes of this test is to establish the time it takes to do a proper analysis of the RCA results and, as promised in an earlier newsletter issue, I will explain this stage in more detail.

This analysis is not done by the College itself; it is performed by two firms based in British Columbia. CSCW Systems Corporation, which creates and delivers the online environment for the RCA, does the initial quality checks on the data to ensure that it is complete for each individual. This process can take two weeks before all of the data is encrypted and sent to our evaluation and measurement consultants. The measurement consultants will complete their own quality control checks before proceeding to analyse the individual and aggregate results. This process may be time-consuming due to the fact that registrants were able to choose to complete the pilot in one or two of the four practice contexts (Adult and Older Adult Cardiorespiratory, Adult and Older Adult Musculoskeletal, Adult and Older Adult Neuromuscular, Child and Youth). This means that the measurement consultant will have 10 possible ‘exam forms’ (4 single context forms and 6 combined forms) to analyse.

The RCA is a criterion-referenced assessment; i.e. each registrant is compared to a standard rather than to the performance of the group. The

standard required to pass the exam was determined during test development concurrently with writing the exam questions (items). The registrants who authored items for the RCA assigned an estimated level of difficulty to each item through a “standard-setting process.” The level of difficulty of each ‘exam form’ is then determined by the level of difficulty of all of the cases/questions that make up that particular form. The level of difficulty of the ‘exam form’ is the standard that each registrant must meet in order to pass the RCA pilot test.

The measurement consultants will look at each question on each form and identify any questions that did not perform as expected. For example, on a multiple choice question where you must select one answer from four options, if a large number of people chose one of the wrong answers and few chose the correct answer, this question may be identified as requiring review prior to finalizing the scoring of the exam. The list of questions is forwarded to the College for review by a panel. The panel looks for errors in assigning the correct answer, and it looks at the reference cited for the correct answer to determine if the correct answer needs to be changed or not. The panel’s decisions are then sent to the measurement consultants so that the scoring can be conducted. This process takes up to a week.

Once the scoring has been conducted, each individual’s score is compared to the standard set for his or her respective form. For example, the score for a registrant who completed the RCA in the Child and Youth practice context will be compared to the level of difficulty for the set of cases and questions that comprised the Child and Youth form. Similarly, a registrant who

elected to do Adult and Older Adult Cardiorespiratory will be compared to the standard (level of difficulty) on that form.

At this stage, an additional quality control process is initiated for any registrant whose score falls below the standard for the form he or she completed. The quality control process involves: producing a pdf version of the registrant’s RCA showing the answers he or she selected; comparing the pdf to the original computer generated data for the registrant to make sure that his/her responses were accurately recorded; and then hand-scoring to ensure the initial scores were accurate. This process is repeated for each registrant whose score is lower than the standard and may take a few days.

Once individual items (cases and questions) have been adjusted if necessary and individual registrant scores are deemed to be accurate, the measurement consultants turn their attention to examining the reliability and validity of the RCA. By extension, this means looking at the reliability and validity of each of the 10 exam forms. Reliability pertains to the likelihood of the same registrant completing the RCA again and achieving the same result; it reflects the degree to which scores are free of errors of measurement. Validity refers to the degree to which the intended interpretation of the RCA is supported: does the RCA discriminate between the competent physical therapist and the non-competent physical therapist. This is a critical stage and can take a couple of weeks.

Once the scoring and analyses have been completed, the College convenes the Board of Examiners to review the administration of the RCA and the analysis of the results.



## Quality Assurance Program Update – continued

The Board of Examiners are physical therapy registrants appointed by the College Board of Directors and are guided in their deliberations by the measurement consultant. They will review a summary of any incidents that occurred during the RCA and how they were managed, and they may be asked to review other specific incidents in order to decide how they should be managed. The Board of Examiners will also look at the scoring and analysis results, and will be asked to confirm the passing score (i.e. the standard set for each of the forms) in light of all the accumulated information, including the validity and reliability evidence. They may also decide not to accept the results of the RCA, either from a particular form or as a whole, in the event that they lack confidence in the validity and reliability as evidence to

support the use of the RCA. They will not receive information that could identify individual registrants, either connected to reported incidents or to analysis and scoring results. The Board of Examiners meets for a series of two-hour discussions over a one-to-two week period.

If the Board of Examiners decides that the RCA was administered fairly, and that it (each form) was an accurate assessment of continuing competence of physical therapists in BC, individual results will be compared to the confirmed passing score. A report will be generated for each registrant who completed the RCA pilot test and the reports will be reviewed for accuracy before being issued.

Because of the November timing of the RCA, we also need to factor in the statutory holidays in December and

the challenge of convening volunteer registrants for the panel to review specific questions and the Board of Examiners at that time of year. For the pilot, we expect to be able to issue individual results towards the end of January. We hope you will understand that for maximum confidence in the RCA results it is important not to rush the quality control processes, the scoring and analysis, and the reviews of results by the panel and the Board of Examiners. Nonetheless, another goal of the pilot test is to seek ways in which to maximize efficiency so that results of future administrations of the RCA can be provided to registrants as quickly as possible.

If you have any questions, please contact Chris Smerdon, QA Program Manager at [chris\\_smerdon@cptbc.org](mailto:chris_smerdon@cptbc.org) or by phone at 604 730 9193.

### RCA Pilot Update

From an initial sample of 348 registrants, drawn using a stratified random method, 251 were entered into the system for the pilot test. Of those, 173 found proctors and booked their preferred timeslot (from three options) before the deadline. At the time of booking, the registrants also chose the practice context(s) they would complete the pilot test in. See table at right for their responses.

Practice Context	Number of Registrants
Adult and Older Adult Cardiorespiratory	14
Adult and Older Adult Musculoskeletal	98
Adult and Older Adult Neuromuscular	20
Child and Youth	15
Adult and Older Adult Cardiorespiratory AND Adult and Older Adult Musculoskeletal	1
Adult and Older Adult Cardiorespiratory AND Adult and Older Adult Neuromuscular	8
Adult and Older Adult Cardiorespiratory AND Child and Youth	0
Adult and Older Adult Musculoskeletal AND Adult and Older Adult Neuromuscular	13
Adult and Older Adult Musculoskeletal AND Child and Youth	2
Adult and Older Adult Neuromuscular AND Child and Youth	2



## Comings and Goings

### Aidan Dennis

The College is pleased to announce that Aidan Dennis joined our staff in August. Aidan recently relocated to Vancouver and brings with him over 10 years of customer service, administrative, and management experience. He is currently pursuing a graduate degree in public health. In addition to supporting the Quality Assurance Committee and Quality Assurance Program, Standards of Practice Subcommittee, and Patient Relations Committee, Aidan is responsible for the front desk operations including answering the telephone and ensuring that your needs are met. Aidan can be reached at [aidan\\_dennis@cptbc.org](mailto:aidan_dennis@cptbc.org)

## Moving to an Electronic Newsletter

At its September 2014 meeting, the Board approved the College moving towards an electronic/digital newsletter within the next year. This decision was prompted by the fact that the cost of printing and mailing almost 4,000 newsletters has escalated dramatically over the past few years. Currently, the production of three yearly newsletters costs approximately \$35,200.00. The cost can be reduced to approximately \$6,200.00 with this change in distribution. The College will continue to print a small number of newsletters for those registrants who require a 'hard' copy and those who have requested that the College not send them emails containing commercial information.

Please make sure that you 'deselect' the 'Consents to Email Communication' box in the contact section of your profile when you renew your registration if you do not want to receive the electronic newsletter.

## Retired Physiotherapists Group of BC (RPG - BC)

On June 12, 2014, a group of retired and 'soon-to-be' retired physical therapists met for an afternoon of fun to rekindle old friendships at Hycroft Mansion in Vancouver. The event was a great success and will be repeated in 2015.

If you are retired, semi-retired or 'almost retired', and would like to be on the Retired Physiotherapists Group of BC mailing list, please email us at [rpg.of.bc@gmail.com](mailto:rpg.of.bc@gmail.com)

Mark your calendars for June 11, 2015 from 2:00 pm - 6:00 pm for the second annual gathering of the RPG at the University Women's Club of Vancouver at Hycroft. Registration details for this event will be emailed to you in January 2015.



## Business Practice Standards and Conflict of Interest

*“I’m a physical therapist who works in a private clinic that is not owned by a physical therapist. Lately I’ve been feeling uncomfortable with some of the business practices at the clinic. The clinic makes it clear that they prefer us to sell a pre-paid ‘block’ of treatment sessions to our patients, and they want me to see more patients per hour than I feel comfortable with. I’m also feeling pressure to encourage patients to buy equipment that the clinic sells, and to refer my patients to other in-house providers such as the massage therapist. It’s starting to feel like a conflict of interest.”*

Sometimes it’s difficult to determine exactly what is making you feel uncomfortable if the clinic practices have shifted slowly over time. It can take time to realize that the clinic policies have slid over a line that may put you in a conflict of interest.

It is important to remember that registered physical therapists are accountable individually to meet College regulation, regardless of the workplace. The College does not have jurisdiction to regulate who owns a physical therapy business, and cannot make non-physical therapists comply with College Bylaws and Practice Standards. This means that even if you are not a business owner, it is a good idea to be familiar with College Bylaw 57 – Business Practice Standards (<http://cptbc.org/resources/bylaws/#fiftyseven>) and Practice Standard No. 8 – Conflict of Interest (<http://cptbc.org/wp-content/uploads/2013/10/PracticeStandards8.pdf>).

If you have concerns about the business practices at the clinic, ask yourself whose interests are being

served by the new clinic policies? As a physical therapist, our duty is owed to our patients. If our clinical decisions are motivated by financial gain rather than by the patient’s interest, it may be considered a conflict of interest. Practice Standard No. 8 defines a conflict of interest as “a breach of an obligation to one’s professional ethics which has the effect, or intention, of advancing one’s own interest or the interest of others in a way detrimental to the interests of the client, or potentially harmful to the integrity of the physical therapy profession”.

Bylaw 55, section 2.2 of the College Code of Ethics states: “Physical therapists must comply with the business practice standards outlined in the bylaws and not compromise professional judgment and integrity with motives of profit and personal advancement.” Consider whether a reasonable physical therapist looking at the same patient information would make a similar decision regarding recommendation of equipment purchase, referral to another provider, or number of recommended treatment sessions?

College Bylaw 58, sections 1 and 2 indicate that where products are recommended for purchase, or where there is a referral to another practitioner, it must be for the benefit of the client rather than for financial gain, and must consider the client’s preference of supplier or provider. Make sure that where equipment is being recommended for purchase or a referral is being made to another provider, that you offer them several options for suppliers or providers, and respect that it is the patient’s right to choose.

Keep in mind that if the clinic owner isn’t a regulated health professional themselves, they may be unaware of ethical obligations and business practice standards set out by Colleges; making it especially important that the individual physical therapist is clear about requirements of College regulation. If you have questions or concerns about business practices, and would like to speak to someone at the College, please contact the Practice Advisor at 604 730 9193.





# Inquiry Summaries

## Professional Misconduct

The College received a written complaint against a physical therapist alleging that the physical therapist behaved inappropriately when massaging her waist area during treatment. She alleged that the physical therapist's touching was inappropriate, unnecessary, and made her feel uncomfortable.

Following an investigation the Inquiry Committee concluded that there was insufficient evidence before it to ground a finding of sexual misconduct. The lack of documented consent, assessment, and treatment as required by College Practice Standards No. 1 (Clinical Records) and No. 4 (Consent to Treatment) led the Committee to act under Section 33(6)(c) of the *Health Professions Act* and request under section 36(1)(c) that the physical therapist consent to a reprimand for failing to comply with College Practice Standards No. 1 and No. 4; and request under section 36(1)(d) that the physical therapist undertake and consent to write and submit a report to the satisfaction of the Committee, outlining the importance of Practice Standards No. 1 and No. 4 in the circumstances

of this complaint and how he intends to incorporate and comply with those Standards in his practice.

## Professional Misconduct

The Committee determined to act under section 33(4) of the *Health Professions Act* and moved to investigate a physical therapist based on his profile on his physiotherapy clinic's website for using the title "Doctor".

Following an investigation, the Committee determined that there was cause to take action against the physical therapist under section 36 of the Act for breaching Clinical Practice Standard No. 13 - Use of Title and Credentials. The Inquiry Committee determined to act under Section 33(6)(c) of the *Health Professions Act* and requested under Section 36(1)(a) that the physical therapist undertake not to repeat the conduct to which the matter relates.

## Remembering

Marion Priest  
May 22, 2014  
Abbotsford, BC

Louise Didyk  
June 22, 2014  
Vancouver, BC

Anton Rijken  
July 27, 2014  
Surrey, BC

Narinder Pal Chhina  
September 24, 2014  
Maple Ridge, BC

Jenifer Judith Thomson  
September 25, 2014  
North Vancouver, BC

Mary Martin  
October 20, 2014  
Grande Prairie, AB

## Advertising Rates

The rates below are for black & white or two colour (blue and black) ads. Please contact the College for quotes on full colour ads and artwork submission deadlines.

Sizes (black & white, black & blue, blue only)	Dimension	Advertising Rate
Full Page	7.75" wide x 9.5" tall	\$800.00
2/3 page (vertical format)	5" wide x 9.5" tall	\$600.00
1/2 page (horizontal format)	7.75" wide x 4.75" tall	\$400.00
1/3 page (vertical format)	2.45" wide x 9.5" tall	\$300.00
1/4 page (square format)	5" wide x 4.75" tall	\$200.00



## Who to Contact at the College

**Brenda Hudson,  
Registrar**

Corporate Programs  
(Legislative, Finance & Board)  
Email: [brenda\\_hudson@cptbc.org](mailto:brenda_hudson@cptbc.org)

**Ann Lo,  
Deputy Registrar**

Complaints & Newsletter  
Email: [ann\\_lo@cptbc.org](mailto:ann_lo@cptbc.org)

**Chris Smerdon,  
Quality Assurance Program  
Manager**

Quality Assurance Program  
Email: [chris\\_smerdon@cptbc.org](mailto:chris_smerdon@cptbc.org)

**Susan Paul,  
Practice Advisor**

Professional Practice Programs  
& Practice Questions  
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**Olga Nestic,  
Registration Coordinator**

Registration Program  
Corporation Program  
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**Susan Fawcett,  
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**Alexandra Nemes,  
Administrative Assistant**

Email: [alexandra\\_nemes@cptbc.org](mailto:alexandra_nemes@cptbc.org)

**Aidan Dennis,  
Administrative Assistant**

Email: [aidan\\_dennis@cptbc.org](mailto:aidan_dennis@cptbc.org)

*If you are moving, changing  
your name or status, please be  
sure to notify the College.*

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**College of  
Physical Therapists of BC**

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Update is a publication of the College of Physical Therapists of British Columbia and is intended to keep registrants informed about current professional issues.

It is published three times a year – spring, summer and fall.

Please address all newsletter items and queries to the Newsletter Editor.