Prince Edward Island College of Physiotherapy	POLICY TITLE:  Physiotherapist Resident License		
POLICIES & PROCEDURES	DATE CREATED: August 2019		
CATEGORY: Registration	DATE APPROVED:		
AUTHORITY: Regulated Health Professions Act and Physiotherapists Regulations	DATE REVISED: March 3, 2022		

#### **PURPOSE**

The Physiotherapists Regulations allow registration on the Physiotherapist Residents Register to a person who has not yet completed all requirements for unrestricted practice of physiotherapy under certain terms and conditions, including supervision and using the title "Physiotherapist Resident".

#### **DEFINITIONS**

Alternate Plan: The PEICPT final competency examination for licensure in substitute of the PCE – Clinical Component

PCE: Physiotherapy Competency Exam administered by the Canadian Alliance of Physiotherapy Regulators (CAPR) which includes a Written Component (PCE-W) and a Clinical Component (PCE-C)

Physiotherapist Resident: a member who has completed all other requirements for registration on the General Register of the PEI College of Physiotherapy, but not yet successfully completed the final competency examination.

Supervising Physiotherapist: a member in good standing on the General Register of the Prince Edward Island College of Physiotherapy, who has minimum 3 years of experience working in Canada with no restrictions, who agrees to assess and monitor the actions of a Physiotherapist Resident and has completed the Supervisory Agreement (Appendix A). Selection criteria is outlined in the *Framework for Entry to Practice Supervision by Physiotherapy Regulators in Canada*.

## **PROCESS**

The application to be a Physiotherapist Resident is completed online through the HMS portal. In order to be registered on the Physiotherapist Residents Register, the applicant must provide evidence that they have:

- successfully completed a credentialed university physiotherapy program as defined in section 12 of the *Physiotherapist Regulations* and is qualified in all other respects, and
- successfully completed the Written Component (PCE-W) and documentation has been received by the Registrar, and
- Successfully completed a jurisprudence test, and
- Completed the necessary registration requirements through the College's online HMS portal, and
- paid the appropriate licensing fee once advised to do so by the Registrar.

The applicant will be then be notified by the registrar, provided their registration certificate and license #, and be listed on the public website.

The Physiotherapist Resident license shall expire on the date determined by the Registrar or, within 15 days of the results of the Alternate Plan being made available to the applicant, whichever is sooner. A Physiotherapist Resident licence may be extended where the applicant has been unsuccessful in their attempt to pass the Alternate Plan but has registered to take the next offering of the exam. The Physiotherapy Resident is limited to two attempts of the Alternate Plan, if two failed attempts occur, the license will be revoked with no further opportunity to pursue a general register Physiotherapy license or work as a Physiotherapy Resident.

The PEICPT does not accept applications from individuals who have failed the PCE-C three times.

### TERMS OF PHYSIOTHERAPIST RESIDENT LICENSE

A Physiotherapist Resident shall only practice under the supervision of a Physiotherapist in good standing, who has 3 years of experience working as a physiotherapist in Canada without restrictions. The Supervisory Agreement (appendix A) must be completed and signed by the Physiotherapist Resident, and their supervising physiotherapist(s). A copy of this form is to be returned to the registrar, and the original kept by the supervising physiotherapist.

In accordance to the *Framework for Entry to Practice Supervision by Physiotherapy Regulators in Canada*, the requirements for supervision vary with the needs of the Physiotherapist Resident involved. This includes the duration of supervision and supervision approach. The supervisor is required to monitor the activities of the resident and must be on site to directly or indirectly monitor the activities of the resident until the initial evaluation is completed. Afterwards, the supervisor is expected to consider the individual needs of the resident and provide the necessary level of supervision to ensure safe delivery of physiotherapy services and protection of the public. The supervising physiotherapist must be immediately available either in-person or by phone during all times the physiotherapist resident is providing physiotherapy services to the public.

The supervisor and resident must meet on a regular basis to review the performance of the resident, and a record of these discussions is to be kept by the supervising physiotherapist. The meeting can be formal or informal, but should include the resident's understanding of relevant legislation, code of ethics, practice standards, scope of practice, consent, safety, confidentiality, professional conduct and performance, communication, documentation, use of support personnel and fees/billing. The supervisor must complete a Provisional Practice Monitoring Tool (Appendix B) every 12 weeks (or sooner if there are concerns) and submit it to the Registrar via email. This tool can also be found on the PEICPT website.

A Physiotherapist Resident Members holding a physiotherapist resident license are eligible to practice reserved activities as per subsection 18(1) of the Physiotherapist Regulations, which include:

- a) communicating to the person or the person's personal representative a diagnosis identifying a disease or disorder associated with physical dysfunction, injury or pain as the cause of symptoms of the person in circumstances in which it is reasonably foreseeable that the person or the person's personal representative will rely on the diagnosis;
- (b) administering oxygen by inhalation, where prescribed by a medical practitioner or nurse practitioner;
- (c) putting an instrument beyond the larynx in the provision of tracheal suctioning;
- (d) applying sound and electrical energy in the provision of treatment;
- (e) administering a drug prescribed by a medical practitioner or nurse practitioner, topically.

The Supervisor must also be actively practicing the same reserved activity. The supervisor must agree to monitoring those tasks as part of the supervision agreement.

Physiotherapist Residents are **NOT** authorized under any circumstances to perform the following reserved activities provided in subsection 19(1) of the Physiotherapists Regulations:

- a) putting an instrument or finger beyond the labia majora or anal verge to assess or rehabilitate pelvic musculature in relation to incontinence or pain disorders;
- (b) performing a procedure on tissue below the dermis in the form of dry needling in the treatment of pain and movement impairment;
- (c) moving the joints of the spine beyond the individual's usual physiological range of motion using a fast, low amplitude thrust in the treatment of neuro-musculo-skeletal pain and dysfunction.



# APPENDIX A Supervisory Agreement

The Prince Edward Island College of Physiotherapy (PEICPT) allows a graduate from a credentialed university degree program in Physiotherapy to be engaged in direct patient clinical care as a Physiotherapist Resident if:

- 1. They are under the supervision of a licensed Physiotherapist of the PEICPT
- 2. They have met all other requirements on PEI for licensure but have not successfully completed the Alternate Plan for Licensure for the PEICPT.

As a Supervisor, I agree to provide supervision of the Physiotherapy Resident identified below in accordance with the **Framework for Entry to Practice Supervision by Physiotherapy Regulators in Canada**, during the applicable period they are working on PEI. I also agree to complete all components of the **provisional practice monitoring tool** as outlined, and submit them to the PEICPT when required.

We both further agree to notify the PEICPT if this agreement is terminated for any reason, or if a new Supervisor needs to be assigned/added.

*Signature of Supervising Physiotherapist:		
Type/print name of PT Supervisor:		
	Date (D/M/Y)	
Signature of Physiotherapy Resident:		<del>-</del>
Type/print name of PT Resident:		
License number	Date (D/M/Y)	
Facilit(ies) of Employment:		
Address(es):	Telephone number:	
Initial Date of Employment:		
(Original copies to be kept by Supervising Physi	iotherapist)	

PLEASE MAIL A COPY OF THIS FORM TO THE PEICPT, OR EMAIL IT TO <a href="mailto:contact@peicpt.com">contact@peicpt.com</a>

P.O. Box 20078 Charlottetown Prince Edward Island Canada C1A 9E3

\* Supervisor must have a minimum number of 3 years of experience in independent practice in Canada



# APPENDIX B Provisional Practice Monitoring Tool

Name of PT Resident:		_ License #:
Date:		
Supervisors Name:		_ License #:
Telephone #:	Email:	

It is the responsibility of the Supervisor to immediately (within one business day) report to the College if the Resident has performed any act of professional misconduct, or of incompetence, or if the Physiotherapist Resident appears incapacitated.

The following documents are available on the College website **www.peicpt.com** to help you to complete the Provisional Practice Monitoring Tool.

- Physiotherapist Regulations
- Code of Ethics
- > Standards for Practice
- College Policies
- Position Statements

Please return to this form to the Registrar via email at <a href="mailto:contact@peicpt.com">contact@peicpt.com</a>
Or mail to:

**Prince Edward Island College of Physiotherapy** 

ATTENTION: Registrar PO Box 20078

Charlottetown, PE C1A 9E3

best correspon	•	npression of the		•	d. Circle the number which tion. Each section will provide
practice. Such	legislation (dep	endent on the p	oractice setting	=	and its implications for their egulated Health Professions
Strongly Disag	ree		S	Strongly Agree	
1	2	3	4	5	
Describe or co	mment on any	issues raised or	concerns in thi	s area:	
recognizes and	l understands t emonstrates ho	he issues relate	d to confidention ness with patie	ality and privacy; re	f Ethics for Physiotherapists; spects patient rights and e related to ethical practice.
1	2	3	4	5	
Describe or co	mment on any	issues raised or	concerns in thi	s area:	
-			•	rpractice of physiot	herapy and demonstrates an vironment.
Strongly Disag	ree		9	Strongly Agree	
1	2	3	4	5	

The topics below were chosen as key areas to be monitored as the College is aware that these are important areas where physiotherapists are more likely to encounter problems. Please consider the Physiotherapist

Describe or comm	nent on any	issues raised or	concerns in th	is area:		
		-		•		oncerning consent.
interventions, opt	tions risks a independer	nd benefits. The nt decisions, obt	ere is document	ted evidence th	at the Resident a	allows the patient related to practice
Strongly Disagree			:	Strongly Agree		
1	2	3	4	5		
Describe or comm	nent on any	issues raised or	concerns in th	is area:		
5. <b>Safety.</b> The Res caseload that can complaints.						
Strongly Disagree			9	Strongly Agree		
1	2	3	4	5		
Describe or comm	nent on any	issues raised or	concerns in th	is area:		
		<del> </del>				

demonstrates an	understandii	ng of matters co	ncerning clien	confidentiality and priv	vacy.
Strongly Disagree			S	trongly Agree	
1	2	3	4	5	
Describe or comm	nent on any i	ssues raised or o	concerns in thi	s area:	
clients. There is reprofessionally and	ecognition ard appropriate ity and sensi	nd adherence to ely with clients, t tivity with respe	personal and families and of ct to cultural c	tains professional, there physical boundaries. The her professional and su ifferences. There have l	pport staff. Clients are
Strongly Disagree			S	trongly Agree	
1	2	3	4	5	
Describe or comm	nent on any i	ssues raised or o	concerns in thi	s area:	
	n effectively	with client and o	=		y demonstrates an ability cues, obtaining feedback
Strongly Disagree			9	trongly Agree	
1	2	3	4	5	

6. Confidentiality/Privacy. The Resident understands and complies with the professional standards and

statutes and regulations related to retention, disclosure and release of information and records. The Resident

Describe or co	mment on any i	ssues raised or	concerns in thi	s area:	
-	<b>oing.</b> The Reside mprehensive, ti			elated to maintaining	client records. Audited
Strongly Disagr	ree		S	trongly Agree	
1	2	3	4	5	
Describe or co	mment on any i	ssues raised or	concerns in thi	s area:	
	,				
personnel or o personnel are	thers in accorda competent to ca	ance with the C arry out the ass	ollege's Standa signed duties, a	rds. The Resident ens	ne treatment plan to support sures that the support supervised. <i>This item may be from other staff.</i>
Strongly Disagr	ree		S	trongly Agree	
1	2	3	4	5	
Describe or co	mment on any i	ssues raised or	concerns in thi	s area:	

through chart and financial audits, discussions with the Resident, and input from other team members.						
Strongly Disagree Strongly Agree						
1	2	3	4	5		
Describe or cor				is area:		
Additional Com	nments:					
Signature of Su	pervisor:				Date:	

11. **Billing and Financial Reporting (if applicable).** The Resident demonstrates knowledge of and adherence to billing requirements. The Resident maintains and submits timely, accurate and objective information about the client's assessment, treatment plan, intervention and discharge plans. The Resident has full knowledge of how their billing number is used and avoids fraudulent practices related to billing. *This item may be assessed*