

Nova Scotia Physiotherapy Advisory Group

NSPAG Meeting - June 18, 2009 1-3pm

Meeting Minutes

Present: K. Taylor, L. Langley, T. Dutton, C. King, A. Fenety, A. Read, D. Titus, C. James, R. Tresidder

Absent: S. Anderson, K. Grosweiner, J. Ross, S. Rennie, D. Purcell

Item #1 Review of Last Meeting Minutes

Clarification from A Read: Masters program –referring to rehabilitation research masters...where are the graduates coming from, is there still a lot of uptake? A Fenety reported still a few intake, bulk of those applying are foreign but often are turned down due to credentials.

Schedule of meetings: results from doodle show there was no clear winner regarding times. Friday morning was the best time noted, although not perfect for anyone.

Item #2 NSPAG Priorities

Each group (public, private, CPA, Dal, NSCP) to determine what their priorities are for NSPAG to work on, referring to the project priorities generated from last meeting.

NSCP not yet submitted priorities but 4, 6, 7 and 11 were high on the list, as well as standards/competencies and leadership development. NSCP also noted that the executive director has been hired (Pat King), with a start date pending.

Provincial OT-PT Leadership chose priority 11, and 10

Dal School of PT has not been able to talk as a large group, but the opinion of the reps was that #2 was a priority. Also made note that Merv Ungerain has been newly hired as the associate dean of faculty of health professions. It was suggested that we try to get him at an NSPAG meeting, and that we need to plan it out strategically. Mr Ungerain has close ties with DOH. The hiring was announced yesterday, and he starts in the next week or two. The other priority would be around building capacity for leadership and education of PTs in the province.

NSPP chose #8, cost of doing business survey and how are we going to roll out the results of 2008. It was discussed that all aspects of practice will be affected by the cost of business survey, not just private practice. The other choice was #2, government advocacy.

NSPA chose #5 (loss of licensure in non-traditional roles) and #9 related to the communication/process of putting forward policy statements from college, e.g. visceral manipulation statement. Randy explained that from the college's perspective, it is important to write statements around some of these areas so that we don't lose our ability to practice it. Question as to what we need to have practice standards on. NSPAG could offer feedback for policies and practice standards from NSCP if they would like to use this venue. NSPA also chose #10 Interdisciplinary approach.

The members then needed to determine what of the priorities were the top two. A number of evaluation criteria were then constructed, to evaluate the level of priority each item was at for the group. Each evaluation statement was given a ranking of 1-10, 1 being the item meet the criteria at a low level,, 10 being an extremely high agreement with the criteria.

The criteria for selecting the priority were as follows:

1. It has high urgency for the profession.
2. It affects all 5 in a major way.
3. It has high impact for the profession.
4. Something that no single group can tackle on their own.
5. Is it easy to accomplish (quick wins)?
6. Has it been identified as a priority from the representing groups (NSPA, private, public, Dal, NSCP)?

| Item | Criteria | | | | | | Result |
|---|----------------------|---|---------------------------------|--|---|--|----------|
| | Selected by group(s) | It has high urgency for the profession. | It affects all 5 in a major way | It has high impact for the profession. | Something that no single group can tackle on their own. | Is it easy to accomplish (quick wins)? | |
| 1. We need to give the DOH feedback on the process | NO | | | | | | GONE |
| 2. Promoting NSPAG to DOH as first contact /first responder | Yes | 7 | 10 | 10 | 8 | 2 | Total 37 |
| 3. NSPAG report at AGM – Who writes report | NO | | | | | | GONE |
| 4. Leadership development 5. Loss of licensure in | Yes | 7 | 10 | 10 | 10 | 3 | Total 40 |

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|---|---------------------------------------|---|----|----|----|---|----------|
| <i>non-traditional roles</i> 7. <i>Master's program at School – Bridging?</i> <i>(combined):</i> Enabling PTs to be influential leaders | | | | | | | |
| #6 <i>Adding new curriculum to PT School</i> | NO | | | | | | GONE |
| #8 <i>The Cost of Business initiative</i> | Yes | 9 | 6 | 9 | 7 | 6 | Total 37 |
| #9 <i>Draft position statement on visceral manipulation</i> | Yes but felt it did not require NSPAG | | | | | | GONE |
| #10 <i>Identify projects with interdisciplinary / inter-professional approach</i> #11 <i>Discuss the lack of PT involvement Physical Activity Program in Diabetic Education Clinics.</i> <i>Combined:</i> Inter-disciplinary Projects | Yes | 9 | 10 | 10 | 10 | 6 | Total 45 |

Action: Start with top two priorities (*Interdisciplinary Projects* and *Enabling PTs to be Influential Leaders*) and see how we make out. Next meeting we will brainstorm and action plan these two priorities. As it was noted that there are smaller items that would be quick wins for NSPAG, in particular related to the new provincial government coming in, C James volunteered to draft letter to Darryl Dexter and Minister of Health introducing NSPAG.

Item #3 Next meeting: To brainstorming and action plan to two priorities. September 11th, 8:30am-10:30.