

Audit Report on Registration Practices in accordance with section 22.8 of the Health Professions Procedural Code

For the Office of the Fairness Commissioner

January 15, 2009



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CHARTERED ACCOUNTANT

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Section 5815 Special Report

Auditor's Report on Compliance with Agreements, Statutes and Regulations

To the Fairness Commissioner:

I have audited the College of Physiotherapists of Ontario's compliance from July 16, 2007 to July 15, 2008 with the criteria established by section 22.8 of the Health Professions Procedural Code, described in sections 15-22, 22.2-22.4, 22.6-22.7 and 22.9-22.11 inclusive, set out in Schedule 2 of the Regulated Health Professions Act, 1991 and the interpretation of such agreement as set out in the sections following this report. Compliance with the criteria established by the provisions of the agreement is the responsibility of the management of the College of Physiotherapists of Ontario. My responsibility is to express an opinion on this compliance based on my audit.

I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I plan and perform an audit to obtain reasonable assurance whether the College of Physiotherapists of Ontario complied with the criteria established by the provisions of the legislation referred to above. Such an audit includes examining, on a test basis, evidence supporting compliance, evaluating the overall compliance with these criteria, and where applicable, assessing the accounting principles used and significant estimates made by management.

In my opinion, during the period from July 16, 2007 to July 15, 2008, the College of Physiotherapists of Ontario was in compliance, in all material respects, with the criteria established by section 22.8 of the Health Professions Procedural Code, described in sections 15-22, 22.2-22.4, 22.6-22.7 and 22.9-22.11 inclusive, set out in Schedule 2 of the Regulated Health Professions Act, 1991.

Toronto, Ontario

LICENSED PUBLIC ACCOUNTANT

January 15, 2009

CHARTERED ACCOUNTANT

Introduction

According to "Framework for Audits of Registration Practices – Guidance for Ontario's Regulatory Bodies", a document produced by the Office of the Fairness Commissioner (OFC) dated August 2008, "the OFC's mandate is to ensure that regulatory bodies have transparent, objective, impartial and fair practices to register, certify or issue licences to qualified persons who wish to practise their professions in Ontario. Fair registration allows all applicants to be well received and given fair treatment when applying to become members of those professions".

This independent audit, and others like it, will help the OFC to ensure that regulatory bodies are meeting their obligations and may assist them in improving their registration practices.

The Fairness Commissioner (FC) has previously consulted with the regulatory bodies on the cost, scope and timing of audits. OFC staff designed the audit framework after consultations with the regulatory bodies and after reviewing written feedback from them and from the Federation of Health Regulatory Colleges of Ontario.

The regulatory bodies must undergo audits of their registration practices so that the FC may assess their compliance with applicable legislation. The auditors must then submit reports of the audits to the OFC.

The regulatory bodies also have a duty to cooperate with auditors, to provide auditors with any assistance that is reasonably necessary and to furnish information regarding their registration practices and their compliance with the legislation.

I can confirm that the College of Physiotherapists of Ontario (CPO) cooperated fully with us during the audit and provided assistance and furnished all information we requested in a timely manner.

Abbreviations used in this report

Alliance	Canadian Alliance of Physiotherapy Regulators
CICA	Canadian Institute of Chartered Accountants
CPO	College of Physiotherapists of Ontario
FC Fairness Commissioner	
HPARB	Health Professions Appeal and Review Board
OFC	Office of the Fairness Commissioner
PCE Physiotherapy Competency Exam	
RC	Registration Committee (of the CPO)
RHPA	Regulated Health Professions Act, 1991
The Code	Health Professions Procedural Code (Schedule 2 of the RHPA – see Appendix 1)

The Scope of Audits for Health Regulatory Colleges

For health regulatory colleges such as the CPO, the OFC relies upon sections 15-22, 22.2-22.4, 22.6-22.7 and 22.9-22.11 of the Health Professions Procedural Code (the Code) to determine the scope of audits. The Code is set out in Schedule 2 of the Regulated Health Professions Act, 1991 (see Appendix 1 for a copy).

Section 22.2: Fair Registration Practices: General Duty

This section contains the general requirement that health regulatory colleges provide registration practices that are transparent, objective, impartial and fair.

Sections 15-22, 22.2-22.4

These sections set out areas in which health regulatory colleges must have registration practices that are transparent, objective, impartial and fair, including:

- the provision of information;
- timely decision-making, responses and reasons;
- internal review or appeal systems;
- the provision of information on appeal rights;
- the provision of information on documentation of qualifications;
- qualifications assessment systems;
- training systems; and
- the provision of access to applicant's own records.

Sections 22.6-22.7, 22.9-22.11

These sections contain provisions for reports to the OFC, including reports arising out of a health regulatory college's own review of its registration practices.

Objectives, Scope and Limitations

My statutory function as auditor of the CPO's registration practices in accordance with section 22.8 of the Health Professions Procedural Code (Code) set out in Schedule 2 of the Regulated Health Professions Act, 1991, as amended (RHPA) is to provide a special report under Section 5815 of the Canadian Institute of Chartered Accountants (CICA) Handbook to the Fairness Commissioner.

I conducted my audit in accordance with Canadian generally accepted auditing standards and have issued an audit report.

An auditor conducting an audit in accordance with Canadian generally accepted auditing standards obtains reasonable assurance that CPO's registration practices have complied with the criteria established by the provisions of the Act referred to above.

It is important to recognize that an auditor cannot obtain absolute assurance that material discrepancies in the registration practices will be detected because of:

- Factors such as use of judgment, and the use of testing of the data underlying the registration practices;
- Inherent limitations of internal control; and
- The fact that much of the audit evidence available to the auditor is persuasive rather than conclusive in nature.

Furthermore, because of the nature of fraud, including attempts at concealment through collusion and forgery, an audit designed and executed in accordance with Canadian generally accepted auditing standards may not detect a material fraud.

Further, while effective internal control reduces the likelihood that misstatements will occur and remain undetected, it does not eliminate that possibility. For these reasons, I cannot guarantee that fraud, error and illegal acts, if present, will be detected when conducting an audit in accordance with Canadian generally accepted auditing standards.

Definitions

In order to make a determination as to whether the CPO's registration practices are transparent, objective, impartial and fair, it is necessary to start out with a clear understanding of what these terms mean. According to dictionary.com, the terms have the following meanings.

Transparent

- Open, frank and candid;
- Free from guile or deceit;
- Easily understood or seen through (because of a lack of subtlety);
- Fully defined, known, predictable.

We interpreted this to mean that the registration process must be simply explained and therefore easily understood. Simple words should be used whenever possible.

Objective

- Not influenced by personal feelings, interpretations, or prejudice; based on facts; unbiased: i.e. *an objective opinion*;
- Based on observable phenomena; presented factually: i.e. *an objective appraisal*;
- Belonging to immediate experience of actual things or events.

We interpreted this to mean that registration decisions must deal only in the facts of each situation with no room for unsubstantiated biases, ideas or pre-conceived notions.

Impartial

- Not partial or biased, fair, just: i.e. *an impartial judge*;
- Unprejudiced;
- Showing lack of favouritism;
- Free from undue bias or preconceived opinions; "*an unprejudiced appraisal of the pros and cons*"; "*the impartial eye of a scientist*";
- Not favouring one more than another, treating all alike, unbiased, disinterested, equitable, and just.

We interpreted this to mean that no favouritism should be shown to any one applicant over another.

Fair

- Free from bias, dishonesty, or injustice: i.e. *a fair decision*; *a fair judge*;
- Legitimately sought, pursued, done, given, etc., proper under the rules: i.e. *a fair fight*;
- Honest, just, straightforward.

We interpreted this to mean that the registration process must make decisions based on the merits of the applicant and give them ample opportunity to make further disclosures in the event of a potentially negative conclusion as to their status.

Audit Approach

Our approach to the audit included procedural review of processes as well as the use of substantive testing of transactions where warranted.

For example, where we wanted to test whether the CPO made registration decisions within a reasonable time, we reviewed their published guidelines about what a reasonable time for registration decisions would be (procedural review) and then selected a sample of applications during the audit period to check for evidence that the time frame was met (substantive testing).

In reaching an overall conclusion as to whether the CPO registration process was transparent, objective, impartial and fair, we kept the definitions just listed in mind and used professional judgment in each circumstance and throughout the audit. We found it easier to keep an eye out for anything that clearly did not meet with those objectives, in other words cases that were *not* transparent, objective, impartial or fair.

Where substantive testing was required, we used a sample size of approximately 8 percent of the population. This is consistent with the methodology of ten used on financial statement audits where materiality, the basis of test extent determination, is often set at between 5 and 10 percent of the population.

In order to make sure our sample selection was completely random and not biased in any way, we selected the first record and the middle record on each page of the listing of the entire population for new or returning registrants and category changes.

The following is a summary of the population as well as the number of samples tested during the audit period July 16, 2007 to July 15, 2008:

	Population	Sample Tested	Percentage Tested
New or Returning Registrants	378	23	6.1%
Category Changes	325	29	8.9%
Registration Committee Decisions	10	3	30.0%
Appeals to the Health Professions Appeal and Review Board	1	1	100.0%
TOTAL	714	56	7.8%

Evaluation of Registration Practices

Our audit approach was to address the general and specific duties of health regulatory bodies as described in the Health Professions Procedural Code sections 15 through 22.14 (the Code) to determine whether the CPO was in compliance during the audit period.

We addressed the following eight areas:

1. Information for applicants
2. Timely decisions, responses and reasons
3. Internal review or appeal
4. Information on appeal rights
5. Documentation of qualifications
6. Assessment of qualifications
7. Training
8. Access to records

The following sections list the questions we dealt with in each area and the procedures we carried out to reach our conclusions.

1. Information for Applicants

a) Does the regulatory body provide information about its registration practices to persons applying or intending to apply for registration?

Yes.

A Google search of the words "Physiotherapy Registration Ontario" yields the CPO website (www.collegept.org) as the first result. Clicking on that link brings you to their website where the "Registrant's Guide 2008" is prominently displayed on the home page. This guide is in pdf (portable document format) with online navigation provided on the website so you can quickly go to the relevant section. It was recently updated in January 2008.

Also displayed prominently on the home page is the "Guide for Internationally Educated Physiotherapists". This is a neasy-to-navigate simple on-line guide that includes sections on becoming a physiotherapist in Ontario, a checklist to determine if you are ready to apply for registration, language requirements, education credentials, common questions, links and an evaluation form.

Furthermore, under the heading "For Registrants" on the home page, there is the "Application for Registration Guide" available in pdf form that is succinctly written and makes the registration process easy to understand. The website also provides information about registration categories, applying to the College, annual registration, professional incorporation, internationally educated physiotherapists, as well as the Mutual Recognition Agreement (that allows licensed physiotherapists in one province to more easily move to another).

b) Is it providing information about the amount of time that the registration process usually takes?

Yes.

On the CPO website under the section "For Registrants – Entry to Practice/Registration - Applying to the College" it states: "Please remember that once you have submitted your completed application package it will take ten business days for College staff to process your application and issue a certificate of registration."

This same information is also provided in the "Application for Registration Guide" on page 5.

Recommendations: The Registrant's Guide is a little hard to navigate as each section loads as a separate pdf file. Consideration could be given to making the sections available on the website (i.e. as html) similar to the Guide for Internationally Educated Physiotherapists as well as a separate pdf of the entire guide.

The CPO may also wish to make a FAQ (Frequently Asked Questions) section prominently available on the home page.

c) Is it communicating the objective requirements for registration?

Yes.

The Application for Registration Guide has a checklist that lays out the steps clearly and includes links to the Application for Registration.

The national federation of provincial physiotherapy regulators called the Canadian Alliance of Physiotherapy Regulators (the Alliance) also provides details of a three step process for credentialing as well as the PCE examination process on their website at www.alliancept.org.

Recommendations: There is a good summary of the steps to become a physiotherapist in Ontario on the Ministry of Citizenship and Immigration website at:

<http://www.citizenship.gov.on.ca/english/working/career/professions/physiotherapists.shtml>

The Ministry also has a flowchart, built in collaboration with the CPO, of the steps in the certification process that is available in pdf form at the bottom of the aforementioned checklist (See Appendix 2).

It may be beneficial to include a similar flowchart on the CPO website.

d) Does it explain which requirements may be satisfied through acceptable alternatives?

Yes.

The Alliance is responsible for reviewing applicants' credentials to determine whether education and experience is substantially equivalent to that of Canadian educated physiotherapists. The Alliance lists the three criteria it uses to determine this including education, eligibility to work as a physiotherapist in another Country as well as proof of language proficiency.

In addition, the CPO lets applicants apply under the Physiotherapy Mutual Recognition Agreement as an alternative to writing the Physiotherapy Competence Exam (PCE) written and clinical components when they have been licensed in another province.

e) Does it provide a fee scale?

Yes.

The CPO website lists the CPO fees for application (\$100), for Provisional Practice Certificate (\$70), Independent Practice Certificate (\$600) and annual registration (\$600).

Fees are also laid out in the Ministry of Citizenship's summary of steps referred to above in section c. It notes that the Alliance fees for credential review and the Physiotherapy Competency Exam (PCE) are \$725 and \$1,775 respectively.

The Alliance also provides a Fact Sheet called "Cost of the Physiotherapy Competency Exam" that also indicates the costs of the PCE.

There are no fees for review by the Registration Committee (RC) or for appeals to the Health Professional Appeal & Review Board (HPARB).

2. Timely Decisions, Responses and Reasons

a) Does the regulatory body make registration decisions within a reasonable time?

Yes.

CPO staff must process applications that meet all the registration requirements within ten days of receipt of completed application as per Page 5 of the Application for Registration Guide and their website.

February to April is the busiest time because all CPO members have to renew and therefore deadlines may not be met during this period.

CPO staff track ten day timelines by sending emails upon receipt of a completed application. The second email confirms acceptance and the registration package is then sent through the mail.

The RC takes 45 days to review all files referred to them, once the submission is complete.

If the RC has just met then a teleconference may be held to facilitate timelines.

If the applicant is not accepted they receive one-on-one coaching via telephone. Coaching also starts if the applicant has any questions regarding registration requirements.

Statistics are tracked using a "Balanced Score Card Indicator Tracking Tool".

Applicants have 30 days to assemble more information to support their application and to be considered by the RC.

Generally they submit a letter describing the circumstances and provide evidence to support extenuating circumstances. Other documentation includes: reference letters, resumes, note from Director.

Alliance timelines with respect to credential review vary (four to 22 weeks) according to the education program of the applicant (Page 1 of 2 from Alliance website "Credentialling Process").

There is a formal service agreement "Memorandum of Agreement between CPO and the Canadian Alliance of Physiotherapy Regulators" that details the understanding of each organization's roles.

A review of the Alliance Sept 13, 2008 "Presentation to CPO" indicated on page 12 that statistics reported an average of nine weeks to complete precedent files and 21 weeks to complete files without precedent.

Our sample testing of 52 CPO staff decisions revealed that 50 were made within the established time frame of ten business days from receipt of the completed application. This represents a 96% compliance rate which is well within the parameters of the definition of reasonable.

b) Does it give written responses to applicants within a reasonable time about all registration decisions and internal review or appeal decisions?

Yes.

A standard template email is used with approved applications and then the registration package is mailed. We verified timelines via date stamps (dates documents were received) and transaction confirmation (registration fees charged to credit card) in the applicant's file.

The RC renders decisions in writing. Three standard templates exist: approval, approval with terms/conditions and limitations, and denial cover letter. Both terms/conditions and denial decisions are sent with reasons for decision and information about Health Professions Appeal and Review Board (HPARB) appeal.

Our sample testing of 52 CPO staff decisions revealed that written responses regarding registration decisions are provided within established timelines.

There is a formal policy regarding content of written responses regarding RC decisions. There are seven standard templates for emails used to communicate CPO staff decisions for applicants and registrants.

Our testing of three of the ten RC decisions made during the audit period found that all three were made within established timelines (45 days from date that applicant completes his/her submission or from date that applicant waives his/her right to the 30 day period to make submissions).

In one case an applicant was not approved for Provisional Practice by the RC but was approved for Provisional Practice with Restrictions by CPO staff and the decision did not have to be taken to the RC.

There is a standard letter used to communicate that the applicant's file has been forwarded to RC called a "Committee Referral Letter".

Committee Referral Letters always quote the passages from the Regulated Health Professions Act 15(2)(a) or 15(2)(b) or 15(2)(c) that explain why the applicant's file was forwarded to the committee. Committee Referral Letters are accompanied by "Registration Committee FAQ".

Our testing of the three RC decisions indicated that all were provided in writing with clear rationale for the decision. Letters were two pages in length and were accompanied by information regarding appeals to HPARB. RC meetings seemed to be prepared for carefully; all factors to consider were clearly listed for RC members, as well as precedents.

3. Internal Review or Appeal

a) Does the regulatory body provide an internal review or appeal from its registration decisions within a reasonable time?

Yes.

The RC is involved with any application that does not meet any one of the registration requirements, for example, when an applicant answers "yes" to one of the Professional Conduct questions on the application. Involvement of the committee is also legislated under Schedule 2 of RHPA.

The RC at CPO uses a Balanced Score Card Indicator Tracking Tool to monitor their adherence to the 45 day target for decisions.

Our testing of three applicants who went to the RC indicated that in all cases the RC completed their review within the required 45 days.

b) Does it give applicants for registration the opportunity to make oral, written or electronic submissions about any internal review or appeal?

Yes.

The RC process is not a hearing. Applicants are not interviewed by the RC. It is a "paper review" so any documents can be submitted and will be considered. The RC could probably review an electronically recorded submission but this has never been requested.

Our testing of three applicants who went to the RC indicated that all applicants were notified they had an opportunity to make written submissions prior to the final decision being made.

4. Information on Appeal Rights

a) Does the regulatory body inform applicants of any rights they may have to request a further review of, or appeal from, a registration decision?

Yes.

If the RC denies an application they send information regarding the HPARB process in both cover letter and on a separate sheet.

In our sample tests of three applicants who went to the RC we found that all three were informed of their right to appeal to HPARB if they were notified that the RC had denied their application.

b) Are registration decision-makers separate from the decision-makers in internal reviews or appeals of those registration decisions?

Yes.

There are four different groups of decision makers : the Alliance, CPO staff, RC members and HPARB.

Decision makers would always be separate in an internal review because the RC is drawn from the CPO's Council and has no staff representation.

In our sample tests of three applicants who went to the RC we found that in all three cases the registration decision-makers at the CPO were not staff members.

5. Documentation of Qualifications

a) Does the regulatory body make available to the public its requirements for the documentation of qualifications that must accompany an application?

Yes.

All required information is on the CPO website or from Alliance website.

If an applicant doesn't have access to the internet then the information would be mailed out.

b) Does it give applicants information on acceptable alternatives to the documentation if they cannot obtain the standard documentation for reasons beyond their control?

Yes.

Acceptable alternatives include: the Alliance Step 3 for Credentialling "Language Proficiency Evaluation" with 5 different tests deemed acceptable (from Alliance website).

Published information includes "Educational Credential and Qualifications Assessment for Physiotherapists Educated Outside of Canada" pages 6-8 for Translation of Documents, Notarized Documents, Language Testing, Verification of Completion of Requirements for Degree.

Published information also includes pages 71, 72 and 76 of The Alliance's "Educational Credentials and Qualifications Assessment FAQ". The Alliance has policies to assist those who cannot obtain documentation. The policy includes guidelines for the recognition of a refugee's qualifications.

According to the Alliance document "Credentialling Program Policy and Procedures" which outlines the Alliance's policy for document requirements in the credentialling program, most people can get the documents but if an individual is from a country where this is difficult, Afghanistan or Somalia for example, then a statutory declaration would be accepted if the applicant can't get a copy of his/her degree or transcript etc.

6. Assessment of Qualifications

a) Does the regulatory body make its own assessment of qualifications in a way that is transparent, objective, impartial and fair?

Yes.

The CPO uses the Canadian Alliance of Physiotherapy Regulators (the Alliance) for examination services and credential evaluation services. This is collectively called "Evaluation Services".

Applicants currently apply to the Alliance first but this is being changed so that applicants will apply to CPO first (CPO can then better track applicant statistics).

The Alliance authenticates Canadian degrees and determines whether international degrees are substantially equivalent to the minimum educational requirements for Canadian educated physiotherapists.

The Alliance assists applicants and the registration process of the regulatory authority by making available Evaluation Services. The Alliance does not make any decisions with respect to the registration of individual applicants as such decisions reside solely with the applicable Regulatory Authority in their respective jurisdiction. This is clearly stated in all materials available to the public.

The process at the Alliance is as follows:

1. Credentials assessed;
2. Written exam;
3. Register for clinical exam;
4. Apply for provisional practice registration with the CPO (applicant's choice);
5. Pass the clinical exam;
6. Apply for independent practice with the CPO (applicant's choice).

The quality of the Evaluation Services is reviewed and maintained through the Monitoring and Evaluation Program (a comprehensive research and quality assurance program for credentialing). Both the credentialing and examination programs have published research agendas that receive input from members and the Board. Regular reports are received on progress and outcomes.

b) If it relies upon third parties to assess qualifications, does it take reasonable measures to ensure that the third parties make assessments of qualifications in a way that is transparent, objective, impartial and fair?

Yes.

The formal service agreement is the "Memorandum of Agreement between CPO and the Canadian Alliance of Physiotherapy Regulators". It was last reviewed in February 2005 and that is done every five years. However, it is presently under review.

The Alliance's FAQ and Evaluation Services Committee (ESC) report provides more details on the measures taken by both the CPO and the Alliance to ensure that qualifications are assessed in a way that is transparent, objective, impartial and fair. More detail is available in Alliance materials.

With respect to the standards the Alliance must operate within, there are guidelines in the Alliance's ESC report which is done every six months. The Credentials Review Committee (CRC) oversees the Monitoring and Evaluation Program. The Alliance also established an Equivalency Standards Review Working Committee in February 2006 to review its processes.

The ESC meets quarterly and had five teleconference calls in past 12 months.

Detailed reports on committee initiatives as well as statistics are gathered on first point of contact, number of applications processed, assessment timelines for non-precedent files, primary source countries, pass rates for both written and clinical components of exam, requests for administrative reconsideration (because of inability to sit exam or after failure).

Quality assurance processes related to credentialing include feedback from applicants and member regulators, credentialing evaluators, credentialing service providers as well as reports, and administrative audits.

Educational credentials assessment is assisted by the International Qualifications Assessment Service (IQAS) and World Education Service (WES) both qualified in the field of international educational and credential assessment.

Jan Robinson, Registrar & CEO of CPO and Lori Neill, CPO Council President, are both on the Board of Directors of Alliance as per The Alliance bylaw Part 4.3.

The Alliance Directory as at September 2008 provided:

- Jan Robinson on Executive Committee
- Jan Robinson on Registrar's Committee
- Two Ontario physiotherapists on Evaluation Services Committee
- One Ontario physiotherapist on Examination Steering Group
- Two Ontario physiotherapists on Written Test Development Group
- Four Ontario physiotherapists on Clinical Test Development Group
- Three Ontario physiotherapists on Board of Examiners

There was an assessment of the Physiotherapy Competency Examination (PCE) in June of 2007 that looked at content and other validity, reliability, test development and revision, scores, norms, and score comparability, test administration, scoring and reporting and supporting documents for tests.

7. Training

a) Does the regulatory body ensure that persons assessing qualifications and making registration decisions are trained?

Yes.

Both CPO staff who process the applications and all members of the RC receive extensive and on-going training. The "Registration Committee/Council Education" lists courses provided between June 2007 and Dec 2008.

CPO staff seem to receive fairly thorough orientation and external training. Training has included: "How to Write Decisions" by legal counsel Richard Steinecke. World Education Services offers training in "Reviewing international credentials".

According to the CPO, staff and RC members received training on human rights and tribunals, and fair registration practices in December 2008.

We sampled three CPO staff: Director, Entry to Practice; Coordinator, Entry to Practice; and Entry to Practice Associate.

All three CPO staff provided a "Training Summary" which lists all the courses, training sessions and conferences they had participated in. Furthermore the Director, Entry to Practice attested that CPO has regular meetings with the other RHPA Colleges (sometimes beyond RHPA) and that entry to practice and access to professions is discussed regularly (mostly informally) so the list of meetings where learning/training was accessed would be extensive.

b) Does it ensure that persons who make internal review or appeal decisions know how to hold hearings, if hearings are necessary?

Yes.

Human Resources files were not available but there was a list of RC members' attendance at meetings. Of five RC members sampled: The Chair and two other members all attended five training sessions during the audit period.

The RC has five members: three physiotherapists (two are council members) and two members of the public (appointed to council by the Ontario Government). There are 17 council members include seven public appointees.

All current RC members have prior experience with CPO, RHPA and attend an annual orientation to the RC that is held every summer.

The Council ensures that people are reappointed to the committee for consistency.

The RC members receive training from legal counselors that are starting to offer training in regulatory issues. The Committee Chair is signed up to do that and is trained on how to hold meetings.

c) Does it ensure that training in any special considerations that may apply in the assessment of applications is provided, and that the process for applying those considerations is taught?

Training in special considerations is provided by legal counsel Richard Steinecke on as-needed basis. For example, applicants have requested special considerations such as waiving the PCE exam for an applicant with 35 years experience.

8. Access to Records

a) Does the regulatory body give applicants access to records related to their application, upon written request?

Yes, if a request is made.

According to CPO staff the CPO has never had an applicant request their records. CPO staff indicated that they would release the applicant's file in its entirety with the exception of information regarding legal advice sought or received (for either the RC or HPARB).

b) Does it limit access only to the extent permitted in the legislation?

Yes, in some specific cases.

According to CPO staff, information that threatens a person's safety would not be released, as well one case came up where legal advice was obtained and the lawyer advised that the CPO was not required to release privileged material subject to lawyer client confidentiality.

c) Does it give the applicant partial access when records can reasonably be severed?

Yes.

See 8a.

d) Does it have a process for considering requests for access to records?

Yes.

See 8a.

e) Does it give applicants an estimate of any fee charged for access?

Not applicable.

According to CPO staff there would be no fee. Applicants would either review their file on CPO premises or would get a photocopy.

f) Is the amount of the access fee less than the amount prescribed by regulation or, if no amount is prescribed, does the amount reflect reasonable cost recovery?

Not applicable since no fee.

g) Does the regulatory body waive fees? If so, are these waivers based on fair and equitable reasons?

No.