

Canadian Physiotherapy Regulator Response to Bobos et al.

We are writing in response to Bobos et al.'s *A systematic review and meta-analysis of measurement properties of objective structured clinical examinations used in physical therapy licensure and a structured review of licensure practices in countries with well-developed regulation systems* published by PLOS One, August 3, 2021.

We thank the authors for their interest in this topic. Research in this subject area is important and highly valued. Unfortunately, we have significant concerns regarding the accuracy of this publication and the many potential misuses of the authors' findings.

The purpose of this letter is to address the context of physiotherapy regulation in Canada and the inaccuracies reported by Bobos et al. regarding the state of physiotherapy regulation in Canada. This response will focus on the following areas of concern:

- Definitions
- Regulatory Context
- Data Sources
- Factual Errors

1.0 Definitions

The authors purport to compare the regulatory system in Canada to “the educational and licensing components and policies of the physical therapy profession in countries with a well-developed regulation system around the world,” and “to investigate and report the ongoing competency assessments used for licensure renewals and performance controls” among these jurisdictions. The criteria for the author’s assessment of regulatory systems which they deemed to be “well-developed” are not stated. The authors state that inclusion “*was primary based on best-available, systematically recorded, online accessible data.*”

Canadian physiotherapy regulators would endorse that both the duration of formal regulation of physiotherapists, and the state and nature of such regulation would be relevant to the assessment of the maturity of regulatory systems. However, we are not aware of any assessment system that systematically evaluates the maturity of regulatory systems, nor any existing consensus on this topic.

2.0 Regulatory Context

As background, in Canada, the regulation of health care services is undertaken at the provincial or territorial government level. This means that provincial or territorial governments establish the regulations governing health professional practice, including that of the physiotherapy profession. In all 10 provinces the government has delegated the responsibility to regulate the physiotherapy profession to provincial regulatory colleges. In one territory [YT], physiotherapists are regulated by the Provincial Licensing and Regulatory Affairs branch of the territorial government. In the remaining two territories [NT and NU], local physiotherapy or other health regulatory colleges do not exist, however physiotherapists are required to maintain an active practice permit from one of the Canadian physiotherapy regulatory bodies.

Each provincial physiotherapy regulatory body establishes and enforces the Standards of Practice and Code of Ethical Conduct for their regulated members. The regulatory bodies are mandated through

legislation to establish standard processes for registration, continuing professional competence, and addressing complaints and professional conduct matters.

Core to the task of establishing standard processes for registration is the development and maintenance of registration requirements. Harmonized registration requirements have been adopted by Canadian physiotherapy regulators to facilitate inter-provincial labour mobility. These include requirements related to current registration, practice hours, education, examination, good character and reputation, and language proficiency.

Regulatory considerations, such as registration requirements, are policy decisions which must reflect a wide range of contextual factors including entry to practice education, realities of the clinical practice environment, and the extent of autonomy exercised by members of the profession in the jurisdiction regulated.

The context of Canadian practice is one in which physiotherapists frequently work as autonomous primary care providers, therefore the regulatory mechanisms employed to assure public safety would necessarily differ from the mechanisms required to assure patient safety when working in systems where physician referral and oversight is the norm and physiotherapist autonomy in clinical decision-making is limited. Entry to practice registration requirements, rightly, should be greater for practitioners working with greater autonomy. In our experience, these contextual considerations are not always aligned with the nature or perceived maturity of regulation in a given jurisdiction.

3.0 Data Sources

The authors report that the following jurisdictions were included in the policy review: Australia, New Zealand, Singapore, Hong Kong, United Kingdom, Ireland, Switzerland, Austria, Netherlands, Sweden, Norway, Denmark, Finland, United Arab Emirates, South Africa, Canada, and United States of America (USA). This convenience sample represents a heterogeneous collection of regulatory and practice contexts.

By including this diverse and heterogeneous sample of regulatory and practice realities in their discussion, the authors fail to recognize the significant differences in practice realities in the nations considered, and the resulting needs and challenges that physiotherapy regulation in these jurisdictions must address. Comparing regulatory structures and entry to practice registration requirements without considering the context in which the profession is practiced and acknowledging the extent of professional autonomy exercised by physiotherapists in these jurisdictions creates irrelevant and potentially dangerous comparisons. The policy decisions of regulators in these comparator jurisdictions will reflect the needs and context of the jurisdiction in question. While it is interesting to note these differences, the mere existence of difference does not necessarily mean that the policy decisions of Canadian physiotherapy regulators are inappropriate for the context and practice of the physiotherapy profession in Canada.

In addition, the authors report that their data collection included grey literature derived from websites of physiotherapy professional associations. By including information from both regulatory bodies and associations, they have failed to recognize that associations are not regulatory bodies and as such the information gathered from these sources is, at best, irrelevant to the discussion and potentially inaccurate.

4.0 Factual Errors

When reviewing the description of physiotherapy regulation within Canada, we note the following factual errors.

4.1 Regulation of Physiotherapy in the Northwest Territories and Nunavut

The authors state *“Northwest Territories and Nunavut were excluded, because the physical therapy profession is not regulated in these provinces.”*

There are 10 provinces [BC, AB, SK, MB, ON, QC, NB, NS, PE, NL] and 3 territories [YT, NT, NU] in Canada. All 10 provincial governments have delegated authority for the regulation of the physiotherapy profession to provincial regulatory colleges. In the Yukon [YT], physiotherapists are licensed through the Professional Licensing and Regulatory Affairs branch of the territorial government.

Due to the small number of regulated physiotherapists practicing in the Northwest Territories [NT] or Nunavut [NU], neither a regulatory body specific to the physiotherapy profession nor a regulatory affairs branch of the territorial government exist. Instead, physiotherapists seeking to practice in the NT or NU are required to hold an active registration in the jurisdiction of their choice. This should not be conflated with a lack of regulation of the profession in these provinces.

4.2 Education Policy

The authors state *“Canada requires a 2-year Masters level professional program degree following a 3–4-year bachelor degree in a health-related field with specific health course requirements, bringing the total years of study to 5–6 years.”*

This statement is incorrect. Students applying to physiotherapy entry-to-practice programs in Canada are required to have an undergraduate degree and meet prerequisite course requirements established by the physiotherapy education program to which they apply. The prerequisite courses vary depending on the entry-to-practice education program in question and are not established by physiotherapy regulators. Students applying to physiotherapy entry-to-practice programs are not required to have a degree in a health-related field.

Current registrants of Canadian physiotherapy regulatory bodies have diverse undergraduate educational backgrounds including undergraduate studies in arts, education, kinesiology, physical education and sciences.

The notable exception to the above are those individuals completing their entry-to-practice physiotherapy education in the province of Quebec. Of the five entry-to-practice physiotherapy education programs operating in Quebec, four require applicants to the Masters-level program to complete a Bachelors degree in physiotherapy as an admission requirement. The fifth program (McGill) accepts individuals with a Bachelors degree in another area of study provided they successfully complete a qualifying year of Master of Science studies, in addition to admitting students with a Bachelor degree in physiotherapy.

4.3 Examination Policy

4.3.1 Quebec

The province of Quebec has its own examination process and requires completion of the Physiotherapy Competence Examination only for individuals graduating from the University of Ottawa bilingual physiotherapy program and seeking registration in Quebec. Therefore, although the examination is employed by all 13 Canadian provinces and territories, it must be noted that its use in the Quebec context is limited.

4.3.2 Written (Qualifying) Examinations

The written component of the Physiotherapy Competence Examination does not have a fixed pass score and is in use by all 13 Canadian provinces and territories, although as noted above, its use in Quebec is limited. The authors' assertion that "*11 Canadian provinces... require additional written entry-level to practice competency exams*" is incorrect.

It is difficult to know which provinces and states the authors include in their assessment that "the vast majority (98%) of the provinces / states included in the analysis set the minimum passing score for the written examination at 66%." However, given that among 13 Canadian jurisdictions employing the written component of the PCE this would not be the case, we estimate that the proportion of jurisdictions with a fixed passing score to be considerably lower than the authors' report.

Although the authors' comments are related to examination policy for individuals who they refer to as "home graduates" the above information regarding the written examination requirement and pass score is true for all examination candidates seeking a practice permit in Canada, both Canadian and internationally educated. A key purpose of the requirement for both Canadian and Internationally educated individuals is to address issues of labour mobility.

4.4 Labour Mobility Considerations

Section 3.2.7 of the publication is titled 'Mutual agreements for international candidates' however several of the authors' comments in this section pertain to inter-provincial labour mobility rather than the mobility of international candidates. It is essential to distinguish between these candidate groups when discussing the intersect between registration requirements and labour mobility.

4.4.1 Interprovincial Trade Agreements

The *Canadian Free Trade Agreement* is an interprovincial trade agreement which applies to labour mobility in Canada and aims to enable any worker regulated in one province or territory to become regulated in another province or territory. The agreement facilitates permit-on-permit recognition for physiotherapists moving between jurisdictions.

Harmonized registration requirements are employed by Canadian physiotherapy regulators to facilitate inter-provincial labour mobility. These requirements include current registration, practice hours, education, examination, good character and reputation, and language requirements. However, applicants seeking permit-on-permit recognition remain subject to jurisprudence requirements (discussed in Section 4.5.1) when moving between jurisdictions.

It is also important to note that the *Canadian Free Trade Agreement*, made at the provincial and territorial government level, does not constitute an "application pathway through endorsement" as

stated by the authors. Within the CFTA, a provincial or territorial government may decline permit-on-permit recognition by successfully arguing that there is a material deficiency in skill, area of knowledge or ability of affected individuals.

4.4.2 Internationally Educated Physiotherapist Labour Mobility

It is important to note that the *Canadian Free Trade Agreement* applies to all regulated physiotherapists, both Canadian and internationally educated, who have been admitted to the General Register of a physiotherapy regulatory body in Canada. No Canadian physiotherapy regulator currently has a mutual recognition agreement with another nation regarding physiotherapist registration and permit-on-permit recognition.

To be admitted to the General Register of a physiotherapy regulatory body in Canada, an internationally educated candidate must first complete a credentialling process conducted by the Canadian Alliance of Physiotherapy Regulators. If, through the credentialling process, the candidate's education is determined to be "not substantially different" from that of Canadian-educated physiotherapist and provided language proficiency requirements are also met, the individual may be eligible to complete the written component of the Physiotherapy Competence Examination administered by the Canadian Alliance of Physiotherapy Regulators. Successful completion of the written component enables the candidate the opportunity to apply for a provisional or restricted practice permit and to apply to complete the clinical component of the Physiotherapy Competence Examination administered by the Canadian Alliance of Physiotherapy Regulators.

Once an individual has successfully completed the clinical component of the Physiotherapy Competence Examination, they become eligible to seek full registration in the Canadian jurisdiction of their choice. Once registered in one Canadian jurisdiction, they are eligible for permit-on-permit recognition enabled by the *Canadian Free Trade Agreement* should they seek to move between jurisdictions.

4.5 Other Registration Requirements

Following their discussion of the Physiotherapy Competency Examination and labour mobility, the authors go on to discuss other registration requirements for Canadian physiotherapists, including jurisprudence, ongoing competence and practice hours requirements.

Unlike the education and examination requirements, these additional requirements reflect registration requirements for regulated physiotherapists both at entry to the profession and to renew one's practice permit. The requirements vary slightly between jurisdictions.

4.5.1 Jurisprudence Requirements

Though referred to by different names in different provinces, jurisprudence requirements are common among Canadian physiotherapy regulators with no less than 10 of the 13 jurisdictions including some form of jurisprudence requirement for registrants. Of these, 7 [AB, BC, NS, NB, ON, PE, SK] employ a jurisprudence examination. In one instance [MB] the mechanism is an educational module that registrants must complete. As already noted, physiotherapists employed in the Northwest Territories and Nunavut Territory are subject to the jurisprudence requirements in the province in which they are registered.

In some instances, successful completion of the jurisprudence requirement is required prior to registration. In other instances, the requirement applies to registrants at the time of registration

renewal or at set intervals over the course of a physiotherapist's career as a regulated health professional.

Where jurisprudence examinations exist, they are designed as formative assessments of registrants', or potential registrants' knowledge of the rules governing their practice, including the Standards of Practice, Code of Ethical Conduct, bylaws and provincial legislation relevant to the physiotherapist's practice. Notably, no regulatory body employs jurisprudence examinations to assess clinical competence.

4.5.2 Ongoing Competency Policies

The requirement to administer a continuing competence program is a legislated responsibility of regulatory bodies, established in each Canadian jurisdictions' practice act or regulation. Ensuring that regulated physiotherapists maintain their competence and engage in activities to enhance the provision of professional services is key to public protection and achieving the objective of delivery of safe, quality physiotherapy services to members of the public by regulated members of the profession.

In describing the continuing competence program requirements currently in place, the authors incorrectly state *"Canada is slightly below average, requiring 19 CPD hour per year."*

Only 4 regulatory bodies [NS, NL, PE, YT] include a mandatory CPD hours requirement as part of their continuing competence programs. Of these 4 regulatory bodies, the average hours requirement is 25.5 hours per year (range 10-40) which is greater than the mean CPD hours requirement (23 hours) reported by the authors. The remaining 9 regulatory bodies in Canada **do not** include a CPD hours requirement as part of their continuing competence programs. This reflects the current state of the evidence regarding the lack of correlation between CPD hours and competent practice.

Other elements of continuing competence programs employed by Canadian regulators vary between provinces and include:

- College-selected mandatory learning activities.
- Professional portfolios including clinician-selected learning activities to address identified gaps or and learning goals.
- Annual self review of risks to practice.
- Practice visits or audits.

With regards to the discussion of audits to monitor program participation, the authors incorrectly state that the College of Physiotherapists of Manitoba does not perform audits of program participation.

4.5.3 Practice Hours Requirement

In addition to mandatory participation in continuing competence programs which may include formal continuing education or informal, self-directed learning, regulators in Canada require demonstration of currency of practice through the completion of a minimum number of hours in provision of physiotherapy services as a condition of ongoing registration. The hours requirement is established at 1200 practice hours during the last 5 registration years. This requirement is harmonized across Canadian jurisdictions.

5.0 Entry to Practice Delays and Access Concerns

In their introduction the author's state:

This has delayed the usual licensure process and prevented graduating physical therapist who have completed all the required elements of the professional training to be able to achieve timely licensure and could ultimately interfere public protection by reducing access to physical therapy.

Several aspects of this assertion are inaccurate and misleading.

Each Canadian physiotherapy regulatory body has its own approach to registration of individuals who have successfully completed their entry to practice education and are awaiting the opportunity to compete the clinical component of the Physiotherapy Competency Examination administered by the Canadian Alliance of Physiotherapy Regulators. The variations are a consequence of the fact that each jurisdiction has provincial legislation to adhere to. However, every regulatory body allows for registration of physiotherapists upon successful completion of the written component of the Physiotherapy Competency Examination.

In 100% of Canadian jurisdictions, individuals who have successfully completed the written component of the examination and who have met other registration requirements are able to apply to the provisional register or equivalent. In all Canadian jurisdictions, individuals can practice under supervision of a physiotherapist on the general register or under a restricted license while awaiting the opportunity to complete the clinical component of the examination.

There is some variation in how each Canadian jurisdiction addresses those individuals who were unsuccessful in an attempt at the clinical component of the Physiotherapy Competency Examination. In some jurisdictions an unsuccessful first attempt results in cancellation of the individual's provisional or restricted practice permit. In other jurisdictions cancellation of a provisional or restricted practice permit occurs following two unsuccessful attempts at the clinical component of the Physiotherapy Competency Examination.

Some current examination candidates are known to have attempted the clinical component prior to the examination disruptions and were unsuccessful in their attempt. In some instances, this has resulted in a cancellation of the individual's provisional or restricted practice permit. Due to the variation in policies regarding eligibility for a provisional or restricted practice permit, it is also known that some individuals who have been unsuccessful on a first attempt and whose provisional or restricted permit has been cancelled, have moved to jurisdictions with more lenient policies for provisional registrants, and have secured provisional permits in those jurisdictions.

It is therefore difficult to get an accurate estimate to the number of individuals currently prevented from practicing due to pandemic-related examination disruptions, though the actual number is known to be far lower than that which has been asserted by some advocacy groups. While it is regrettable that some candidates are prevented from practicing for this reason, the perspective of Canadian physiotherapy regulators is that this represents a reasonable balance between public access to physiotherapy services and the need to assure the quality and safety of those services.

6.0 Conclusions:

Physiotherapy regulators are consumers of evidence and employ evidence to inform policy decisions. As such we have a keen interest in the findings of research regarding assessment of competence and other regulatory issues.

We offer no comment regarding the quality of the research upon which the authors have based their conclusions but take note of the authors' acknowledgement that this review of the measurement properties of OSCEs was "limited by the low volume and quality of research" available to summarize.

We also note that several of the policy considerations included by the authors have little apparent relevance to the core question of whether an OSCE style examination is appropriate for use as an entry to practice assessment of competence, which is the apparent premise of the publication. However, the numerous inaccuracies included in the author's reporting of publicly available data regarding the state of regulation in Canada is cause for concern and must be corrected.

We note that the evidence presented suggests that there is a lack of evidence to support the use of **OSCEs in educational programs**. The relevance of research related to OSCE use in educational settings to the current use of OSCEs for assessment prior to granting a practice permit is unclear. We note that the use of OSCE-style examinations to assess competence prior to granting unrestricted practice permits to regulated members of other health professions within the Canadian context is not without precedent, particularly when the health professionals in question are engaged in high-risk or autonomous practice.

There is evidence that Canada is an outlier internationally when it comes to the use of an OSCE-style clinical examination prior to granting unrestricted practice permits to physiotherapists. However, the authors have not demonstrated that the Physiotherapy Competency Examination is unnecessary, that it constitutes an undue burden on healthcare professionals, nor that it has reduced access to physiotherapy services.

As already stated, Canadian physiotherapy regulators value high-quality, accurate research to inform policy decisions. However, we have significant concerns regarding the accuracy of this publication and the many potential misuses of the authors' findings.

On behalf of Canadian Physiotherapy Registrars
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