Attention:

Canadian Alliance of Physiotherapy Regulators (CAPR)

Board of Directors and Committees of The Board,

Canadian Provincial And Territorial Physiotherapy Regulators (Government of Yukon Consumer Services, College of Physical Therapists of British Columbia, Physiotherapy Alberta College & Association, Saskatchewan College of Physical Therapists, College of Physiotherapists of Manitoba, College of Physiotherapists of Ontario, Ordre Professionnel De La Physiothérapie Du Québec, College of Physiotherapists of New, Brunswick/Collège Des Physiothérapeutes Du Nouveau-Brunswick, Nova Scotia College of Physiotherapists, Prince Edward Island College of Physiotherapists, Newfoundland & Labrador College of Physiotherapists)

We, the registered physiotherapists of Canada strongly request the Canadian Alliance of Physiotherapy Regulators (CAPR) and relevant regulatory colleges to permanently eliminate the planned virtual and in-person clinical component of the Physiotherapy Competency Examination (PCE) based on the following facts and the best available evidence:

Fact #1: Based on the latest systematic review (Bobos et al 2021), the clinical PCE lacks sufficient reliability and validity despite inaccurate claims on the CAPR website ^{1, 2}.

Fact #2: There is no evidence, after 25 years of requiring the clinical PCE, that the examination has increased public safety as stated on the CAPR website ^{1, 2}.

Fact #3: CAPR has fundamentally changed an already low reliability and invalid examination, by transitioning from in-person to virtual. We are very concerned what aspects of PT skills will be examined in the virtual OSCEs since the literature is very clear that many skills cannot be examined (e.g. Physical examination, safety/handling). If online OSCEs plan to assess clinical reasoning then this can be done through written exams.

Fact #4: The virtual PCE has never been evaluated to examine its validity and reliability for testing entry-to-practice standards. Testing the reliability and validity of a high-stakes examination such as the PCE should be a mandatory evaluation ⁴, as there are serious consequences to the professional and personal lives of those who may not successfully complete it.

Fact #5: The Medical Council of Canada (MCC) and the United States Medical Licensing Examination (USMLE) have eliminated the practical component of their medical licensing exams^{5, 6}. They state that public safety will not be affected by the elimination of the practical component of the examination.

Fact #6: Relevant allied health professions including, occupational therapists, athletic therapists, respiratory therapists, nurses, dentists and physicians do not require a "mock" clinical examination to assess graduates from an accredited university in Canada. Further, there is no published data, that these healthcare providers impose undue harm to the public, compared to registered physiotherapists who have completed the clinical PCE.

Fact #7: Registered physiotherapists in Quebec are not required to complete the clinical PCE ⁷. Furthermore, there is no evidence based on any published data that physiotherapists in Quebec are less competent or impose a greater threat to the public safety than those in other provinces and territories in Canada.

Fact #8: There is no published evidence that those who have successfully completed the PCE have greater competency or that they pose less of a public threat than the physiotherapists who never completed the PCE prior to its conception in1994. The PCE has not stopped the fact that the most common issues that are filed/reported are billing, and sexual assault complaints. Not "they forgot to put the brakes on".

Fact #9: Canada has the most expensive PT credentialing exam in the world at \$2815 ⁸ as compared to USA at \$485 ⁹, New Zealand at \$354 ¹⁰ and a practical component is not required in countries such as USA, UK, Australia, New Zealand and in fact not in any of the 17 countries with well-developed PT regulation systems ¹. Furthermore, there is no evidence that these jurisdictions produce less competent clinicians than Canadian physiotherapists who have completed the clinical PCE.

Fact #10: The CAPR has stated that the elimination of the practical component of the PCE is "simply not possible without a legislative or regulatory framework modification in different jurisdictions."; ¹¹

However, in BC, the Ministry of Health and the College of Physical Therapists of British Columbia have already worked together to alter the regulatory framework (The Health Professions Act) so that interim physiotherapists are to obtain their licensure by completing an in-person clinical exam overseen by the University of British Columbia. This demonstrates that despite the CAPR's resistance to change – change is possible, especially during these unprecedented times.

As registered physiotherapists across Canada we believe that the clinical PCE tests the ability to take tests, not the ability to practice physiotherapy. We need to envision new ways of assessing competency based on scientific evidence. We propose that the ideal way to evaluate competence is through experience and practical training, and validated evaluation in actual clinical settings. Furthermore, it is unclear how preparing for a clinical exam of low reliability, unproven validity, comprised of many archaic clinical concepts, and delivered under very stressful conditions prepares graduates for clinical practice, proves competency or achieves the regulator's goal of protecting the public.

The physiotherapy profession and consumers of physiotherapy services would be better served by an apprenticeship model similar to that employed by occupational therapists ¹². Under this approach, physiotherapy graduates would be evaluated by experienced physiotherapists as they gained competency in entry-to-practice skills and were able to demonstrate their readiness to independently practice. The public would experience no difference in the quality of physiotherapy provided if the clinical PCE were eliminated today as the examination has not been evaluated for any real-world validity.

We, the practicing, registered physiotherapists of Canada request that the CAPR and various regulatory colleges work together with relevant governments to permanently eliminate the requirement of the clinical PCE for licensure. We propose that the best solution is that the clinical PCE be replaced with a validated clinical residency training program.

Finally, the CAPR Chief Executive Officer, President, and Vice-President are responsible for the failed administration of the clinical exam over the last 18 months and the significant delay to licensure of thousands of physiotherapists across Canada. These executives have lost the confidence of the registered physiotherapists of Canada. Furthermore, the executives are attempting to ignore and move past the debacle of the last 18 months by hosting a psychometrically untested clinical PCE exam. This situation is unacceptable, it does not protect the public, it lowers the reputation of the physiotherapy profession in the eyes of the public and our allied health colleagues.

It is well past time for CAPR to focus their energy and resources on getting our residents licensed immediately WITHOUT this exam. These residents have all successfully completed a written exam and several months of clinical internships. We expect CAPR to present a solid plan by August 31, 2021 to assist with provincial legislative requirements to eliminate the need for this process during this global pandemic.

References:

- Bobos P, Pouliopoulou DV, Harriss A, Sadi J, Rushton A, MacDermid JC. A systematic review and metaanalysis 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. *PLoS One*. 2021;16(8):e0255696. Published 2021 Aug 3. doi:10.1371/journal.pone.0255696
- 2. Dr. Alexandra Harriss letter to the CAPR & Colleges
- 3. https://www.alliancept.org/taking-the-exam/exam-application-information/exam-dates-fees-and-locations/
- 4. Thorndike RM. Book Review: Psychometric Theory (3rd ed.) by Jum Nunnally and Ira Bernstein New York: McGraw-Hill, 1994, xxiv + 752 pp. *Appl Psychol Meas* 1995; 19: 303–305.
- 5. https://www.cmaj.ca/content/193/26/E1014
- 6. https://www.aamc.org/news-insights/what-elimination-major-medical-licensing-exam-step-2-cs-means-students-and-schools
- 7. https://www.alliancept.org/licensure/licensure-in-quebec/
- 8. https://www.alliancept.org/taking-the-exam/exam-application-information/exam-dates-fees-and-locations/
- 9. https://www.fsbpt.org/Our-Services/Candidate-Services/Exam-Registration-Payment
- 10. https://www.physioboard.org.nz/i-want-to-be-registered/new-zealand
- 11. https://www.alliancept.org/wp-content/uploads/2021/07/Response-to-CPA-Letter-of-June-25.pdf
- 12. https://www.notce-enae.ca/information

Sincerely,

The undersigned Registered Physiotherapists across Canada concerned for the future of public safety, the current physiotherapy residents and the physiotherapy profession.

We, the registered physiotherapists of Canada strongly request the Canadian Alliance of Physiotherapy Regulators (CAPR) and relevant regulatory colleges permanently eliminate the planned virtual and in-person clinical component of the Physiotherapy Competency Examination (PCE) based on the above mentioned 10 facts and the best available evidence.

It is well past time for CAPR to focus their energy and resources on getting our residents licensed immediately WITHOUT this exam. These residents have all successfully completed a written exam and several months of clinical internships. We expect CAPR to present a solid plan by August 31, 2021 to assist with provincial legislative requirements to eliminate the need for this process during this global pandemic.

Name of PT	Province	Position
Abdullah Oredegbe – PT Res.	SK	Self-employed
Adam Loewen	MB	St Boniface General Hospital
Adrienne Jordan	ON	Perth and Smiths Falls District Hospital
Alec Chisholm	AB	Alberta Health
Alex Procyk	ON	Total Physiotherapy
Alexandra de Vries	MB	Winnipeg Hospital
Alison Ribeiro	ON	West End Mamas
Allisyn Camche	SK	A.C. physiotherapy
Amanda Eagles	ON	Saugeen Physiotherapy
André Goyette	ON	CommuniCare therapy
Andre Levesque	NB	Charlotte County Hospital
Andre Riopel	ON	Back In Motion Physiotherapy
Andrea Bacik	ON	Athlete's Care
Andrew Ross	NB	Horizon Health Network
Anita Anne Hoelzel	NS	Atlantic Balance and Dizziness
Anker Gonsalves	ON	Healthmax Physiotherapy
Anna DiMarco	MB	Tuxedo Physiotherapy
Anna Papageorgiou	ON	Durham Orthopedic and Sports Clinic
Anna Tremblay	NB	Physiothérapie Anna Tremblay
Anne Marleau-Herst	ON	Health Sciences North
Anthony Abbado	ON	CBI Health
Ashley Kuntz	ON	TVCC
Aspen Haynes	AB	Panther Sports Medicine
Bahram Jam	ON	Founder & director of APTEI
Barbara Lacalamita	ON	Lacalamita Physiotherapy
Barbara Lazzari	NB	Hampton Physiotherapy
Barbara Lee	ON	Niagara Canine Conditioning Centre
Ben Bunin	NS	Nova Scotia Health Authority
Beth Pelletier	NB	WorkSafeNB
Boby Kurian Kurisummoottil Varughese	ON	South Bruce Grey Health
Bozena Bogaczewicz	ON	Trillium Health Partners
Bradley Jawl	BC	Tall Tree Health
Brandi Burton	MB	Prairie Mountain Health

Brent Pepper ON Woodstock General Hospital
Brett Thomas Willows BC Eclipse Physiotherapy
Brian Callender BC CBI Port Alberni

Brian T. McGrath NB Physiothérapie Bouctouche

Bryan A Rice ON Partners In Rehab Calvin Bradley J Mills NS Pthealth Greenwood

Carole Chebaro ON Director: Neurocore Physiotherapy

Carolyn Crane PE Queen Elizabeth Hospital

Catharine Tombs ON Moving On After Stroke Program

Catherine Darling ON London Health Sciences
Catherine MacGillivray BC Cairn Physiotherapy
Cathy Roy QC Dawson College

Céline ClémentONBack in Motion PhysiotherapyCéline RazeauONBack in Motion CornwallChantal GendronQCBase Militaire de Valcartier

Cheryl La Force ON Self-employed

Christine Spence
ON Health Sciences North
Clare Faulkner
BC Island Hand Therapy Clinic
Clarissa Beke
BC Kelowna General Hospital
Colin Groeneveld
BC University Hospital of Northern
Coral Koke
BC Metrotown Orthopaedic and Sports

Cyrus James Kazemi NS Roseway Hospital

Daniel DeBruyne ON Hotel Dieu Shaver Rehab Hospital

QC Danny Dinh **Expertise Physio** Daphne Jackson ON Mount Sinai Hospital ON Darien Lazowski-Fraher Neuphysio Rehabilitation BC Village Physiotherapy Darryl Giernes David Henschel ON Novo Peak Health AB Dean Daly South Health Campus Debbie Patterson AB PainSolutions Inc Denise Mcleown ON Trillium Health Partners NS Nova Scotia Health Derek Northrup

Dev Chengkalath ON Primal Human Performance

Diane Courtemanche ON Head, Neck and Jaw

Dianna Lueck ON On Mat leave

MB **DWH Physical Therapy** Dona Watts-Hutchings MB D'Arcy Bain Physiotherapy Edward Zwingerman ON Ottawa Physiotherapy Elaine Shaver Elizabeth Diedericks ON **CBI Health Group** Elizabeth Frev BC Richmond Hospital Elizabeth Sutton AB Peak Physical Therapy

Emilie Noble ON PhysioNorth

Erica Dupuis AB Pembina Valley Physiotherapy

Erin Allison Powers BC Infinity Physio

Erin Collins BC Red Cedar Physiotherapy

Erin Swinton AB Equus physio
Ethan Hemeyer AB Parkland Rehab

Ezzat Nazzali
ON
Windsor regional hospital
Feng (Andy) Huo
ON
Hands of Care Physiotherapy
Filipina Mejia
ON
Pembroke Regional Hospital
Fred Samorodin
BC
Past CAPR clinical examiner
Galia Carranco Herrera
ON
Core Connections Physiotherapy

Gary Weare BC Interior Health at Penticton Regional Hospital

Gil Magne MB Precision Movement & Therapies
Gillian Horton BC Elk Valley Regional Hospital
Gita Mikal ON Physiomobility Health Group
Glen Young MB Glen Young Physiotherapy
Godfrey Kwan AB Chinook Regional Hospital

Haider Tirmizey ON Athletes Care

Hayden Atkinson ON London Health Sciences

Heather Beauchesne SK Saskatchewan Health Authority
Heather Duque ON Newcastle Physiotherapy
Helen M. Burger BC Island Hand Therapy Clinic

Henza Miller ON ATC

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Irene Balutis AB

James McLean ON Quinte and District Rehabilitation

James Zhou BC Salius Rehab Inc
Janice Parrott ON Parrott Physio
Jason Gallant ON Trilogy Physiother

Jason GallantONTrilogy PhysiotherapyJaspreet DhillonBCSynergy Rehabilitation

Jean Felix Daloze ON PhysioExtra.

Jeff WrightONWright Physiotherapy.Jennifer EarnestONBayshore Physical TherapyJennifer HeathONHeath PhysiotherapyJennifer KyereONWilliam Osler health

Jennifer Sullivan NL Labrador West Health Centre

Jillian Adams
ON ActiveCARE Physio
Joanna Lau
ON Bayview Rehabilitation
Joanne Grout
AB Self-employed

JoAnne Moody
JoAnne Moody
Joanne Olsen
John Power
John Power
John Bourgeois
Jonathan Bourgeois
Jonathan Raies

Jonathon Carkner

Jordan Octeau

QC

Concordia Physio Sport

Jordan Shannon

NB

Max Health institute

Jordyn Bain

MB

D'Arcy Bain Physiotherapy

Josh Bellingham

BC

Josh Bellingham Physiotherapy

Judith Mathieu BC Holy Family Hospital

Julian RoachONPhyseliteJulie Herrington,ONArthritis Society

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Karen Treleaven ON Self-employed

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Karla Andrews ON Andrews In-Home Physiotherapy

Kate Roddy ON Fixt Physio

Kathleen MacLennan NB Saint John Regional Hospital

Kayte-Lynn Kowal

Kelly Barrie

Kelly Milan

Kelly Spence

Kelly Spence

Kelly Spence

Kelly Spence

AB

Total Physiotherapy

Fifth Ave Physiotherapy

Corydon Physiotherapy

Trackside Physical Therapy

Kelsey Schmidt – PT Res.

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Wright Physiotherapy

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Krista McIntyre
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Leslie Balkwill

Leslie Tempest

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ProActive Rehab

Lia Smith

NB

Kenval Rehab

Linda Dyer-Macdonald ON Sport-Medic Physiotherapy

Linda McConnell

Linnie Ewart

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Pamela Honeyman ON Self-employed ON Lalonde Physio

Paul Osadzuk ON Bayshore Physical Therapy

Paulette Ruel QC Self-employed

Pauline Siu-Man Cheung

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Clarkson Sports and Physiotherapy
Peter Theodosopoulos

ON

Your Health Medical & Rehab

Philemon Ayele BC Easthill Physiotherapy

Philip Ruiz NS Back To Basics Physiotherapy
Philippe Michaud NB Physiothérapie Bouctouche

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Sara Braun Holly AB Pincher Creek Health
Sara MacEachern NS First Step Physiotherapy

Sara Zboya BC Self-employed

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Steven Savage ON CBI Health

Sumya Khudadad –PT Res. ON

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Sydney Santin ON Fortius Physiotherapy

Sylvie Best ON Physiotherapy centre of Bancroft
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William Howatt NB PT Health William Lyons BC Self-employed

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