



Where we are in the specialties process

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What is a specialty?

A discrete, well-defined focus of practice that requires in-depth knowledge and skills beyond those commonly possessed by registered kinesiologists

Process to achieve authorization of a specialty



Step-by-step

- Specialties are defined by and within the profession
- College considers requests from segment of the membership.
- Broad public and stakeholder consultation on proposal
- 60-day consultation on draft regulation
- Submission and review by the Ministry of Health
- Gazetting of regulation

College's role

- Reviews submissions from groups within the membership
- Key Decision Criteria:
 - Does the proposed specialty make the case that it is necessary for improved public protection?
 - Does the proposed specialty demonstrate strength of certification/education program?
 - Is the proposed specialty broadly understood and accepted within the profession?
- Feasibility review
- Two consultations with the public, stakeholders and the membership
 - Consultation on proposal
 - Consultation on draft regulation
- Draft regulation, business case, consultation results submitted to the Ministry

Timeline

- 2013: OATA submits draft proposal for a specialty. Feedback provided.
- 2016: College develops draft framework and policy to assess requests for a specialty
- 2017: College consults on proposed framework and policy
- 2018: Framework and policy approved by Council

Timeline

- 2019: Specialties Committee reviewed OATA's submissions; focused on preeminent criterion: risk of harm
- 2020: Report to Council on findings to-date and remaining work

Key decision criterion 1: Risk of harm

What this means:

- Is the risk of harm within the practice of athletic therapy of such magnitude and seriousness to require additional regulation?

Key decision criterion 1: Risk of harm

Status: At this time, criterion not met

- Strong business case not presented that risk exists from those who are not qualified.
- Some evidence was presented of public/client base awareness of the role and function of certified athletic therapists.
- Need to explore how to increase public commitment to regulated professionals.

Key decision criterion 2: Education and qualifications

- Must be at an advanced level, above the bachelor's degree, required for a kinesiologist registered in the General Class.
- Must build upon the knowledge, skills and judgement required for a kinesiologist registered in the General Class.
- Program and training is part of a structured program recognized and accepted by the profession of kinesiology as advanced study to develop higher level competencies.

Key decision criterion 2: Education and Qualifications

Status: To be considered

- Questions the Specialties Committee will consider:
 - Do the education and training required to qualify, meet the requirements described in the framework?
 - If not, do they rise above the level of what might be considered as ongoing professional development, to the level of “specialty training”?
 - What are the credentialing programs for the proposed specialty?

Decision points

Risk of harm

- Specialty
- Other actions
- No action

Qualifications

- Meets requirements
- Inadequate

Public Response

- Staged consultation
- Advice to the Ministry

March 30 report to CKO Council

- Business case on risk of harm has not demonstrated that additional regulation is necessary for public protection.
 - Some athletic therapists are already regulated by one or more RHPA colleges.
- Options needed to improve public protection from unregulated, incompetent practitioners.
- Committee must proceed with its work to consider education and credentialing.

Next steps

- Report to Council on outcomes of the education and qualifications analysis
- Patient Relations Committee will report on options to increase public protection
- Decision about whether to proceed with analysis of credentialing

Thank you

Questions?

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