Setting the Course

2014 ANNUAL REPORT

Canadian Alliance of Physiotherapy Regulators
Alliance canadienne des organismes de réglementation de la physiothérapie
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THIS HAS BEEN A BUSY YEAR FOR THE ALLIANCE, WITH MULTIPLE PROJECTS, TRANSITIONS AND UNEXPECTED EVENTS. WE HAVE EXPERIENCED OUR FIRST YEAR UNDER THE REVISED GOVERNANCE STRUCTURE AND EXPERIENCED TYPICAL GROWING (OR SHRINKING) PAINS AS WE WENT FROM A BOARD OF 22 TO A BOARD OF DIRECTORS OF 11; ONE FROM EACH PROVINCE OR TERRITORY.

Highlights of the past year include the development of the computerized written exam with the first computerized exam due to be provided in July 2015. This required the transfer of the questions from the written item exam bank to this new computerized format. This will move the Alliance into a position where data analysis of the exam questions, assessment of performance on the exam and even administration of the exam can be undertaken with greater ease.

Another highlight is the engagement with our NPAG partners to discuss the Physiotherapy Practice Analysis Project and Reassessment of the Physiotherapy Competency Profile. These projects will inform the content development of our National Physiotherapy Competency Exam as well as serve the needs of the multiple stakeholders; such as curriculum development in our university physiotherapy programs or identification of physiotherapy practice changes.

The unfortunate and unexpected event of this past year is the discovery of the December 2014 Written Exam Scoring Error. This scoring error was the result of an incorrect pass mark being used and does not affect the validity of the exam. The exam continues to present strong psychometric indicators. The affected candidates are being supported by the Alliance in many ways and have been offered the opportunity to re-sit the exam at no cost. Our sincere apologies are extended to all affected by this scoring error.

Finally, I would like you to note, as you read through the reports from the various Alliance committees, the large number of other projects being undertaken by these committees. For example, we have the development of the Pan-Canadian Supervision Framework, Western Canada Tele-health Agreements and a number of new projects ongoing with the Registrar’s Committee. The Evaluation Services Committee has strongly supported the use of 21st Century Technology in the administration of the National Physiotherapy Exam as well as the need for the use of this technology abroad. The publication on the Alliance’s website of the Source Country Profiles outlining physiotherapy practice profiles and passing rates of the various international programs on our National Physiotherapy Exam has received high accolades from immigration officials. These are but a few accomplishments achieved in 2014. I commend the committee members and the employees of the Alliance who have worked diligently and conscientiously to attain the accomplishments they did in 2014.

With thanks to all who participated and helped,

Tanya Kozera Katya Masnyk
President, CEO
Board of Directors

LETTER FROM THE ALLIANCE LEADERSHIP
The Canadian Alliance of Physiotherapy Regulators (The Alliance) is a pan-Canadian alliance of provincial and territorial organizations that regulate the practice of physiotherapy.

**VISION**
Competent physiotherapists contributing to a healthy and productive society by optimizing the function and mobility of Canadians.

**MISSION**
The Alliance supports Members, applicants and partner organizations through the provision of evaluation, policy and knowledge brokering services contributing to a sufficient supply of competent physiotherapists in Canada.

The Alliance’s core business is the administration of evaluation, knowledge brokering and policy services on behalf of its regulatory Members. Evaluation services include credentialling the education and qualifications of internationally educated applicants and the administration of the Physiotherapy Competency Examination to determine a candidate’s readiness for safe, effective and independent physiotherapy practice.

As a pan-Canadian collaborative, The Alliance’s activities span all ten provinces and Yukon. In 2014, The Alliance served 668 Credentialling applicants and over 3000 examinations candidates.

**VALUES**
The foundational supports for The Alliance vision and mission are found in our organizational values:

- **Public Interest** – ensuring that the regulatory role of public protection is paramount in all of our decisions.

- **Excellence** – setting high standards, providing high quality and timely customer service, using best practices, and being seen as a desirable place to work and volunteer.

- **Integrity** – interacting with others respectfully, communicating honestly, maintaining confidentiality, making impartial, fair and sound decisions, fulfilling our corporate social responsibility and pursuing fair practices.

- **Good Governance** – excellent financial stewardship including establishing responsible budgets and fees and planning for the long-term, publicly reporting on performance and taking ownership for decisions made.

- **Collaboration** – working together with partners and each other to accomplish our vision and mission.

- **Engagement** – promoting an engaging work environment that includes humour and fun fostering loyalty and commitment among staff and volunteers.
## BOARD, COMMITTEES, STAFF AND MEMBERS

### OFFICERS
- Tanya Kozera, President
- Brandy Green, Vice President
- John Spirou, Treasurer
- Katya Masnyk, Secretary

### BOARD OF DIRECTORS
- **Yukon Territories**
  - Alisha Bell
- **British Columbia**
  - Brenda Hudson
- **Alberta**
  - Joyce Vogelgesang
- **Saskatchewan**
  - Tim Eichholz
  - Lynn Kuffner
- **Manitoba**
  - Brenda McKechnie
- **Ontario**
  - Shenda Tanchak
- **Québec**
  - Claude Laurent
- **New Brunswick**
  - Rebecca Bourdage
- **Nova Scotia**
  - Joan Ross
- **Prince Edward Island**
  - Sarah Gaudet
- **Newfoundland and Labrador**
  - Josephine Crossan

### REGISTRARS
- **Yukon Territories**
  - Alisha Bell
- **British Columbia**
  - Brenda Hudson
- **Alberta**
  - Dianne Millette
- **Saskatchewan**
  - Tim Eichholz
  - Lynn Kuffner
- **Manitoba**
  - Brenda McKechnie
- **Ontario**
  - Shenda Tanchak
- **Québec**
  - Claude Laurent
- **New Brunswick**
  - Rebecca Bourdage
- **Nova Scotia**
  - Joan Ross
- **Prince Edward Island**
  - Sarah Gaudet
- **Newfoundland and Labrador**
  - Josephine Crossan

### REGISTRARS’ COMMITTEE
- **Rebecca Bourdage (NB)**, Chair
- **Alisha Bell (YT)**
- **Brenda Hudson (BC)**
- **Dianne Millette (AB)**
- **Lynn Kuffner (SK)**
- **Brenda McKechnie (MN)**

### CEO REVIEW COMMITTEE
- Tanya Kozera
- John Spirou
- Brandy Green

### CEO REVIEW COMMITTEE
- Brenda Hudson, Chair
- Brandy Green
- Tanya Kozera, ex officio
- Deborah Noseworthy
- Shenda Tanchak

### EVALUATION SERVICES COMMITTEE
- Sue Murphy, Chair
- Liliane Asseraf-Pasin
- Mark Hall
- Marla Nayer
- Ann Read
- John Spirou, Board Liaison
- Shenda Tanchak
- Janelle Van Heeren

### STAFF
- Katya Masnyk, CEO
- Fidelma Serediuk, Program Manager, Examinations
- Diana Sinnige, Program Manager, Credentialling
- Rohini D’Cunha
- Nancy Durrant
- Ian Finn
- Erin Gollacher
- Keisha Gudge
- Rebecca Lam
- Igor Lazarevski
- Melissa Lee
- Rachel Leger
- Helen McKay
- Shereen Mir - Jabbar
- Michelle Naranjo
- Kim Ogryzek
- Nancy Osadetz
- Eric Pearce
- Delon Pereira
- Sara Reguly
- Adam Sayers
GOVERNANCE

The Alliance Board consists of 11 Directors, one appointed Alliance representative from each regulated provincial/territorial jurisdiction, as well as an affiliate member from the Federation of State Boards of Physical Therapy from the United States. Led by four Board Officers, the Board meets at least twice a year to set the strategic direction for the organization and oversee policy. In addition, the Board has three standing committees:

• The CEO Review Committee is responsible for developing, implementing and evaluating a CEO review process to be used for probationary and ongoing reviews. The principle of measuring performance against pre-identified competencies and outcomes related to objectives is paramount in the work of the Committee. The Committee also reviews compensation at least every two years and makes recommendations to the Board about CEO compensation including salary, benefits and perquisites.

• The Evaluation Services Committee provides strategic advice and makes recommendations to the Alliance Board on matters respecting the Credentialling and Examination programs. The Evaluation Services Committee provides oversight for the Credentialling and Examination programs and is responsible for setting and monitoring performance standards of the credentialling and examination programs and assuring the effective delivery of those services.

• The Governance and Nominations Committee considers and enhances the functioning of the Board, its committees and working groups. It does this by monitoring and reviewing governance policies, committee structure and terms of reference, providing oversight to the nominations and elections process and managing Board and committee orientation, development and evaluation.

In addition to the three Board Committees, The Alliance Registrars’ Committee conducts policy work of interest and import to its members. The Registrars’ Committee is a committee of the CEO.

The Registrars’ Committee leads the main policy work of the organization. It supports member Registrars and Executive Directors, scans the regulatory environment, identifies emerging trends across jurisdictions and makes recommendations to the Board on issues of pan-Canadian scope.

In 2014, the Registrars’ Committee completed a review and full revision of its Terms of Reference as part of the Board’s broader governance review. The Registrars’ Committee is now a committee of the CEO, rather than a Committee of the Board. This allows for broader discussions and a wider array of projects that the Registrars might undertake in keeping with their own interests that may be broader than the Board’s strategic plan. The Registrars’ Committee continues its roles as an advisory committee for Board policy decisions and as a vehicle for jurisdictional input, including on operational matters.

As in previous years, RC agendas balanced the need to address the specific interests arising from any of our jurisdictions, with issues of a broader, pan-Canadian appeal. In 2014, the Registrars’ Committee completed the following policy projects:
1. Pan-Canadian supervision framework
2. Policy on the use of the PCE for disciplinary purposes

The Registrars’ Committee provides oversight to two ad-hoc committees:

- The Specialty Certification Recognition Committee is an ad-hoc committee responsible for overseeing the specialty certification recognition process and advising The Alliance Board of Directors on its implementation, including the development of recommendations and policies regarding acceptable specialty certification programs and the identification of actions required by The Alliance and its member regulators to implement a pan-Canadian process for recognition of physiotherapy clinical specialties.

- The Continuing Competency Committee (CCC) is an ad-hoc committee that provides a forum to discuss and share information related to continuing competence programs. The CCC may also consider and recommend national strategies related to advancing continuing competence for consideration by the Registrars’ Committee.
In 2013, The Alliance implemented significant changes to its credentialling standards and commissioned several major research projects to develop evidence-based recommendations for choosing the way forward. In 2014, Alliance leadership considered the results of our reviews and research and identified at a Future Directions Workshop our top priorities for immediate action.

**FUTURE DIRECTIONS WORKSHOP (APRIL)**
The goal of the workshop was to use existing evidence and the experiences of other regulators to identify opportunities and priorities for our first strategic goal – “Excellence in Evaluation Services.” The following key directions were identified for the future of The Alliance Evaluation Services:

1. Effective, 21st century information technology is a prerequisite to all of the proposed opportunities – for both communication and analysis/tracking needs.
2. Internationally educated physiotherapists require more and better information while still in their home countries in order to make better informed decisions prior to immigration.
3. A move towards computer based testing abroad is strongly and universally supported. Computer based testing using the Written Component of the PCE on Canadian soil was considered the first step in this direction.

These themes set the stage for Evaluation Services initiatives in 2014.
After a frenetic year of clearing the backlog of internationally educated physiotherapist (IEPT) applications in 2013, the Credentialling Team in 2014 was able to settle into a new rhythm, completing necessary housekeeping policies, overseeing two important projects and establishing new and improved wait time benchmarks while at the same time reducing staffing levels due to improved program efficiencies.

**ACCREDITATION PROJECT COMPLETED**

The Accreditation Project examined the physiotherapy education accreditation systems in Australia, USA, UK and Ireland as the possible foundation for a second stream of credential assessment. The review found that there were many similarities between the Canadian accreditation approach and those of the other 4 countries. However, there was a difference in approach for some countries regarding the inclusion of required physiotherapy competencies.

By the time the report was completed, wait times were 5 - 8 weeks and the creation of a second type of credentialling system, was no longer necessary. The findings of the Accreditation Project will be shared with the International Network of Physiotherapy Regulatory Associations (INPTRA) to help with ongoing discussions about global mobility and the possibility of exploring the development of a single international physiotherapy standard.
SOURCE COUNTRY PROFILES
In keeping with our goal to provide more and better information to IEPTs while still in their home countries, The Alliance developed Source Country Profiles for our website with information on our top source countries.

They include:
(1) a comparison of scope of practice between Canada and the source country;
(2) an analysis of the average pass rates for first time test takers from that country on the Physiotherapy Competency Exam (PCE); and
(3) a list of all educational programs that The Alliance has assessed from that country.

MODERNIZING THE SUPERVISED CLINICAL PRACTICE HOURS DEFINITION
Approaches to supervised clinical practice associated with physiotherapy education vary from country to country and are also evolving. The Alliance policy on supervised clinical practice did not include a definition. The ESC approved a definition of supervised clinical practice that acknowledged evolving practices such as the use of simulation or standardized clients (actors).

To the best of our knowledge, we are the only profession publishing this type of information. Response from government, IEPTs and other credentialling organizations has been tremendous.
### TABLE 1: CREDENTIALLING PROGRAM STATISTICS: HISTORICAL 2009 TO 2014

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Applications Received</td>
<td>399</td>
<td>568</td>
<td>606</td>
<td>773</td>
<td>741</td>
<td>668</td>
</tr>
<tr>
<td>Time from Application Received to Initial Status Update Sent to Client*</td>
<td>Averaging 2 weeks</td>
<td>Averaging 14 weeks</td>
<td>Averaging 3.5 weeks</td>
<td>9.5 weeks</td>
<td>7 business days</td>
<td>9 business days</td>
</tr>
<tr>
<td>Number of Precedent Files Completed</td>
<td>162</td>
<td>154</td>
<td>275</td>
<td>255</td>
<td>686</td>
<td>502</td>
</tr>
<tr>
<td>Number of Non-Precedent Files Completed</td>
<td>255</td>
<td>161</td>
<td>168</td>
<td>339</td>
<td>455</td>
<td>191</td>
</tr>
<tr>
<td>Total Number of Files Completed</td>
<td>417</td>
<td>315</td>
<td>443</td>
<td>594</td>
<td>1141</td>
<td>693</td>
</tr>
<tr>
<td>Time to Assess – Precedent*</td>
<td>8 weeks</td>
<td>18 weeks</td>
<td>12 weeks</td>
<td>17 weeks</td>
<td>10 weeks</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Time to Assess – Non-Precedent*</td>
<td>22 weeks</td>
<td>28 weeks</td>
<td>42 weeks</td>
<td>41 weeks</td>
<td>15 weeks</td>
<td>7 weeks</td>
</tr>
<tr>
<td>Estimated Staff (Full Time Equivalents)</td>
<td>3.5 FTE</td>
<td>3.5 FTE</td>
<td>5.4 FTE + overtime (12 hours/ person/year period x 6 months)</td>
<td>7.5 FTE at year end</td>
<td>6.5 FTE at year end</td>
<td>4.5 FTE at year end</td>
</tr>
</tbody>
</table>

*Wait time measured at end of indicated year/quarter.

### TABLE 2: OUTCOME OF CREDENTIALLING ASSESSMENTS 2014

<table>
<thead>
<tr>
<th>Outcome of Assessments 2014</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligible for Exam</td>
<td>389</td>
<td>56%</td>
</tr>
<tr>
<td>Eligible Pending Canadian Health (2yr)</td>
<td>93</td>
<td>13%</td>
</tr>
<tr>
<td>Eligible Pending Improved Language only (2yr)</td>
<td>12</td>
<td>1.7%</td>
</tr>
<tr>
<td>Eligible Pending Canadian Health &amp; Improved Language (2yr)</td>
<td>114</td>
<td>17%</td>
</tr>
<tr>
<td>Eligible Pending Other (2yr) - Degree Verification +/- other</td>
<td>8</td>
<td>1.2%</td>
</tr>
<tr>
<td>Additional Documents Required: Language Test Score +/- Clinical Hours Info (60 days)</td>
<td>67</td>
<td>9.7%</td>
</tr>
<tr>
<td>Unsuccessful</td>
<td>10</td>
<td>1.4%</td>
</tr>
<tr>
<td>Totals</td>
<td>693</td>
<td>100%</td>
</tr>
</tbody>
</table>

### TABLE 3: PRIMARY SOURCE COUNTRIES 2010 TO 2014

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>267</td>
<td>293</td>
<td>407</td>
<td>375</td>
<td>334</td>
</tr>
<tr>
<td>UK: Eng/Scot/Wales/NI</td>
<td>29</td>
<td>50</td>
<td>75 -</td>
<td>61 -</td>
<td>71 -</td>
</tr>
<tr>
<td>Philippines</td>
<td>85</td>
<td>80</td>
<td>88</td>
<td>79</td>
<td>63</td>
</tr>
<tr>
<td>Australia</td>
<td>42</td>
<td>45</td>
<td>29</td>
<td>37</td>
<td>28</td>
</tr>
<tr>
<td>Pakistan</td>
<td>11</td>
<td>4</td>
<td>13</td>
<td>28</td>
<td>22</td>
</tr>
<tr>
<td>USA</td>
<td>29</td>
<td>38</td>
<td>32</td>
<td>31</td>
<td>20</td>
</tr>
<tr>
<td>Iran</td>
<td>12</td>
<td>10</td>
<td>8</td>
<td>20</td>
<td>13</td>
</tr>
<tr>
<td>Ireland, Republic of</td>
<td>6</td>
<td>10</td>
<td>19</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td>Brazil</td>
<td>14</td>
<td>10</td>
<td>12</td>
<td>11</td>
<td>9</td>
</tr>
<tr>
<td>Nigeria</td>
<td>7</td>
<td>12</td>
<td>12</td>
<td>11</td>
<td>7</td>
</tr>
<tr>
<td>New Zealand</td>
<td>7</td>
<td>1</td>
<td>3</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Bangladesh</td>
<td>1</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>South Africa</td>
<td>4</td>
<td>4</td>
<td>6</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Total - All Countries</td>
<td>568</td>
<td>606</td>
<td>773</td>
<td>741</td>
<td>668</td>
</tr>
</tbody>
</table>

### TABLE 4: COMPARISON OF CLINICAL HOURS TO SUCCESS ON PHYSIOTHERAPY COMPETENCY EXAMS

<table>
<thead>
<tr>
<th>Country</th>
<th>Typical Supervised Clinical Practice Hours*</th>
<th>Pass rate on written exam</th>
<th>Pass rate on clinical exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>India</td>
<td>2208</td>
<td>48%</td>
<td>41%</td>
</tr>
<tr>
<td>Philippines</td>
<td>1700</td>
<td>35%</td>
<td>42%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>1607</td>
<td>26%</td>
<td>42%</td>
</tr>
<tr>
<td>Pakistan</td>
<td>1548</td>
<td>35%</td>
<td>21%</td>
</tr>
<tr>
<td>Iran</td>
<td>1496</td>
<td>44%</td>
<td>63%</td>
</tr>
<tr>
<td>USA</td>
<td>1248</td>
<td>87%</td>
<td>74%</td>
</tr>
<tr>
<td>Brazil</td>
<td>1120</td>
<td>45%</td>
<td>48%</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>1120</td>
<td>67%</td>
<td>84%</td>
</tr>
<tr>
<td>Australia</td>
<td>750-1200 range</td>
<td>85%</td>
<td>87%</td>
</tr>
<tr>
<td>Ireland, Republic of</td>
<td>1051</td>
<td>63%</td>
<td>90%</td>
</tr>
</tbody>
</table>

*Based on Credentialling database averages.

Interesting changes:
- India – applications have declined 8-10% for the 2nd year in a row, but still #1 source by far.
- United Kingdom has overtaken Philippines for the #2 spot.
- Within the UK, Scotland submitted more applications than England for the first time.
EXAMINATIONS PROGRAM

The Examinations Program had a very busy year. In addition to managing its highest volumes ever, the program experienced a change in management structure, a switch to new psychometric services and first steps were taken towards computerization of the Written Component of the Physiotherapy Competency Exam (PCE).

MOVE TO COMPUTERIZATION AND TRANSFER OF WRITTEN ITEM BANK

Transition to a computerized administration of the Written Component of the PCE was identified as the highest priority for 2014 with the future goal of investigating if/how we can deliver a computerized exam overseas. In late 2014, the Exam Program worked with a new psychometric services provider to prepare for this transition. By year end, the examination item bank had been cleaned and transferred into a computerized format. Work on computerizing the exam will continue into 2015 with an anticipated launch date of July 2015.

EVALUATING EXAM PROJECT

The Alliance Board considered a proposal to develop and implement an Evaluating Exam (EE) to assess core physiotherapy knowledge and potentially screen IEPTs for likely success at licensure while still in their home countries. A pilot project was completed in 2014 with over 200 potential test questions developed for an EE.

After careful consideration of the issues, the data, and the experiences of other professions, the Evaluation Services Committee recommended that The Alliance not proceed with an EE at this time: the data did not support the need for an additional screening exam, and in consultation with other professions and a Fairness Commissioner, use of an Evaluating Exam as a high stakes screening exam was not supported as a leading practice. The Board may return to the EE as a low stakes, voluntary tool for IEPTs sometime in the future.

EXAM PROGRAM METRICS

In 2014, written exam registrations continued to rise, increasing by 16% over 2013. For the clinical exam, The Alliance experienced a 23% increase in registrations. Overall, the total number of exam registrations continue to break records from 1,960 in 2012, to 2,656 in 2013 and finally to 3,305 in 2014.
TABLE 5: LICENSING EXAM PASS RATES (PERCENT PASSING) FOR WRITTEN AND CLINICAL COMPONENTS, BY CANDIDATE TYPE, BY YEAR.

<table>
<thead>
<tr>
<th>Year</th>
<th>Canadian-Trained</th>
<th>Internationally-Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Written component</td>
<td>Clinical component</td>
</tr>
<tr>
<td></td>
<td>Written component</td>
<td>Clinical component</td>
</tr>
<tr>
<td>2009</td>
<td>94</td>
<td>96</td>
</tr>
<tr>
<td>2010</td>
<td>94</td>
<td>95</td>
</tr>
<tr>
<td>2011</td>
<td>94</td>
<td>93</td>
</tr>
<tr>
<td>2012</td>
<td>94</td>
<td>88</td>
</tr>
<tr>
<td>2013</td>
<td>95</td>
<td>92</td>
</tr>
<tr>
<td>2014</td>
<td>94</td>
<td>91</td>
</tr>
<tr>
<td>Average</td>
<td>94</td>
<td>92</td>
</tr>
</tbody>
</table>

TABLE 6: PHYSIOTHERAPY COMPETENCY EXAM PASS RATES 2014

<table>
<thead>
<tr>
<th>Written Component Pass Rate</th>
<th>Clinical Component Pass Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall</td>
<td>65%</td>
</tr>
<tr>
<td></td>
<td>A 7% decrease from 2013</td>
</tr>
<tr>
<td></td>
<td>74%</td>
</tr>
<tr>
<td></td>
<td>A 4% decrease from 2014</td>
</tr>
<tr>
<td>Canadian</td>
<td>94%</td>
</tr>
<tr>
<td></td>
<td>A 1% decrease from 2013</td>
</tr>
<tr>
<td></td>
<td>91%</td>
</tr>
<tr>
<td></td>
<td>A 1% decrease from 2013</td>
</tr>
<tr>
<td>IEPT</td>
<td>48%</td>
</tr>
<tr>
<td></td>
<td>A 5% decrease from 2013</td>
</tr>
<tr>
<td></td>
<td>57%</td>
</tr>
<tr>
<td></td>
<td>A 1% decrease from 2013</td>
</tr>
</tbody>
</table>

TABLE 7: IEPT PCE PASS RATES BEFORE & AFTER FEB 2013 CREDENTIALLING CHANGES

<table>
<thead>
<tr>
<th></th>
<th>Average IEPT Pass Rate 2010 - 2012</th>
<th>IEPT Pass Rate 2013</th>
<th>IEPT Pass Rate 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Component</td>
<td>53%</td>
<td>53%</td>
<td>48%</td>
</tr>
<tr>
<td>Clinical Component</td>
<td>59%</td>
<td>58%</td>
<td>57%</td>
</tr>
</tbody>
</table>

TABLE 8: RELEASE OF EXAM RESULTS – WAIT TIMES

<table>
<thead>
<tr>
<th></th>
<th>Benchmark</th>
<th>Actual Average 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written Component</td>
<td>6 weeks</td>
<td>5 weeks</td>
</tr>
<tr>
<td>Clinical Component</td>
<td>12 weeks</td>
<td>10.5 weeks</td>
</tr>
</tbody>
</table>
In 2009, the federal, provincial and territorial governments signed revisions to the Agreement on Internal Trade (AIT), removing restrictions to movement between jurisdictions in Canada related to differences in registration standards. The Alliance began gathering mobility data across jurisdictions in 2010—showing how many new physiotherapy registrants in each province were originally registered somewhere else in Canada. Five years later, we see that physiotherapists greatly benefit from mobility across and between provinces in Canada.

Physiotherapists moving from one province to another in Canada continue to focus on Alberta, British Columbia and Ontario as destination provinces of choice. In 2014, however, the number of physiotherapists moving to Alberta and Ontario declined, while the number moving into British Columbia stayed the same. This is the second year in a row with declining numbers of physiotherapy mobility for Alberta and Ontario—an interesting trend to watch. Quebec and Newfoundland and Labrador are the two provinces where mobility into the province increased compared to 2013, though the numbers remained quite low. In keeping with previous years’ data, the Maritime Provinces show the lowest numbers of registrants from other provinces. Almost all registrations transferring from one jurisdiction to another are granted without conditions. No registration applications from one province to another have been denied since 2010.

1 The Yukon data also showed an increase in 2014, but we believe this is due to improved data collection reasons, rather than an actual increase.
REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS

The accompanying summary financial statements, which comprise the summary statement of financial position as at December 31, 2014, and the summary statement of operations for the year then ended, are derived from the audited financial statements of The Canadian Alliance of Physiotherapy Regulators for the year ended December 31, 2014 on which we expressed an unmodified opinion in our report dated April 9, 2015. Those financial statements, and the summary financial statements, do not reflect the effects of events that occurred subsequent to the date of our report on those financial statements.

The summary financial statements do not contain all the disclosures required by Canadian accounting standards for not-for-profit organizations. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of The Canadian Alliance of Physiotherapy Regulators.

Management’s Responsibility for the Summarized Financial Statements
Management is responsible for the fair summarization of the audited financial statements in accordance with the criteria disclosed the summary financial statements.

Auditor’s Responsibility
Our responsibility is to express an opinion on the summarized financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810 “Engagements to Report on Summary Financial Statements”.

Opinion
In our opinion, the summary financial statements derived from the audited financial statements of The Canadian Alliance of Physiotherapy Regulators for the year ended December 31, 2014 are a fair summary of those financial statements, in accordance with the criteria disclosed in the summary financial statements.

Cowperthwaite Mehta
Chartered Accountants | Licensed Public Accountants
April 9, 2015. Toronto, Ontario
Applied criteria in the preparation of the financial statements

The criteria applied by management in the preparation of these summary financial statements are as follows:

- a) the information in the summarized financial statements is in agreement with the related information in the complete financial statements; and
- b) the summarized financial statements contain all the information necessary to avoid distorting or obscuring matters disclosed in the complete financial statements, including the notes therein.

Management determined that the statement of changes in net assets and the statement of cash flows do not provide additional useful information, and as such has not included them as part of the summary financial statements.

### SUMMARY STATEMENT OF FINANCIAL POSITION
AS AT DECEMBER 31, 2014

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$1,970,906</td>
<td>$1,774,880</td>
</tr>
<tr>
<td>Marketable securities</td>
<td>1,444,586</td>
<td>774,687</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>2,372</td>
<td>993</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>80,385</td>
<td>33,259</td>
</tr>
<tr>
<td></td>
<td>3,498,249</td>
<td>2,583,819</td>
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<tr>
<td>Capital assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible</td>
<td>104,759</td>
<td>143,757</td>
</tr>
<tr>
<td>Intangible</td>
<td>111,614</td>
<td>98,431</td>
</tr>
<tr>
<td></td>
<td>216,373</td>
<td>242,188</td>
</tr>
<tr>
<td></td>
<td>$3,714,622</td>
<td>$2,826,007</td>
</tr>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable</td>
<td>$199,167</td>
<td>$184,378</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>878,834</td>
<td>696,608</td>
</tr>
<tr>
<td></td>
<td>1,078,001</td>
<td>880,986</td>
</tr>
<tr>
<td>Net assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Invested in capital assets</td>
<td>216,373</td>
<td>242,188</td>
</tr>
<tr>
<td>Contingency reserve</td>
<td>1,517,227</td>
<td>1,117,403</td>
</tr>
<tr>
<td>Designated reserve</td>
<td>557,299</td>
<td>135,240</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>345,722</td>
<td>450,190</td>
</tr>
<tr>
<td></td>
<td>2,636,621</td>
<td>1,945,021</td>
</tr>
<tr>
<td></td>
<td>$3,714,622</td>
<td>$2,826,007</td>
</tr>
</tbody>
</table>
### SUMMARY STATEMENT OF OPERATIONS
FOR THE YEAR ENDED DECEMBER 31, 2014

<table>
<thead>
<tr>
<th></th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVENUE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Examination fees</td>
<td>$ 3,723,403</td>
<td>$ 2,871,480</td>
</tr>
<tr>
<td>Credentialing fees</td>
<td>655,726</td>
<td>618,845</td>
</tr>
<tr>
<td>Registrant levies and member fees</td>
<td>398,921</td>
<td>288,511</td>
</tr>
<tr>
<td>Investment income</td>
<td>71,692</td>
<td>39,370</td>
</tr>
<tr>
<td>Other</td>
<td>21,065</td>
<td>13,555</td>
</tr>
<tr>
<td>Prior Learning Assessment and Recognition (“PLAR”) fees</td>
<td>50,710</td>
<td></td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$ 4,870,807</td>
<td>$ 3,882,471</td>
</tr>
<tr>
<td><strong>EXPENSES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries and benefits</td>
<td>1,722,815</td>
<td>1,536,146</td>
</tr>
<tr>
<td>Clinical examination</td>
<td>1,307,335</td>
<td>1,014,199</td>
</tr>
<tr>
<td>Administration, office and general</td>
<td>266,037</td>
<td>238,644</td>
</tr>
<tr>
<td>Occupancy</td>
<td>230,274</td>
<td>200,844</td>
</tr>
<tr>
<td>Written examination</td>
<td>178,927</td>
<td>144,573</td>
</tr>
<tr>
<td>Travel and meetings</td>
<td>145,995</td>
<td>119,536</td>
</tr>
<tr>
<td>Bank charges and credit card fees</td>
<td>109,370</td>
<td>73,243</td>
</tr>
<tr>
<td>Special projects</td>
<td>61,849</td>
<td>62,311</td>
</tr>
<tr>
<td>Credentialing expenses</td>
<td>30,535</td>
<td>49,359</td>
</tr>
<tr>
<td>Translation</td>
<td>12,065</td>
<td>14,098</td>
</tr>
<tr>
<td>Professional fees</td>
<td>9,828</td>
<td>70,858</td>
</tr>
<tr>
<td>Amortization</td>
<td>104,177</td>
<td>110,331</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$ 4,179,207</td>
<td>$ 3,634,142</td>
</tr>
<tr>
<td><strong>Excess of Revenue Over Expenses for the Year</strong></td>
<td><strong>$ 691,600</strong></td>
<td><strong>$ 248,329</strong></td>
</tr>
</tbody>
</table>
AWARD OF DISTINCTION

THE ALLIANCE AWARD OF DISTINCTION IS PRESENTED TO AN INDIVIDUAL WHO HAS MADE AN OUTSTANDING CONTRIBUTION TO A REGULATORY ORGANIZATION OR TO PHYSIOTHERAPY REGULATION IN GENERAL.

The recipient is someone who represents the following characteristics:

• exemplification of professionalism
• commitment to promoting public interest values and ethical conduct
• commitment to best practice in conducting regulatory affairs
• ethical problem solving and decision making
• commitment to mentoring, guidance and sharing with colleagues

THE 2015 AWARD OF DISTINCTION IS PRESENTED TO HELEN MCKAY OF MISSISSAUGA, ONTARIO.

Helen is a Practising Physiotherapist with a varied background in clinical practice, management, academic and clinical education and evaluation processes. She received her Diploma in Physical and Occupational Therapy from the University of Toronto in 1971 and a post Graduate Diploma in Business Administration from the Heriot-Watt University, in Edinburgh Scotland in 2002.

Over the years, Helen has shown a great commitment to continuous lifelong learning in leadership, management and quality assurance and management. Her coursework and training in these areas are numerous. She has also been instrumental in the development of programs of interdisciplinary care in rehabilitation services.

Helen has been a practicing physiotherapist for over forty years. In this time she has also been a Case Manager, a Practice Leader, a clinical Instructor and many more.

Helen has dedicated a great deal of time and effort in support the examinations program at The Alliance. She served as the Chief Examiner for the Clinical exam in the Toronto site since 1997 and has shown leadership in that capacity for other Alliance examiners. Additionally, Helen served as a Credentialling Officer for The Alliance for over a decade.

Most recently, Helen served as a Physiotherapist Advisor to Alliance leadership and staff as well as to the exam working groups of The Alliance where her commitment to excellence in exam development and delivery has been exemplary.

Helen is retiring from her official work with the Alliance and Physiotherapy. She will travel, play with her grandchildren, do yoga and will finally have the ability to spend more time reading at the Cottage. We hope she will return to The Alliance from time-to-time to say hello.

We congratulate Helen on her excellent work and commitment to physiotherapy regulation!
CELEBRATING OUR 2014 VOLUNTEERS

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John Spirou
Brandy Green

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Brenda Hudson (Chair)
Brandy Green
Tanya Kozera, ex officio
Deborah Noseworthy
Shenda Tanchak

EVALUATION SERVICES COMMITTEE
Sue Murphy, Chair
Liliane Asseraf-Pasin
Mark Hall
Marla Nayer
Ann Read
John Spirou, Board Liaison
Shenda Tanchak
Janelle Van Heeren

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NATIONAL CHAIR
Nancy Cho

BRITISH COLUMBIA
Catherine Le Cornu Levett (Chair)
Helen Bolton
Beth Evans
Dolores Langford
Sophia Zhao

ALBERTA
Rachel Rouble (Chair)
Karen McIntosh
Tammy Nighswander
Jon Gabbai

SASKATCHEWAN
Bonnie Maclean (Chair)
Corrie Nelson
Heidi Devon
Jocelyn Krieg

MANITOBA
Rudy Niebuhr (Chair)
Mirei Belton
Melanie Fernandes
Blake Richison
Angelique Beaudette

HAMILTON
Gillian Manson (Chair)
Leigh Ann Niven
Susy Dias

TORONTO
Nancy Durrant (Chair)
Adrienne Murawiecki
Jane Goldberg
Janice Owen
Vincent Yip

QUEBEC
Manuela Materassi (Chair)
Sharon Ho
Giuseppe Pazienza
Amanda Lee
Jean-Pierre Dumas
Catherine Vander Knaap

NOVA SCOTIA
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Shauna Fury
Nancy Walker

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Rosalyn Jones
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Jo Moorhen

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Mona Iyzobua

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Gareth Sneath
Joyce Vogelgesang

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Peter Dilworth

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Kathy Davidson, PEAC
Brenda Hudson
Shari Hughes
Ann Read

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Melissa Anderson
Jenn Billeck
Rebecca Bourdage
Brenda Hudson
Lynn Kuffner
Audrey Lowe
Brenda McKechnie
Susan Paul
Chris Smerdon