

I. Background

The Provincial Paediatric Therapy Consultant will work under the direction of a Provincial Steering Committee comprised of paediatric therapists and government representation. This position is part of an interdisciplinary approach to address issues in therapy services for children in British Columbia, particularly recruitment and retention of paediatric therapists. The Provincial Consultant will work with therapists, provincial therapy councils, service providers and stakeholders, consumers, and the Ministry of Children and Family Development, using a collaborative consultation approach. The vision for this position is to make ***British Columbia the province of choice for paediatric therapists*** so as to significantly enhance therapy services available to children and families in BC.

II. Current relevant contextual factors

As the Provincial Paediatric Therapy Consultant will collaborate with many partner groups and organizations, the following provides an overview of initiatives that are relevant to the Consultant's workplan.

1. Provincial Government (re-elected May 17, 2005)

Ministry of Children & Family Development

- 2.325 Million dollars of annualized funding from Ministry for Children and Family Development allocated April 1, 2005 to reduce wait times for therapy services (Early Intervention and School-Age Therapy Programs)
- MCFD plan 2005-2008
 - Goal: "...children and youth with special needs achieve their full potential and live as independently as possible within their communities."
 - Objective: Increased access to early intervention and support services to assist families caring for children and youth with special needs.
 - Indicator: Number of children under six with special needs receiving an early intervention therapy within 3 months of a service request.
- Funding for Provincial Therapy Consultant renewed for one year (MCFD, March 2005)
- Children and Youth with Special Needs Branch (MCFD) –
 - Therapy contract administration moved from Early Childhood Development branch (April 4, 2005)
 - Representation on Provincial Steering Committee
 - Initiating a Paediatric Therapy Data collection process
 - Gathering information from both regions and agencies on waitlist and service utilization data for Early Intervention & School therapy programs; and status of current therapy positions.
 - Stated interest in revitalizing paediatric therapy programs
 - Plans for a school-age therapy program review
- interest in offering multidisciplinary professional development opportunity in each of 5 regions of the province

- New annualized funding (2005/06) for paediatric therapies was distributed to the Regions using a socio-economic model and the MCFD Regions are responsible for the allocation of these resources within their respective regions. (Consider method to provide all Regional Executive Directors with information regarding paediatric therapies)

Ministry of Advanced Education

- BC Loan Forgiveness Program for new graduates from therapy programs (Ministry of Advanced Education, December 2004)

Ministry of Health (Planning)

- Health Human Resource Planning
 - Health Human Resource Advisory Committee (HHRAC)
- Recruitment, Retention, and professional development of health care professionals
- Interprofessional Rural Program of BC (BC Academic Health Council – Health Sciences Committee)
 - Student teams with representatives from 12 health professions, participate in discipline-specific learning and interprofessional team activities in 5 rural communities in BC.
- Rural & Remote Health Initiative (RRHI)
 - College of Health Disciplines – proposed BC Network for Interprofessional Education for Collaborative Patient-Centred Practice
 - BC Rural and Remote Health Research Institute – UNBC
 - Michael Smith Foundation for Health Research

Provincial Advisors

- Infant Development Programme
- Aboriginal Infant Development Program
- Supported Child Development Program

Initiatives with Aboriginal Component

Success by 6: Aboriginal Early Childhood Engagement Project

Children First

Building Blocks – Aboriginal projects

Leading Edge Endowment Fund & Aboriginal ECD Research Innovation Chairs

Aboriginal Head Start programs (On and Off-Reserve)

Aboriginal Infant Development Programs

Aboriginal Supported Child Development Programs

Human Early Learning Partnership (HELP)

MCFD Community-based Aboriginal Early Childhood Development Initiatives

Aboriginal Family Resource Programs

Aboriginal Child Care Programs & Service Initiatives

(see MCFD ECD report April 2005)

2. BC Association for Child Development and Intervention

- Phase I project “Evaluation of Early Childhood Intervention Service Delivery” completed with proposed evaluation framework for measuring parent perception, service provider perception, and service effectiveness.
- Recommended Provincial Children’s Secretariat to ensure cross-ministerial integration of services for children.
- Recommendation of a comprehensive framework for delivery of child development and intervention services.
- Recommendation for one Advisory Committee for all Early Intervention Services

3. University of British Columbia

School of Rehabilitation Sciences

Donna Drynan, Occupational Therapy Student Fieldwork Co-ordinator

Pat Lieblich, Physical Therapy Student Fieldwork Co-ordinator

School of Audiology & Speech Sciences

Liz McLeod, Speech Language Pathology Student Fieldwork Co-ordinator

Human Early Learning Project: information on typically developing children

4. University of Northern British Columbia

BC Rural and Remote Health Research Institute – UNBC

5. National & Provincial Associations (OT, PT, SLP)

Canadian Physiotherapy Association

- Strategic Plan 2005-2008 (excerpts)

1. Service to members:

Professional Development: explore and implement new and innovative professional development opportunities

Practice resources: identify, provide access to and/or develop practice resources for private and public practice settings

2. Advocacy

Research: promote and disseminate research on the social and economic impact of access to physiotherapy in public and private health care systems.

3. Development of the profession

Health Human Resources: Advance our capacity to address, and respond to health human resource issues, in particular the impact of physiotherapy service delivery models to educational credentials and the role of support personnel

Specialization: Advance the development of a Clinical Specialty Program for physiotherapists in Canada.

Knowledge Translation: Develop knowledge translation strategies that will enhance best and evidence-based practice.

- Position Statement on Clinical Education of Physiotherapy Students
- Position Statement on Determinants of Health

Paediatric Division: potential to assist in offering Prof Dev courses in BC

Canadian Association of Speech Language Pathologists and Audiologists

- Position paper on Universal Newborn and Infant Hearing Screening in Canada
- Position paper on Cochlear Implants in Children
- Position paper on Speech Language Pathology and Audiology in the Multicultural, Multilingual context
- Caseloads Guidelines Survey Report December 2003
- Gap Analysis Report: Availability & Accessibility of data to support long-term human resource planning for Speech-Language Pathologists and Audiologists.

Canadian Association of Occupational Therapists

- Position Statement on Continuing Professional Education
- Position Statement on Access to Occupational Therapy
- Position Statement on Evidence-based Occupational Therapy
- Position Statement on Healthy Occupations for Children and Youth
- Position Statement on Occupational Therapy and Mental Health Care
- Position Statement on Quality Occupational Therapy Services
- Position Statement on Telehealth & Teleoccupational therapy
- Health Promotion and Disease Prevention: A Foundation for the Canadian Health System (2001) A Discussion Paper by the Coalition of Health Professions for Preventive Practice
- Moving Forward with the Next Steps in Occupational Therapy Human resource Planning: Summary Report (March 2004)
- Background Paper on Occupational Therapy Human Resource Data: Sources, Utilization, and Interpretive Capacity

Physiotherapy Association of BC

Scope of Practice

Cost of doing business survey

BC Society of Occupational Therapists

Position Statement on its Role in a Changing Health Care System

BC Association of Speech Language Pathologists and Audiologists

6. National Initiatives

Enhancing Interdisciplinary Collaboration in Primary Health Care Initiative (EICP)

www.eicp-acis.ca

Definitions used in this initiative:

Collaboration: "...an interprofessional process of communication and decision-making that enables the separate and shared knowledge and skills of healthcare providers to synergistically influence the client care provided" (Way, Jones, and Busing, 2000).

Collaborative Patient-Centred Practice: "...is designed to promote the active participation of each discipline in patient care. It enhances patient and family centred goals and values, provides mechanisms for continuous communication among care givers,

optimizes staff participation in clinical decision making within and across disciplines and fosters respect for disciplinary contributions of all professionals” (Health Canada 2003)
Primary Health Care: “involves responding to illness within the broader determinants of health. It also includes co-ordinating, integrating, and expanding systems and services to provide more population health, sickness prevention and health promotion by all disciplines. It encourages the best use of health providers to maximize the potential of all health resources.” (Mable & Marriott 2002).

7. Caseload & Waitlist Initiatives

Herb Chan: Waiting lists and waiting time for Early Intervention Services for Preschool Children in BC

CASLPA

BCASLPA

BC Centre for Ability

Queen’s University

CanChild

8. Recruitment and Retention

www.therapybc.ca website launched March 29, 2005

III. Workplan Objectives 2005

Summary

1. Provide a meaningful voice for Paediatric Therapists across British Columbia to inform decision-making processes that affect child, family, and community outcomes.
2. Develop collaborative partnerships to encourage implementation of proactive and equitable human resource practices, and creation of positive work environments, in order to foster retention of paediatric therapists.
3. Promote Manageable Workloads for paediatric therapists by developing guidelines for caseloads and waitlists, including the determination and implementation of consistent language and definitions.
4. Develop effective communication and networking opportunities throughout British Columbia for paediatric therapists.
5. Explore a provincial mentoring strategy to support new therapists by utilizing professional expertise within this province.
6. Promote recruitment initiatives within physical therapy, occupational therapy and speech language pathology disciplines.
7. Create a plan for professional development opportunities in all 5 provincial regions.
8. Explore innovative student fieldwork opportunities in paediatric settings.
9. Ensure timely communication of information between the Provincial Consultant and the Provincial Steering Committee, and other relevant parties.

1. Provide a meaningful voice for Paediatric Therapists across British Columbia to inform decision-making processes that affect child, family, and community outcomes.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|---|--------------------|
| [22] The Provincial Consultant shall liaise with the Professional Associations and Provincial Paediatric Councils for Occupational Therapy, Physical Therapy, and Speech Language Pathology on issues affecting the workplan. | On-going |

| | |
|---|----------|
| <p>[16] The Provincial Consultant shall collaborate with the Provincial Advisors for IDP, AIDP, SCD, Ministry staff and other community partners to ensure quality service delivery for all children identified with developmental disabilities or delays.</p> <p>Highlight positive accomplishments of therapists and teams in communities across the province (ie clinical scenarios)</p> <p>Collaborative practice curriculum development (collaboration to include publicly funded therapists, IDP, SCD, private therapists, aboriginal communities, community health nurses)</p> | On-going |
|---|----------|

Information bulletins to target Therapists, Employers, Provincial Government, Relevant partner audiences (ie. Therapy specific outcomes)

Media coverage of role of therapists working with children

2. Develop collaborative partnerships to encourage implementation of proactive and equitable human resource practices, and creation of positive work environments, in order to foster retention of paediatric therapists.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|--|---------------------------|
| <p>[12] The Provincial Consultant will continue to update the draft guidelines and policies for recruitment and retention of paediatric therapists.</p> <ul style="list-style-type: none"> provincial target for wages & benefits encourage support for professional development and interprofessional learning & networking implementation of staff engagement indicators support burn-out prevention practices (ie. Creative solutions for LOA, flexible work schedules) encourage development of clear career paths encourage provision of sufficient equipment, materials, and admin. support for therapists | <p>Quarterly</p> |
| <p>[19] The Provincial Consultant shall communicate with paediatric therapists and employers throughout the province through a web-based link on issues related to government policies, service delivery, and standards of practice.</p> | <p>On-going</p> |

3. Promote Manageable Workloads for paediatric therapists by developing guidelines for caseloads and waitlists, including the determination and implementation of consistent language and definitions.

| Service Deliverables | Target Date |
|--|--|
| [5] The Provincial Consultant will develop a pilot project to measure & track caseloads and waitlist management. | July 2005 |
| [9] The Provincial Consultant will hire a Consultant to complete the pilot project to measure and track caseloads and waitlist management. | Interim progress report by December 2005 |

Desired Outcomes: (Phase I)

- 1) Consistent language to allow communication amongst professional disciplines and agencies
- 2) Establish guidelines that promote manageable workloads for therapists

Scope of Project:

Literature review; research relevant initiatives (provincial, national, international); draft common definitions for caseloads and waitlists; draft manageable workload guidelines (for OT, PT, SLP, account for child, family, and community factors)

Stats collection – gathering information at the level of service delivery to inform development of provincial guidelines for caseloads and waitlists

Target: service initiation within 3 months of requested service

Considerations: require specific, separate information and guidelines for Early Intervention and School-Age therapy programs

4. **Develop effective communication and networking opportunities throughout British Columbia for paediatric therapists.**

| Service Deliverables | Target Date |
|---|------------------------|
| <p>[14] The Provincial Consultant will ensure the completion of and continue to update and monitor the website that informs employers of paediatric therapists about vacant positions and recruitment and retention initiatives.</p> <ol style="list-style-type: none"> 1. Prepare plan for site maintenance & support for users 2. Prepare plan for site enhancement to include: <ul style="list-style-type: none"> Council Information Practice standards Provincial Guidelines (ie. Workloads & Waiting lists) Links, Resources, & Specialty Information Professional Development Mentorship Programs Student Practicums | <p>Monitor monthly</p> |
| <p>[22] The Provincial Consultant shall liaise with the Professional Associations and Provincial Paediatric Councils for Occupational Therapy, Physical Therapy, and Speech Language Pathology on issues affecting the workplan.</p> | <p>On-going</p> |
| <p>[19] The Provincial Consultant shall communicate with paediatric therapists and employers throughout the province through a web-based link on issues related to government policies, service delivery, and standards of practice.</p> <p style="padding-left: 40px;">establish process for updating therapists with the work of the Provincial Consultant and gain feedback</p> | <p>On-going</p> |

5. Explore a provincial mentoring strategy to support new therapists by utilizing professional expertise within this province.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|--|---------------------------|
| <p>[16] The Provincial Consultant shall collaborate with the Provincial Advisors for IDP, AIDP, SCD, Ministry staff and other community partners to ensure quality service delivery for all children identified with developmental disabilities or delays.</p> <p>develop mentoring strategy/support to link new or isolated therapists with experienced clinicians</p> | On-going |
| <p>[14] The Provincial Consultant will ensure the completion of and continue to update and monitor the website that informs employers of paediatric therapists about vacant positions and recruitment and retention initiatives.</p> <p>Council Information Practice standards Provincial Guidelines (ie. Workloads & Waiting lists) Links, Resources, & Specialty Information Professional Development Mentorship Programs Student Practicums</p> | Monitor monthly |

Develop therapy website ability to post relevant courses

Develop pilot project for buddy/mentoring system

6. Promote recruitment initiatives within physical therapy, occupational therapy and speech language pathology disciplines.

| Service Deliverables | Target Date |
|---|----------------------------------|
| <p>[14] The Provincial Consultant will ensure the completion of and continue to update and monitor the website that informs employers of paediatric therapists about vacant positions and recruitment and retention initiatives.</p> <p>Identify vacant therapy positions</p> | Monitor monthly |
| <p>[6] The Provincial Consultant will develop and update strategies for targeted recruitment to fill current vacant therapy positions in the province.</p> | September 2005 |
| <p>[11] The Provincial Consultant will compile information that will be important for the MCFD to consider for encouraging student practicum placements.</p> | January 2006 |
| <p>[12] The Provincial Consultant will continue to update the draft guidelines and policies for recruitment and retention of paediatric therapists.</p> | Quarterly |
| <p>[7] The Provincial Consultant will create an information pamphlet to be distributed to students or others considering a career in Early Intervention Therapies.</p> <p>Discipline specific brochures Meet with UBC students</p> | September 2005. |
| <p>[8] Provincial Consultant will create adaptable poster boards of discipline specific information.</p> <p>Presence at Provincial & National conferences</p> | October 2005 |
| <p>[10] The Provincial Consultant will begin to establish networks and linkages for the compilation of information on the status of therapy services for Aboriginal communities.</p> | Progress report December 2005 |

Reduce barriers to recruitment (ie. Support resolution of CSSEA contract wage discrepancies)

7. Create a plan for professional development opportunities in all 5 provincial regions.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|--|-----------------------------|
| Determine interested partners and explore feasibility and required resources – draft proposal for funding. | <u>December 2005</u> |
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organize & offer multidisciplinary professional development in each of 5 provincial regions

8. Explore innovative student fieldwork opportunities in paediatric settings.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|---|---------------------------|
| [11] The Provincial Consultant will compile information that will be important for the MCFD to consider for encouraging student practicum placements. | January 2006 |

9. Ensure timely communication of information between the Provincial Consultant and the Provincial Steering Committee, and other relevant parties.

| <u>Service Deliverables</u> | <u>Target Date</u> |
|--|---------------------------|
| [4] The Provincial Consultant, under the direction of the Provincial Steering Committee, will develop, implement and monitor a recruitment and retention workplan for British Columbia. | June 2005 |
| [21] The Provincial Consultant shall facilitate and manage meeting activities of the Steering Committee. | Monthly |
| [15] The Provincial Consultant will post monthly reports and an annual report on the steering committee website. The Consultant will also ensure the posting of the minutes of the regular meetings on the website. | Monthly, Annually |
| [17] The Provincial Consultant shall liaise with other provincial ministries (MAEd) to promote recruitment opportunities for paediatric therapists in post-secondary institutions whenever possible. | |
| [18] The Provincial Consultant shall liaise with MCFD representative regularly on broad based issues and ensure collaborative approach to issues raised. | Quarterly |
| [20] The Provincial Consultant shall liaise with research-based initiatives. | |

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|--|--|
| [23] The Provincial Steering Committee will establish an Advisory Committee to augment the Provincial Steering Committee. Additional committee members to include: <ul style="list-style-type: none"> an executive director of an agency employing Early Intervention Therapists a parent representative a representative from UBC a representative from the Aboriginal Community professional representative from IDP, SCD programs This Advisory Committee will be provided with the minutes of the Steering Committee meetings and be included in the feedback loop. The Advisory Committee will be invited to participate in quarterly teleconferences. | |
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