



Citizen Advisory Group Report

Saturday, June 25, 2016

Facilitator: Misha Glouberman

Agenda

- Introduction, review and planning day
- Report from College on follow-up from last meeting
- Review other conclusions, goals from last meeting
- Check in on group goals and norms: Are we on track?
- Review and confirm agenda for today
 - Discussion: Fees and Billing
 - Discussion: Supervision of Student Learners Standard
 - Discussion: Conflict of Interest
 - Discussion: Regulated Health Professionals Website
 - Other business and next steps

Overarching Goals Identified by the Group:

- To contribute and provide value in their work by better protecting patients, both financially (e.g., fees and service)
- By educating them (e.g., understanding insurance coverage, their rights, role of regulatory College).

Fees and Billing & Conflict Of Interest Standards Discussion Themes

- The average patient may not be aware of what is and is not appropriate practice. Patients are likely to defer to the professional and the clinic to do things right. Patients place a lot of trust in the professional, and may not ask questions because they don't feel the need to ask, or they are not comfortable asking because of the power imbalance.
- The group noted that issues may arise from the conflict between the profit-motive of the clinic owner and the interest of the patient. They suggested that there should be some sort of regulation or oversight of clinic owners or require that clinic owners must be regulated health professionals.
- The group felt that our current Fees and Billing and Conflict of Interest Standards are generally good.

In some areas, they suggested adding clearer and more specific guidance or instructions. They were more concerned about the implementation of the rules—do people comply with them?

They suggested a few ways to address this:

- Educate PTs to ensure that they know the rules.
- Educate patients about the rules and about how to make complaints.
- Check compliance through Quality Assurance.

Fees & Billing Standard Suggestions:

- More checks and balances when it comes to billing practices, for example, having the professional and patient sign an agreement about services and fees, and having the patient sign in for each session.
- Clarity around communicating fees to patients, including:
 - More specific guidance about how fee information should be communicated to patients (for example, in writing, posted in the clinic).
 - Patients should know the possible range of fees for a particular type of service.
 - Often it is the administrative staff who provide fee information to patients, so the physiotherapist should ensure that they are properly trained.
 - Patients should be given the option to re-negotiate payment schedules if their financial circumstances change.
 - The physiotherapist should get agreement from the patient about services and fees before they provide the service.
- Receipts for charges:
 - Some clinics provide different receipts to patients with insurance versus patients without insurance. The group suggested it may be good to require physiotherapists to provide standardized receipts to all patients.
 - Some participants suggested that patients need more information about how to make a complaint if they have concerns, and one way they suggested to do that is to require that physiotherapy receipts include the College's name and contact information.
- The group noted that they believe the average patient does not pay close attention to what they are being billed, and does not scrutinize invoices, so they may not realize when deceptive billing is taking place. They also point to the power imbalance between patients and professionals, and that patients do not always feel comfortable raising questions.
- Services being proposed, and the fees charged, should match the patient's treatment plan based on patient-stated goals.
- The Standard should provide more specific guidance about how frequently physiotherapists should audit their billing.
- The group made some suggestions about charging block fees:
 - Patients should have the option to choose the timing and frequency of the sessions; there should be flexibility.
 - The services must be tied to the patient's treatment plan.

Conflict of Interest Standard Suggestions:

- Regarding physiotherapists giving incentives to patients for making referrals, most participants felt that this practice is not appropriate. They did not have an issue with patients making referrals, but felt that giving patients incentives for referrals would be unethical and unprofessional.
- They suggested that the Standard should specify that the prohibition on offering incentives for referrals apply to patients as well as other health care providers.
- The group suggested that the College should use the authority in the current Standard and ask physiotherapists to disclose conflicts of interest to the College.

Supervision of Student Learner Standard Suggestions:

- Participants had no problem with a student being involved in their care, but wanted the physiotherapist to be physically in the room supervising the student.
- Patients need to give consent first, not necessarily written, but conversations must happen:
 - Because you're paying for physiotherapy services.
 - If you have concerns about potentially being hurt.
 - Ideally permission to involve the student is asked ahead of time, rather than asking patients to decide on the spot.
 - There must be a real choice to involve or not involve the student, with the ability to say no.
 - Patients want to know how experienced the student is, what role they will play, that they will adhere to confidentiality rules, and who to complain to if there are concerns.
 - Student needs to know the patient's history before they provide the treatment.
- The patient needs to feel comfortable with the student based on an impression of their skill, experience, and confidence.
 - Students aren't expected to know everything, but that they know when they need to ask for help.
- Some clinics don't tell patients that they are seeing a student.
 - Students should have to be identified for example their name, their title, what they will do.
- The group recognizes the value to student learners being involved in the care, and patients can benefit as well.
 - Students are generally appreciative.
 - Students tend to be more inquisitive, and sometimes that helps the patient gain new understanding or a new perspective about their own condition.

- Having students in the practice can throw off the normal operation in the setting, which can create some tension in the practice—the patient does not need to address that, but it's just something they've observed.
- In general, students are taught how to communicate with patients when they're in school, but if they are not implementing that, then that should be addressed.
 - Even some licensed/experienced practitioners don't do this well.

Patient-Focused Website

- The group felt a common website was an excellent idea and would be an efficient and effective use of resources for both Colleges and patients. Members said they look for health and health provider information online and often look for information about multiple health professions at the same time.

Information that the Group Felt Would be Helpful to Include:

- Short and easy to understand information about what a College is and does—it's power, main functions (from the perspective of a patient) and how it is different from an association or government.
- Short and easy to understand information describing each of the health care professions, what they do, brief description of their scope of practice, when you might see someone in that profession, if you'll need a referral to see them and if its covered by insurance.
- How to make a complaint/Practice Advisor—who can use it and how to get in contact with the Practice Links to other patient resources.
- Link to Public Registers and information about what you can find that will be helpful to patients.
- Contact information for each College.
- Ways to get involved (volunteer opportunities, Council, consultations etc.)
- Links to other external sites and resources that patients might find useful (WSIB, insurance, patient groups, associations for example).
- Facts—have a *Did You Know?* section.
- Glossary of terms or definitions if you cannot remove the difficult language.
- Extensive Search functionality.
- Links to the rules (Standards—keeping in mind we had just spent the day talking about Standards). The group suggested Colleges should have common Standards that anyone can read.

Overall Suggestions:

- It must be patient-focused in all ways. Ask yourself when adding information or pages, is this something a patient would find useful?
- User-friendly navigation, attractive, photos, roll overs and hyperlinks.
- Multiple languages when possible.
- Language must be simple (plain language) and minimal. Brief, bullet pointed, just the details, facts, links, and practical information.
- A great tagline.
- A great URL.
- Find an X in my area— needs the ability to search by postal code. Nice to be able to find professionals accepting new patients (many suggestions centred around the functionality of individual College Public Registers).
- Live chat or someone you could call or email if you needed assistance or to help redirect you.
- Social media to support and promote the site and services— it should be patient specific.
- Marketing of site—much effort should go into the tagging and search terms so people end up finding the site. The group suggested people in pain look for things like “What should I do for a sore shoulder? Or I have a concern about my eye glasses.” Ensuring the common College pops up will raise overall awareness of our existence through these online interactions.
- There should be a public awareness campaign to accompany this site that strives to increase overall patient awareness of regulatory bodies and what they can do for patients.
- Group members would like to see similarities between the College websites when possible.
- A member said “This is a chance to launch something that would help give me (the patient) access to everyone who could be possibly taking care of me in one place.”