

British Columbia Society of Respiratory Therapists

Strategic Plan 2008 – 2011

Leading the profession into a future filled with challenges & opportunities...



British Columbia Society Of
Respiratory Therapists

www.bcsrt.com

Our Mission Statement

Advocating for excellence in Respiratory Therapy

Our Core Values

Responsiveness

Trust

Leadership

British Columbia Society of Respiratory Therapists

Strategic Plan 2008 – 2011

Green-completed activities

Blue-board approved/in process

Red-pending board approval/further discussion

Pink-Associated action items for board members

Strategic Goal				
<i>I. Develop a workforce strategy that meets the manpower needs of the profession in BC</i>				
Planned Activities	Rationale	Outcomes	Accountability	Completion
<p>#1 Increase student class size by:</p> <ul style="list-style-type: none"> - Survey RT leadership about <ol style="list-style-type: none"> i) what their FTE needs are ii) what is being done with recruitment & retention - Give numbers to TRU to validate the need to increase class size <p>- Advertise in high schools & universities</p>	<p>The increase in the number of RRT's to meet workforce shortages is the <i>primary solution</i> to the RT shortage in the province. This will be done primarily through increasing class sizes for RT training and developing an effective out-of-province, out-of-country recruitment retention strategy.</p> <p>Looking internally for provincial RT student recruits will assist with keeping trained RT's in province.</p>	<p>To have adequate numbers of Respiratory Therapy graduates to meet staffing demands in BC within 24 months</p> <p>TRU class size increased</p>	<p>ARTBC – FTE vacancy rate</p> <p>ARTBC – communication to TRU</p> <p>COMPLETE</p> <p><i>PR2 Committee</i></p>	<p>March 31/08</p> <p>March 31/08</p>
		<p>Information packages made available to high schools, colleges & universities.</p>	<p><i>September 09-Ongoing</i></p>	

<p>#2 Sponsor the provision of a “consensus conference” through the ARTBC.</p>	<p>To bring a broad range of work force issues to key stakeholders for discussion and to identify solutions. The consensus conference will fuel the development of a detailed “discussion paper” containing key recommendations for action by the profession. Many of these activities will be used to populate and update the BCSRT Strategic Plan.</p>	<p>To have several concrete strategies/actions to move forward with that have the consensus of key stakeholders</p>	<p>- Sponsored by BCSRT and hosted by ARTBC - Gil Vergilio - Terry Satchwill</p> <p>COMPLETE</p>	<p>May2/08</p>
<p>#3 Increase recruitment of experienced RT’s from outside: - Website links to jobs - Website BC promotion - Need more information on lifestyle in the various communities and actual job vacancies</p>	<p>An organized, structured recruitment strategy for experienced, out-of-province RTs will enhance recruitment from outside the province.</p> <p>- Need to dispel the myths of working in an unregulated province</p>	<p>A 10% increase in the number of experienced RT’s from outside the province over the next 3 years?</p>	<p>BCSRT working group</p> <p><i>Board appointment TBD (facilitated by ED)</i></p>	<p>April 2010</p>
<p>#4 Retain the Respiratory Therapists we have -To review current career paths for Respiratory Therapists, both generic and profession specific to develop further opportunities for development.</p>	<p>Provide clinical career paths for RT’s within the profession in the province.</p>	<p>- Organizational charts for RT departments that reflect the need for specialization and any related education. - Improved staff retention - Acknowledging the areas of “advanced practice” by the employer and the union. - More effective leadership of our practice within the profession.</p>	<p>ARTBC BCSRT Homecare Specialty Group</p>	<p>Introduction to needs assessment – March-April 2009 (ARTBC)</p> <p>July 2009-needs assessment nearly developed-expect distribution to members by end of October 2009</p>
<p>#5 Develop a detailed model for a “technician” level entry requirements into the profession based on the current</p>	<p>As the profession moves forward this strategy will ensure that the more task oriented elements of its scope of practice is provided within the profession, to standard.</p>	<p>Continued maintenance of standards of practice by the profession.</p>	<p>Survey of RT departments for number of QNR’s and potential need for RT assistants</p>	<p>Notification that Concept/call for working</p>

<p>occupational profile.</p> <ul style="list-style-type: none"> - Develop “subject certification” for the various task levels within the profession to allow for gradual on-the-job access to the necessary training. - where appropriate build on existing skills from other trained HCP’s (e.g. LPN’s and Paramedics) 	<p>To ensure that there is a standardized entry level for the profession at the technician level should employers requires this type of worker to supplement the RRT.</p>	<p>Improved access with quick turn around training times for employer based education at the entry task level.</p>	<p>(July 2009-Survey in development-distributed mid-September just prior to ARTBC meeting)</p> <p>Strike a special working group made up of educators and practice leaders.</p>	<p>group to be formed after provincial survey is done, presented at ARTBC March 2009</p> <p>Target date for Survey completion December 2009</p>
<p>#6 Determine the suitability of the draft process being developed by the National Alliance for the recruitment of foreign trained RT’s</p> <ul style="list-style-type: none"> - develop a prepared statement for Board members to use when inquiries are being made. 	<p>To ensure the process being developed for regulated provinces is appropriate for use in BC</p>	<p>To have a standardized process in place to share with BC employers</p>	<p>BCSRT President & past president</p>	<p>January 2010</p>
<p>#7 Determine the status of foreign trained RT’s working in BC – QNR? –permanently, temporary or both</p>	<p>Will foreign trained RT’s be required to write the national exam? What are the employment options for those who don’t?</p>	<p>To ensure the RRT is the gold standard for the profession and protected in the collective agreement.</p>	<p>Survey of PPL’s/Respiratory Managers-see #5</p>	<p>Concept introduced to ARTBC March 2009</p> <p>December 2009</p>
<p>#8 Recruiting RT students as Respiratory Aides</p>	<p>To ensure the potential issues have been addressed before implementing this option;</p> <ul style="list-style-type: none"> - level of supervision required - progressive responsibilities – what will it look like - credit for clinical time to allow students to fast track and graduate earlier 	<p>An effective option to assist employers in meeting work-load issues cost effectively. Another mechanism for allowing students to graduate early and enter the work force (while still meeting the standards of an accredited training program)</p>	<p>Educator/practice leader working group-same working group as per #4 & #5.</p>	<p>Concept introduced to ARTBC March 2009</p> <p>Post Survey back to ARTBC March 2010</p>

<p>#9 Promoting access to a baccalaureate degree as an option for individuals considering Respiratory Therapy as a career path.</p>	<p>To ensure that those prospective students that desire a degree education and are considering Respiratory Therapy can access both.</p> <p>Q: How many RT's in the province are pursuing a degree in Respiratory Therapy?</p>	<p>Greater numbers of students seeking the baccalaureate stream for the Respiratory Therapy program at TRU.</p> <p>Enhanced development of professional leadership.</p> <p>Increased opportunities for an expanded role in the community.</p>	<p>TRU degree program statistics & Survey of membership</p> <p>July 2009-Survey has been developed.</p>	<p>Survey distribution October 2009 or earlier</p> <p>Ongoing annually</p>
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Strategic Direction
II. Investigate, develop & implement a process to ensure that entry-to-practice & ongoing competency/conduct standards in BC are being applied on a province-wide basis.

Planned Activities	Rationale	Outcome	Accountability	Completion
<p>#10 Convene a committee (BCSRT) to coordinate activities/communication around self regulation</p> <ul style="list-style-type: none"> - TOR developed - membership confirmed - Chair appointed 	<p>To maintain a strong and consistent communication with the government, the membership and the Board on key issues that may effect the success of the BCSRT's application to become regulated under the Health Profession's Act</p>	<p>A clear understanding of the governments agenda and the opportunity to develop and implement some clear strategies to move the BCSRT's application forward</p> <p>Effective communication with the membership on this issue</p>	<p>BCSRT Board</p> <p>COMPLETED</p>	<p>February – March 2008</p> <p>Ongoing</p>
<p>#11 Meet with key decision makers on an ongoing basis</p> <ul style="list-style-type: none"> - MOH – Feb 14th – To inform the ministry and HPA of the BCSRT's current position on regulation under the Health Professions Act and current activities we are engaged in - HEABC – Jan 9th , April 7th <p>Find out results of HSA/HEABC policy grievance re mandatory membership in professional ass.</p> <p>- Develop and distribute a</p>	<p>To have frank and productive discussions with these key stakeholders in order to move the BCSRT's agenda forward</p> <p>To determine what temporary actions (if any) the BCSRT will consider undertaking to regulate the profession under the Occupational Titles Protection section of the Societies Act.</p> <p>To provide a comprehensive document that will</p>	<p>The development of effective strategies to move forward with</p> <p>To have an effective, transitional mechanism for regulating the profession as a means of protecting the public</p> <p>Developing a clear and objective</p>	<p>BCSRT Board/ Regulation Coordination Committee</p> <p>COMPLETED</p> <p>COMPLETED</p>	<p>Jan – Feb 2008 & ongoing</p> <p>HEABC (Jan 9th)</p> <p>MOH (Feb 14th)</p> <p>2010 collective agreement</p> <p>October 2008</p>

Briefing document, that will provide a comprehensive outline of the key issues & challenges the profession is facing in its efforts to provide safe patient care.	outline the issues, clearly, and objectively. This will hopefully provide a basis for future discussions with the Health Professions group, the MOH and HEABC.	rationale for a regulatory process for RT's.		Communication /updating of briefing documents etc., ongoing
#12 Investigate and advocate for other options for "self regulation" with MOH - if appropriate, come to an agreement on a temporary provincial process with HEABC/HPA for mandatory registration with BCSRT (until regulation with HPA is achieved) - prepare and submit an extensive Briefing document that outlines all of the issues currently effecting RT's.	To demonstrate to the MOH the flexibility of the profession in moving forward with a model for self regulation that meets the needs of all The need/value of having a regulatory process in place to protect the public	To have an acceptable process (to the BCSRT, HEABC, MOH and the public) for regulating the profession	BCSRT Board IN PROCESS	Long Term (2 – 3 years)
Strategic Direction <i>III. Speaking effectively on behalf of the Respiratory Therapists in the Province</i>				
Planned Activities	Rationale	Outcome	Accountability	Completion
#13 Determine what the needs of RT's in the province are - use of a survey, focus group, questionnaire	To make the BCSRT more relevant to the RT's in the province	To have a clear understanding of the professions needs and to identify possible strategies to respond Increased involvement of the membership in BCSRT activities	To be done in tandem with #9 July 2009- Survey has been developed.	January 2010
#14 Make better use of the BCSRT's Vision Statement - place on BCSRT business	To better market the BCSRT and improve its profile to the profession and external stakeholders	A more visible and engaged profession in the province	BCSRT Secretary	COMPLETED & ONGOING

Strategic Direction

IV. Recognize and promote the development of Specialty Practice

Planned Activities	Rationale	Outcome	Accountability	Completion
<p>#17 Identify specialty areas – entry practice or advanced practice, special clinical domains - conduct a needs assessment of the specialty education that is needed for the profession - develop strategies for incorporating specialty education into the staffing mix and service delivery model within the various RT Depts in the province (depending on the above needs assessment) -Once determined, take for discussion at national level</p>	<p>To identify areas where further development of practice is necessary</p>	<p>- to identify areas for further developing advanced practice - to identify the scope of practice for a “Respiratory Assistant” Specialty practices recognized by the employer and by the union</p>	<p>Working group of educators & clinicians <i>Board appointment</i> BCSRT President ARTBC</p>	<p>3 – 6 months January 2010 3 – 18 months post needs assessment CSRT 2010</p>
<p>18 Work closely with TRU faculty to promote the development of and access to a generic applied Masters degree for the profession.</p>	<p>To nurture professional interest in clinical research to drive the evidence based development of the professions scope of practice from within the profession itself.</p>	<p>More changes in respiratory therapy practice being driven and supported from within the profession.</p>	<p>President/TRU Respiratory Therapy program faculty</p>	<p>2008 – 2011 ongoing</p>
<p>19 Provide educational support for leadership within the profession. - fund for leaders to attend specific education offerings</p>	<p>To support leadership development.</p>	<p>The development and enhancement of leadership skills within the profession.</p>	<p>BCSRT Board/ARTBC ONGOING</p>	<p>Spring 2010</p>

#20 To continue to encourage the creation of provincial SIG's (or attach to nationally (CSRT) created SIG's if appropriate) - "PR Committee" to conduct a needs assessment	To provide a mechanism for RT's working in a specialty area to meet and discuss matters germane to that area of practice	A mechanism within the BCSRT to promote the development of all our specialty areas	<i>BCSRT Board appointment TBD</i>	3 – 12 months to initiate then ongoing
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Strategic Direction
V. Increase Membership in and support of BCSRT

Planned Activities	Rationale	Outcome	Accountability	Completion
#21 Student recruitment - Information package in orientation (to be discussed by teacher) - Teachers promote BCSRT (i.e. professionalism in class) - 1 year free membership to try it out - BCSRT member Board member to give a talk at TRU	To improve student understanding and support of the role of the BCSRT/CSRT in their professional lives	Increased membership and volunteers	Student Director/TRU Program Coordinator	COMPLETED
#22 Create packages for members/non-members - Info about BCSRT & what we do - Registration forms - Develop/update the "What the BCSRT Does for You" document - "BCSRT Respiratory Therapist" name tag	To improve awareness and profile of BCSRT in the profession	As above Increased attendance at AGM	<i>Christa Sloan/ BCSRT Board</i> <i>IN PROCESS</i>	24 months
#23 Consider appointment of a qualified individual to a position of "Executive Director" for the BCSRT.	In the absence of sufficient volunteers, this position will more effectively address the ongoing issues identified by the Board. Will also to be able to provide some consistency of communication and strategies between various BCSRT committees/task groups	Timely and effective completion strategic and operational activities assigned by the Board.	<i>BCSRT Board</i>	July 2009- Currently recruiting for position

<p>-Develop job description and current strategies that ED could be involved in.</p> <p>#24 Promoting consistency in BOD to ensure future of strategic plan</p> <p>-Consider reworking/adding past president/vice president position</p>	<p>Create processes for position and demonstrate value of position.</p> <p>Increasing term of president may allow strategic plans to more fully develop by increasing consistency of approach</p>	<p>Accountability of position per projects and work will be clearly articulated.</p> <p>Ongoing consistent progress with strategic plans/directions</p>	<p>BCSRT PRESIDENT- PRESIDENT ELECT</p> <p>BCSRT Board & Membership</p>	<p>March 2009</p> <p>Will be presented to membership at AGM 2009</p>
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