

# **Orthotics Prosthetics Canada**



## **Residency Program Handbook**

Revised: May 2017

# OPC Residency Program Handbook

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# OPC Residency Program Handbook

## 1.0 ORTHOTICS PROSTHETICS CANADA

CBCPO and CAPO recently amalgamated to create Orthotics Prosthetics Canada (OPC). All trademarks, including CBCPO and all certification and registration credentials, are owned by OPC. However, CBCPO remains the certification body and is an independent Board responsible for implementing and managing the certification and registration processes. Successful candidates are still considered CBCPO Certified/Registered through OPC.

## 2.0 OVERVIEW

This document is a comprehensive resource to guide the Prosthetic/Orthotic Resident through all aspects of the Residency Program from initial application to the Program through completion of the Certification Examinations. The most relevant of documents pertaining to the Residency Program are provided within the appendix of this document. For a definition of important terms used throughout this handbook, please see *Appendix 1- Definitions*. Any inquiries about the handbook or the Residency Program should be directed to the Orthotics Prosthetics Canada (OPC) National Office. Contact information can be found at the end of this document.

The OPC Residency Program is a required stage of post-graduate training in the specialty of prosthetics or orthotics. The Residency is completed under the supervision of a Certified Practitioner in good standing with the Corporation and may take place in a private or public facility. The 3450-hour Residency must be performed in the appropriate discipline while employed as a Resident by a Prosthetic or Orthotic facility within a five year period.

## 3.0 GENERAL PARAMETERS

- Residency starts upon receipt of application accompanied by full payment received by couriered registered mail at the OPC National Office. A copy of the application can be found in *Appendix 2 – Prosthetic/Orthotic Residency Application*. Please ensure all 7 pages of the Application and all required documents are included.
- Residents are Associate Members of OPC and must adhere to all conditions for membership including the payment of annual fees and conduct themselves within the Canons of Ethical Conduct.
- The Resident is responsible for ensuring that OPC has accurate and up-to-date contact information, Residency Program status, supervision and employment. Some of these

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can be done online by the Resident in the member profile, while others will require submission of the Residency Program Change Form (*appendix 6*) and submitting it to the OPC National Office. It is not the responsibility of OPC to investigate changes to a Resident's situation.

- Residents must acquire 3450 hours of experience in the appropriate discipline, to be eligible to sit the Certification Examination. Residents must acquire the necessary hours, pass the Written Examination, and challenge the Oral and Practical Examination for the first time within 5 years of the commencement of their Residency.
- Residency hours are counted up to and including the first twenty one (21) weeks of the year preceding the Certification Examinations (up to and including the twenty-first (21<sup>st</sup>) Friday of that year).
- If pursuing a second discipline, 3450 hours of experience in that discipline are required to be eligible to sit the Certification Examination. However, if the Resident pursuing their second discipline has graduated from an OPC Accredited Clinical Prosthetic/Orthotic school program and has been practicing as a Certifee in their first discipline for five or more years, only 1725 hours of experience are required in their second discipline to be eligible to sit the Certification Examination.
- The Residency hours must be actual supervised working hours, to a maximum of 48 hours per week, excluding any and all forms of absences from the job due to vacation, sickness, maternity/paternity leave, etc.
- Residency hours must be documented in the OPC approved method that is provided by the Corporation. The Typhon logging system will be used to document and record hours. *See 6.1 "Recording Hours / Typhon Online Logging System" for more details.*
- The Resident must be under the supervision of a Certifee in good standing with the Corporation in the appropriate discipline.
- The Supervising Certifee must be responsible for all the work performed by the Resident, including but not limited to: patient contact, assessment, patient model rectification, modifications, fabrication, treatment provision, follow-up, and patient records. For a detailed explanation of the duties and responsibilities of both the Supervisor and the Resident, *see Appendix 3 – Scope of Practice.*

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- Residents should be aware that Supervisors are limited to two Residents and/or Technical Interns at a time. For example: two Residents or two Technical Interns, or one Resident and one Technical Intern. Should the instance arise that more than two Residents and/or Technical Interns list the same Supervising Certifee, all Residents/Technical Interns involved risk losing credit for their Residency Hours.
- All applicants are expected to have conducted themselves within the OPC Canons of Ethical Conduct. See *Appendix 4 – OPC Canons of Ethical Conduct*.
- Once all residency hours in a discipline are completed the candidate is eligible to challenge the oral-practical certification exam to a maximum of three attempts and within the time allocation limits established, pending proper application and payment of fees and appropriate members' dues.

## 4.0 APPLICATION TO THE RESIDENCY PROGRAM

Residency starts upon receipt of the Residency Application, accompanied by full payment, and received by couriered registered mail at the OPC National Office. The Residency Application should be submitted as early as possible to ensure it is received by the OPC National Office prior to the start date at the place of employment, to maximize the number of Residency Hours. Please see *Appendix 2 – Prosthetic/Orthotic Residency Application*. Please ensure all 7 pages of the Application and all required documents outlined in the application form are included with your submission.

### 4.1 Foreign-Trained Applicants

Foreign-trained applicants must have their education and French/English proficiency assessed by the Corporation's Education Committee and by a third party assessment organization as directed by the Corporation. If foreign qualifications are deemed equivalent to the current standards of the Corporation, then the individual will be required to successfully complete the OPC Entry-to-Residency Examination. Applicants will have three attempts to pass the Entry-to-Residency Examination in each discipline. Failure to pass the Entry-to-Residency Examination, with a passing mark of 70%, after three attempts, will deem the candidate ineligible for any further privileges to sit the Examination in that discipline without successful completion of an OPC Accredited Prosthetic and Orthotic program. Applicants can obtain all information from the OPC National Office.

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Upon successful completion of the Entry-to-Residency Examination, the applicant will be required to register with the Residency Program and complete a Residency, in Canada. All foreign-trained individuals must be legal landed immigrants or Canadian citizens at the time of the application to sit the Certification Examination.

## 4.2 ABC Certified Applicants

If an applicant is Certified in Prosthetics and/or Orthotics, and is currently in good standing with the American Board for Certification in Orthotics, Prosthetics and Pedorthics (ABC), the Corporation will waive the educational and Residency requirements. The Candidate must submit a letter from ABC verifying good standing dated within two (2) months of the application for the Certification Examination.

## 5.0 RESIDENCY FEES

Fees for application to the Residency Program and annual Residency dues are outlined in the fee schedule in *Appendix 7*:

- Regarding dues for OPC Members (Certified or Registered) whom are participating full or part-time in their 2nd discipline Residency or Internship: These Members will pay annual Residency/Internship fees plus an additional dues amount to maintain Certification/Registration during the time of their training in second discipline so that their entire annual dues and fees amount will be no more than the annual dues of a Certifee/Registered Technician. These Members continue to be responsible for fulfillment of the Mandatory Continuing Education requirements for their initial certification/registration status to remain in good standing. *See Appendix 7 for specific amounts.*

## 6.0 PROSTHETIC/ORTHOTIC RESIDENT RESPONSIBILITIES

Under the close clinical supervision of an OPC Certified Practitioner in good standing; a registered Prosthetic or Orthotic Resident is competent to perform clinical assessment and patient management tasks. The Resident also carries out practice management and technical implementation activities and services. In addition, the Prosthetic or Orthotic Resident is obligated to support and conform to professional responsibilities that promote and assure the

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overall welfare of the patient and the integrity of the Profession. Please review *Appendix 3 - Scope of Practice*, for a detailed explanation of the limitations, roles and responsibilities of the Resident during the course of their Residency Program.

On a yearly basis, the Resident must complete the confidential “Resident Evaluation of Residency Program” survey within Typhon.

## 7.0 LEVELS OF SUPERVISION AND TYPHON EASI EVALUATIONS

It is necessary that Residents progress through the Residency program with increasing responsibility, based on developing competencies. To capture this graduated progression and encourage feedback and discussion between Supervisors and Residents an online evaluation survey must be routinely completed.

The Resident’s primary Supervisor must complete OPC’s online *Graduated Competency Evaluation* (GCE) on the Typhon platform at a minimum of quarterly intervals during the months of January, April, July and September of each year or more often if deemed necessary by the Supervisor.

Primary Supervisors must log in to their Typhon account and complete the GCE by selecting the rating that best describe the Resident’s abilities at the current time. Ideally, Primary and Secondary Supervisors should be present for the evaluation.

### GCE Definition: Levels of Supervision

Direct Supervision	Needs <b>constant guidance</b> . OPC approved clinical Supervisor in good standing must be <b>physically present</b> during this task.
Indirect Supervision	Needs <b>occasional guidance</b> . OPC approved clinical Supervisor in good standing must be <b>available onsite</b> during this task.
Independent	Resident has consistently demonstrated safe practices for this task. Resident is organized,

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provides effective care and seeks assistance as needed. Onsite **Supervisor presence not required**. Does not imply complete proficiency

Regardless of the rating selected, the Resident remains responsible for acting in accordance with OPC Ethical Conduct regulations at all times. Supervisors remain responsible for the Resident's clinical performance and the safety of patients.

In addition to completing GCE's on a quarterly basis, the Residents are requested to complete the *Resident Evaluation of Residency Program* Typhon survey on an annual basis.

## 8.0 HOURS

Residents must acquire 3450 hours of experience in the appropriate discipline, to be eligible to challenge the Certification Examination. Residents must acquire the necessary hours, pass the Written Examination, and challenge the Oral and Practical Examination for the first time within 5 years of the commencement of their Residency. Hours are counted up to and including the first twenty one (21) weeks of the year preceding the Certification Examinations (up to and including the twenty-first (21<sup>st</sup>) Friday of that year). If pursuing a second discipline, 3450 hours of experience in that discipline are required to be eligible to sit the Certification Examination. However, if the Resident pursuing their second discipline has graduated from an OPC Accredited Clinical Prosthetic/Orthotic school program and has been practicing as a Certifee in their first discipline for five or more years, only 1725 hours of experience are required in their second discipline to be eligible to sit the Certification Examination. Residency hours must be actual supervised working hours, to a maximum of 48 hours per week, excluding any and all forms of absences from the job due to vacation, sickness, maternity/paternity leave, etc.

### 8.1 Recording Hours/Typhon Online Reporting System

Residency Hours are to be tracked in an online format using the Typhon Online Reporting System. Upon acceptance to the Residency Program, you will receive an email from OPC National Office inviting you to register for the Typhon Program. Upon accessing the Typhon Program, you will be prompted to pay a one-time admin/set-up fee, which must be paid by credit card directly to Typhon prior to use of the program. There is no charge for Supervisors. Once payment has been made, a video tutorial will be available on the Typhon home page

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highlighting the main features of the program. The video tutorial is unique to OPC and will help guide you through use of the platform. Residents MUST use Typhon for documentation of hours logged toward your Residency. Aside from logging your hours, it is up to the Resident to complete as much or as little clinical information as they deem necessary. Residents are not mandated to enter case-logs. However, by recording a variety of cases that Residents see, they can provide proof that they are progressing through a range of clinical exposures during their Residency. Ultimately, it is hoped that the addition of clinical case information on the platform adds usefulness and value to the Residency Program and the Residents themselves. Residents may find that some of the data functions help with preparation for the Certification Examinations by highlighting deficiencies they may have prior to sitting the Examinations.

**Hours are required to be logged by the Residents and submitted online every 30 days, commencing at the start of the Residency. Supervisors are then responsible for verifying the logged hours within a 60-day period.**

## 8.2 Resident Continuing Education Hours

Resident Continuing Education Hours allowance: Residents are permitted to attend preapproved courses, conferences, tutorials, and other similar educational opportunities during the Residency period. Residents must apply to the OPC National Office for a ruling on the eligibility of such courses, conferences, tutorials or otherwise **prior** to attending. A number of hours equal to the MCE credits for a given educational opportunity may be applied towards the total Residency hour commitment. Residents must submit confirmation of attendance of the pre-approved course to OPC National Office within two months of course completion. Continuing Education Hours are calculated separately from the Working Hours. Working Hours plus Continuing Education Hours combine to equal total Residency Hours. The maximum allowable hours that can be applied toward the Residency as Continuing Education Hours are 40 towards the 3450 hours Residency and 20 for a 1725 hours Residency. A Resident may accumulate more than the maximum education hours noted above, but any hours over 40 or 20 for the respective Residencies cannot be used towards the required Residency hours. Activities that are not eligible for the Continuing Education Hours include but are not limited to writing articles, presenting lectures/tutorials or guest lectures, on-line courses or volunteering activities.

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## 8.3 Allowances for McMaster University Master of Science (Rehabilitation) Program

OPC has officially recognized the McMaster University Master of Science in Rehabilitation Program and will honour credit toward the Residency period as a pilot program to be reassessed on a yearly basis. The credit will apply as a reduction in the number of required hours of the Residency Program. The credits will apply as follows:

- 80 hours credit per course
- 160 hours credit for the scholarly paper
- 400 hours credit for the thesis (for students of Thesis-Based M.Sc.- Rehabilitation)
- Maximum 720 hours credit towards the Residency Program for students who concurrently attend a OPC accredited school and McMaster University M.Sc.(Rehab)
- Includes courses while at a OPC accredited school of prosthetics and orthotics
- Maximum 480 hours credit towards the Residency Program for Residents who start the M.Sc.(Rehab) during the Residency Program
- Official proof of enrollment in the M.Sc. Rehabilitation Program at McMaster University is required
- Official transcripts confirming successful course completion is required to be submitted by couriered registered mail to the OPC National Office on or before January 31 of each year
- Maximum one course per semester
- 1st discipline Residency only

\* Hours applied towards the M.Sc. Program cannot be used as education hours

## 8.4 Off-Site Residency Procedure

During the Residency, it may be required to attend other Prosthetic and Orthotic facilities to gain exposure to clinical areas of expertise that may not be seen at your own place of employment. Visiting hours may be logged within Typhon as usual and verified by the Resident's Supervising Certifee. Prior to the visit, the Resident must complete out the "Prosthetic/Orthotic Residency Off-Site Application" in *Appendix 5*. Prior to visiting the site, the form must be filled out by the Resident, signed by both the Resident and the Resident's Supervising Certifee, and then sent to OPC National Office for approval. After approval, the Resident may attend the site for the dates indicated on the form, and must have the Attending Supervising Certifee sign the Prosthetic/Orthotic Residency Off-Site Application to indicate that the Resident has attended.

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The Resident must keep the completed application for their records. Visiting hours will be logged as per usual and verified by Resident's Supervising Certifee. All protocols and procedures of the Residency remain in effect while at the visiting site. It is the responsibility of the Resident to ensure all requirements are met regarding insurance and liability concerns during the time off-site.

## 9.0 CERTIFICATION EXAM

For the latest information related to the OPC Certification Examination, please refer to [www.opcanada.ca](http://www.opcanada.ca) for the following documents:

- Certification Examination Application
- Policy and Procedure Manual
- Typical Written Examination Schedule
- List of Tools

**OPC National Office**  
Suite 202, 300 March Road  
Ottawa, Ontario K2K 2E2  
Phone: 613-595-1919  
Fax: 613-595-1155  
Email: [info@opcanada.ca](mailto:info@opcanada.ca)  
Website: [www.opcanada.ca](http://www.opcanada.ca)

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## APPENDIX 1 – DEFINITIONS

**Member in Good Standing:** A member of the Corporation who has met all Mandatory Continuing Education requirements, has paid in full all professional fees and assessments as required by the Corporation, inclusive of interest if any, and is in compliance with all rules and regulations as set out in the Corporation's policies governing member requirements as may be amended from time to time at the discretion of the Board of Directors.

**Associate Members:** Associate member status shall be available only to Residents, Interns or persons, firms, corporations or other entities interested in Orthotic and/or Prosthetic Patient care as determined by the Board and who have applied and have been accepted by the Board of Directors as Associate members. Subject to the Act and the articles, Associate members shall not be entitled to receive notice of or attend meetings of the members of the Corporation unless invited by the President. Associate members shall not be entitled to vote at member meetings. The term of membership of Associate members shall be annual, subject to renewal in accordance with the policies of the Corporation

**Prosthetic and Orthotic Profession:** those persons, firms, corporations or other entities engaged in providing prosthetic and/or orthotic care to individuals who require prosthetic and/or orthotic treatment, including without limitation individuals with partial or total absence of a body segment and/or pathomechanical and/or neuromuscular conditions of the body

**Prosthetist:** an individual, who has been duly educated and trained, and is Certified under the requirements of the Corporation to provide prosthetic care to patients with limb amputation or the congenital absence of a limb by clinically and functionally evaluating, designing and creating a prosthetic treatment which uses an interface to support, control and suspend a prosthesis. The goals of the prosthetic treatment are to provide optimal care and independence to the patient, restoration of normal human form and/or improvement of function. This may include treatment with a prosthesis.

**Orthotist:** an individual who has been duly educated and trained, and is Certified under the requirements of the Corporation to provide orthotic care to patients with pathomechanical and/or

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neuromuscular conditions of the body by clinically and functionally evaluating, designing and creating an orthotic treatment which transfers forces to optimize function, health and/or comfort. The goals of the orthotic treatment are to provide optimal care and independence to the patient. This may include treatment with an orthosis.

**Certified Prosthetist – Orthotist:** an individual whose responsibilities and functions conform to those of both the "Certified Prosthetist" and "Certified Orthotist" as defined herein.

## Classification of Certification

CP (c) Certified Prosthetist

CO (c) Certified Orthotist

CPO (c) Certified Prosthetist – Orthotist

**Residency:** A stage of postgraduate training in a public or private clinic in the specialty of Prosthetics or Orthotics under the supervision of a CBCPO or OPC Certified Practitioner in good standing with the Corporation.

**Prosthetic Resident or Orthotic Resident:** an individual who is a clinical school graduate or the accepted equivalent as determined by the Corporation (i.e. foreign trained individual) who is receiving skill-based training in either prosthetics or orthotics, as the case may be, in a public or private Clinic and has been accepted by the Corporation and entered into the Corporation's Residency Program.

**Supervising Certifee:** Certified Prosthetist and/or Certified Orthotist in good standing with the Corporation, who is responsible for the interaction, observation, guidance and direction personally provided to the Resident of the respective discipline. The Supervising Certifee is responsible for all work done by the Resident including; patient contact, assessment, casting, model rectification, fabrication, treatment provision, follow-up care and patient records

**Prosthetic Registered Intern or Orthotic Registered Intern:** An individual who has completed a Corporation Accredited Technical Program or enrolled under Method II criteria as set out in the Corporation's Technician Registry and Registration Program Guidelines or the accepted equivalent as determined by the Corporation (i.e. foreign trained Technician) and has been accepted and entered into the Corporation's Registered Internship Program.

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**Registered Internship:** A stage of training recognized by the Corporation by which eligible and accepted candidates can, by completing the program and through examination, become Registered Prosthetic Technicians and/or Registered Orthotic Technicians.

**Supervisor of an Intern:** Certified Prosthetist or Certified Orthotist or Registered Prosthetic Technician or Registered Orthotic Technician in good standing with the Corporation, who is responsible for the interaction, observation, guidance and direction personally provided to the Intern of the respective discipline. The Supervisor is responsible for all work done by the Intern including the design and fabrication, maintenance and repair of prostheses and/or orthoses and their components in such a manner as to provide maximum anatomical congruency, function, and workmanship.

## **Levels of Supervision:**

- **Direct Supervision:** Needs constant guidance. An OPC approved clinical Supervisor in good standing must be physically present during identified task.
- **Indirect Supervision:** Needs occasional guidance. An OPC approved clinical Supervisor in good standing must be available onsite during identified task.
- **Independent:** Resident/Intern has consistently demonstrated safe practices for this task. Resident/Intern is organized, provides effective care and seeks assistance as needed. Onsite Supervisor presence not required during identified task. Does not imply complete proficiency.

**Registered Member:** a Member in Good Standing, recognized by the Corporation, including Registered Prosthetic Technician, Registered Orthotic Technician, and Registered Prosthetic - Orthotic Technician.

**Registered Prosthetic Technician:** an individual who provides technical expertise in the design, fabrication, maintenance and repair of prostheses and their components to provide maximum anatomical congruency, function, and workmanship.

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**Registered Orthotic Technician:** an individual who provides technical expertise in the design and fabrication, maintenance and repair of orthoses and their components to provide maximum anatomical congruency, function, and workmanship.

**Registered Prosthetic/Orthotic Technician:** an individual whose responsibilities and functions conform to those of both the “Registered Prosthetic and Registered Orthotic Technician” as defined herein.

## **Classification of Registration**

RTP (c) Registered Prosthetic Technician

RTO (c) Registered Orthotic Technician

RTPO (c) Registered Prosthetic – Orthotic Technician

**Clinic:** a public or private facility in which Prosthetic and/or Orthotic treatment is administered.

## APPENDIX 2 – RESIDENCY APPLICATION

### Prosthetic/Orthotic Residency Application

Mr. /Mrs. /Ms. (Circle one)

\_\_\_\_\_  
First name

\_\_\_\_\_  
Last name

#### Home Address

Address \_\_\_\_\_

Street

\_\_\_\_\_  
City

Province

Postal Code

E-mail: \_\_\_\_\_ H ( ) \_\_\_\_\_

#### Employment Address

Company: \_\_\_\_\_

Address \_\_\_\_\_

Street

\_\_\_\_\_  
City

Province

Postal Code

W ( ) \_\_\_\_\_ F ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address Preference:

Home

Employment

E-mail Preference:

Home

Employment

Correspondence preference:

English

French

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## Degrees

1) College/University \_\_\_\_\_

Year Graduated \_\_\_\_\_ Highest Degree/Diploma held: \_\_\_\_\_

2) College/University \_\_\_\_\_

Year Graduated \_\_\_\_\_ Highest Degree/Diploma held: \_\_\_\_\_

### Note:

- Please include a copy of your diplomas, etc. from the "Canadian" accredited clinical school (The diploma may be sent in separately if not received yet.)
- If applying under Foreign Applicant Status, please provide a copy of a letter from the Orthotics Prosthetics Canada (OPC) Education Chair stating the acceptance of your educational evaluation.

**Employment Start Date:** (mm/dd /yr) \_\_\_\_\_

## **Residency Types**

**Complete this section if you have graduated from an accredited school program:**

- |   |                                    |                                      |
|---|------------------------------------|--------------------------------------|
| <input type="checkbox"/> <b>Prosthetics</b> | <input type="checkbox"/> 3450 hour | <input type="checkbox"/> 1725 hours: |
| <input type="checkbox"/> <b>Orthotics</b>   | <input type="checkbox"/> 3450 hour | <input type="checkbox"/> 1725 hours: |

If a Certifee (who has obtained their first discipline after completing a recognized clinical prosthetic/orthotic school program) has been certified for more than five years and practicing full time in their primary discipline, a further 1725 hours of practical experience and residency under the supervision of an on-site resident Certifee in the appropriate discipline is required.

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## ***Complete this section if you are a Foreign Applicant***

- Prosthetics**      (3450 hours)
- Orthotics**      (3450 hours)

Foreign trained applicants must have their education assessed by a third party assessment organization as directed by the Corporation. If foreign qualifications are deemed equivalent to the current standards of the Corporation, then the individual will be required to register with the residency program and complete a residency of 3450 hours in Canada. Acceptance letter must accompany this application.

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## ***PRIMARY SUPERVISING CERTIFEE***

Name: \_\_\_\_\_ Certification # \_\_\_\_\_

Email for Typhon \_\_\_\_\_

Name of Facility: \_\_\_\_\_

## ***SECONDARY SUPERVISING CERTIFEE***

Name: \_\_\_\_\_ Certification # \_\_\_\_\_

Email for Typhon \_\_\_\_\_

Name of Facility: \_\_\_\_\_

As the supervising certifee you are authorizing that the Resident may apply to the Residency program and that you will be responsible for ensuring that the Resident is prepared for the Certification Examination. The Resident must be working his/her Residency hours in the appropriate discipline, under your direct supervision as stipulated by Orthotics Prosthetics Canada (OPC) residency program policies.

During scheduled unsupervised hours Resident must not conduct himself/herself in any way contrary to the OPC Code of Ethics.

**I/WE SOLEMNLY DECLARE THAT:**

1. To the best of our knowledge, information and belief, the statements contained in the foregoing application to Orthotics Prosthetics Canada are true and correct in all respects.
2. We have read the regulations pertaining to certification and understand that any certification, which may be granted, shall be subject to such regulations.
3. We acknowledge and agree that Orthotics Prosthetics Canada (OPC) may keep the information, including all personal information provided, on file in accordance with its obligations at law pursuant to the *Personal Information Protection and Electronic Documents Act* and in accordance its Privacy Policy. OPC may use my personal information provided to assess my certification, administer my application and this examination, and other connected or related administrative matters.

**Primary Certifee Signature** \_\_\_\_\_

**Secondary Certifee Signature** \_\_\_\_\_

**Resident's Signature** \_\_\_\_\_

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Please include with your payment the attached Privacy documents.

## **FEES**

Please include the application fee of \$500.00

+ 5% GST = \$525.00 (BC/AB/SK/MB/QC)

+ 13% HST = \$565.00 (ON)

+ 15% HST = \$575.00 (NL/NS/NB/PE)

A Residency fee of \$850.00 + applicable tax is invoiced and payable annually to OPC beginning in the year following your acceptance into the Residency program.

Please return this via **Courier Registered Mail** only to:

OPC National Office  
202-300 March Road  
Ottawa, Ontario K2K 2E2

***NOTE: Any changes to supervision requires a Change to Residency form to be submitted to the OPC National Office. Any changes to personnel information must be reported to the OPC National Office.***

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## The OPC Privacy Policy

OPC is a non-profit corporation recognizing proficiency in the field of prosthetics and orthotics. OPC regulates the credentialing and ethics of all its members who practice in the field of fitting and manufacturing prosthetic and orthotic devices.

In order to provide these services OPC must collect certain personal information from its members and from third parties. OPC understands the importance of keeping personal information confidential and is dedicated to upholding certain confidentiality obligations at law, pursuant to the Personal Information Protection and Electronic Documents Act and Regulations, and as set out in this Privacy Policy.

To comply with its obligations at law, OPC has adopted a Privacy Policy and appointed a Privacy Officer who is accountable for its compliance with its obligations at law.

The complete OPC Privacy Policy is available on request from the OPC Privacy Officer.

OPC has undertaken to ensure that its employees, agents and authorized persons take all reasonable steps to protect the confidentiality of personal information. OPC is dedicated to taking reasonable steps to protect personal information from risks such as inappropriate collection, use, disclosure, storage or destruction.

Accordingly, OPC will only use the personal information collected in order to address issues of certification, to keep a membership register, to address ethical and regulatory procedures and issues, to promote OPC, its members and the industry and to provide you with updates concerning the industry and OPC generally from time to time.

If there are any matters that are not expressly addressed in the Policy, or if an individual, (1) requires clarification as to how to implement or interpret the Policy, or (2) would like to request access to his or her personal information or to amend such information, such concerns should be brought to the attention of the Privacy Officer immediately.

The Privacy Officer can be contacted as follows:

**Orthotics Prosthetics Canada (OPC)**  
**Suite 202, 300 March Road**  
**Ottawa, Ontario K2K 2H2**  
**Phone: (613) 595-1919**  
**Fax: (613) 595-1155**

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## PERSONAL INFORMATION CONSENT FORM

I, the undersigned, hereby give permission for the release of my personal information (name, address, phone, fax and email address) by the staff of Orthotics Prosthetics Canada (OPC),

**\*\*Please INITIAL the appropriate lines (DO NOT USE 'X' OR '✓')\*\***



\_\_\_\_\_ I do approve of the release of personal information to sponsors and other association (s) in order that such third parties may contact me with respect to their products and services.

\_\_\_\_\_ I give permission to publish my personal information (as noted) on the OPC website.

\_\_\_\_\_ None of the above

I hereby release and Orthotics Prosthetics Canada (OPC), its directors and employees from all actions, causes of actions and I further acknowledge and understand that OPC is not responsible for the practices of companies and organizations it does not control or own.

A copy of this consent form shall be kept in my file at the OPC National Office.

**I understand that I am entitled to amend the above within 30 days written notice sent to the OPC National Office**

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

# OPC Residency Program Handbook

## APPENDIX 3 – SCOPE OF PRACTICE

### CERTIFIED PROSTHETIST and/or ORTHOTIST

#### **Duties and Responsibilities**

As the practitioner responsible for all patient care, the Certified Practitioner independently provides or supervises the provision of comprehensive Prosthetic and/or Orthotic care. This includes clinical assessment, patient management, practice management and technical implementation activities and services. In addition, the Certified Prosthetist and/or Orthotist is obligated to support and conform to professional responsibilities which promote and assure the overall welfare of the patient and the integrity of the Profession.

#### **Limitations**

The Certified Practitioner is bound by the OPC Canons of Ethical Conduct. Time-limited Certification is based upon participation in mandatory continuing education. The Certified Practitioner is limited to the discipline for which he/she is certified.

### PROSTHETIC and/or ORTHOTIC Resident

#### **Duties and Responsibilities**

Under the close clinical supervision of an OPC Certified Practitioner in good standing; a Registered Prosthetic and/or Orthotic Resident is competent to perform clinic assessment and patient management tasks. The Resident also independently carries out practice management and technical implementation activities and services. In addition, the registered Prosthetic and/or Orthotic Resident is obligated to support and conform to professional responsibilities which promote and assure the overall welfare of the patient and the integrity of the Profession.

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## Limitations

Performs all duties and provides patient care services under the clinical supervision of an OPC-Certified Prosthetist and/or Orthotist in good standing.

The registered Resident is bound by the OPC Canons of Ethical Conduct. The registered Resident is limited to the discipline for which he/she is registered.

## I -Clinical Assessment

- Obtain a history of the patient by interview and review of available records in order to comply with the physician's prescription for an appropriate orthotic or prosthetic treatment plan
- Evaluate the patient visually by observing gait, coordination, present device if available, and other physical characteristics to supplement the history and physical examination
- Examine the patient manually to determine skin conditions, range of joint motion and muscle strength to verify and expand information
- Determine and assess the specific needs of the patient by integrating the information obtained from history, examination and observation
- Determine from the patient, by verbal interaction, his or her goals and expectations in order to provide an appropriate and realistic device
- Provide information to the patient, family and involved health professionals regarding potential advantages and disadvantages of a device in order to assure understanding of the treatment plan and cooperation of the individuals involved
- Analyze the data obtained by empirical methods in order to prepare a recommendation
- Develop a treatment protocol for the specific patient by review of data obtained in order to determine a specific device recommendation and plan for its use
- Obtain and record accurately appropriate measurements and other data from the patient in order to produce the recommended device

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## II -Patient Management

- Determine the solution to a patient's prosthetic/orthotic problem by appropriate evaluation in order to achieve proper function
- Manipulate the patient's body or body segments to provide correction, position or deformation in order to achieve the appropriate information
- Replicate the patient's body or body segments to provide an accurate anatomical impression to be used in fabrication of an orthotic or prosthetic device
- Measure a patient by utilizing proper instruments and tests in order to compile data to be used in prosthetics and orthotic design and fabrication
- Modify patient model by making necessary rectifications to ensure proper fit
- Demonstrate on a patient a properly-fitting prosthetic/orthotic design by utilizing accepted prosthetic/orthotic techniques to achieve optimum fit, function and cosmesis
- Evaluate a device to identify deviations from prescribed standards to correct impaired fit and function
- Evaluate a patient's gait by visual observation in order to achieve optimum prosthetic or orthotic function, if applicable
- Achieve optimum alignment of a patient's prosthetic/orthotic device by evaluation of the sagittal, transverse or coronal planes in order to provide maximum function
- Inform the patient of the various procedures you are about to perform and/or explain his/her role and responsibilities regarding these procedures by using appropriate communication skills to achieve successful fabrication and use of the prosthesis/orthosis
- Provide continuing patient care in order to assure proper fit and function of the prosthetic/orthotic device by periodic evaluation
- Counsel and educate the patient
- Demonstrate proper documentation of patient history by establishing record-

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keeping techniques in order to verify patient care

- Supervise others (less qualified) engaged in patient management
- Collaborate with others engaged in patient management

## III- Professional Responsibility

- Select the most appropriate course of action when faced with patient-related problems by applying their experience and recognizing their limitations in providing appropriate patient care
- Provide optimum patient care by recognizing the need to pursue continuing education to remain current in practice
- Practice ethical patient care by adhering to the OPC Canons of Ethical Conduct
- Inform individuals involved in patient care by utilizing appropriate communication skills to provide them with current prosthetic and orthotic information
- Communicate clearly information concerning the patient to the appropriate people to achieve ultimate patient care
- Demonstrate proper documentation concerning the patient history and financial records by establishing record-keeping techniques in order to verify patient care and other pertinent records
- Inform the patient of financial obligations and requirements for compliance to third-party agencies by utilizing the appropriate means of communication to assure proper reimbursement
- Establish procedures for patient care that comply with accepted medical/legal requirements by maintaining current education in these areas
- Communicate roles and expectations of facility employees by providing documentation in order to create a professional, cooperative working environment and improve patient care
- Maintain a safe working environment

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## IV - Practice Management

- Communicate clearly information concerning the patient to the appropriate people to achieve ultimate patient care
- Demonstrate proper documentation concerning the patient history and financial records by establishing record-keeping techniques in order to verify patient care and other pertinent records
- Inform the patient of financial obligations and requirements for compliance to third-party agencies by utilizing the appropriate means of communication to assure proper reimbursement
- Establish procedures for patient care that comply with accepted medical/legal requirements by maintaining current education in these areas
- Communicate roles and expectations of facility employees by providing documentation in order to create a professional, cooperative working environment and improve patient care
- Maintain a safe working environment

## V - Technical Implementation

- Interpret data on measurement form by reviewing numerical values to determine appropriate procedures
- Select appropriate materials and components based on patient criteria to ensure optimum strength, durability and function
- Fabricate prescribed devices by assembling selected materials in order to prepare for fitting
- Establish inspection systems to assess systematically appropriateness of technical procedures at various stages in order to reduce product deficiencies
- Establish sound safety protocols for personnel in use of appropriate lab materials and machinery to achieve maximum safety

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- Repair and maintain existing devices in use
- Communicate design criteria to those in technical implementation/fabrication
- Maintain equipment; keep working area clean and safe
- Maintain inventory

## PROSTHETIC and/or ORTHOTIC REGISTERED TECHNICIAN

### Duties and Responsibilities

Under the direction of an OPC Certified Practitioner in good standing; a Registered Prosthetic and/or Orthotic Technician is competent to perform technical assessment and management tasks. The Technician also independently carries out practice management and technical implementation activities and services. In addition, the Registered Prosthetic and/or Orthotic Technician is obligated to support and conform to professional responsibilities which promote and assure the overall welfare of the patient and the integrity of the profession.

### Limitations

Performs all duties under the direction of an OPC Certified Prosthetist and/or Orthotist in good standing.

The Registered Technician is bound by the OPC Canons of Ethical Conduct and is limited to the discipline for which he/she is Registered.

The registered technician is not qualified to perform clinical tasks such as casting, model rectification, or provision of prosthetic/orthotic treatment. Any patient contact will be for the purpose of assisting the Prosthetist and/or Orthotist in the technical aspects of the manufacture of a particular orthotic or prosthetic device.

# **OPC Residency Program Handbook**

## **APPENDIX 4 – CANONS OF ETHICAL CONDUCT**

Orthotics Prosthetics Canada (OPC) gratefully acknowledges the assistance of the American Board for Certification in Orthotics and Prosthetics in generating our Canons of Ethical Conduct and Character and Fitness Rules and Procedures.

### **The Purpose of the Canons of Ethical Conduct (Canons)**

The profession of Prosthetics and Orthotics exists for the fundamental purpose of assisting patients in maintaining functional and productive lives. The public entrusts its confidence to those professional practitioners upon whose competence and sense of fairness and compassion they can rely. For the profession to thrive, the members must discharge their responsibilities in a fashion that will bring honour and integrity to that profession, thereby ensuring public confidence. The greatest effort possible should be made to satisfy each patient's prosthetic and/or orthotic needs. The relationship established and the manner in which the patient is served are essential factors for appropriate professional and ethical conduct.

Recognizing the significant role the Prosthetist and/or Orthotist plays in the physical and emotional welfare of the patient, the canons evolved from the Code of Ethics and from the policies of Orthotics Prosthetics Canada (hereafter known as the Corporation). Its purpose was to convey the philosophy and basic tenet that the welfare of the patient shall come first and to encourage and promote the highest standard of professionalism and ethical conduct.

### **OPC Standards and Ethics Committee**

The Standards and Ethics Committee has the responsibility to maintain the integrity of the Corporation's registered trademarks and the Canons of Ethical Conduct by reviewing complaints that allege violations of the Canons. The Committee shall review these complaints and make all decisions in accordance with the Rules and Procedures.

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The Committee on Standards and Ethics is a standing committee of the Corporation and is responsible for developing and maintaining standards of professional practice, a professional code of ethics, and providing a mechanism to discipline members who breach them. OPC Professional Practice Subcommittee is a Subcommittee of the Standards and Ethics Committee and is an independent body that investigates, adjudicates, and renders decisions including the application of sanctions as may be required.

## **Limited Authority of the Committee**

Of course the Canons cannot address every possible circumstance of unethical conduct. In fact, not all complaints are appropriate for Committee review. It is a practical impossibility for the Committee to police the entire profession. For example, the Committee lacks both the resources and authority to investigate complaints that allege criminal misconduct, insurance fraud, theft, discrimination, copyright trademark and patent infringement, threats, libel and slander. These types of disputes can be addressed by various appropriate federal and provincial government agencies or in civil or criminal courts. It is only after these types of complaints have been disposed of by the appropriate government agencies and/or the courts that the Committee may begin to consider possible ethical violations of the Canons.

The Canons shall identify, in part; those practice areas over which the Committee may exercise authority. The Committee shall be responsible only for reviewing and determining violations of the Canons. Its role is not intended to be expansive but rather to ensure that ethical and professional services are rendered.

## **Interpretation of the Canons**

The Canons should not be interpreted only as a means to identify conduct which is contrary to the philosophy of the profession, but also as a continual means to educate the practitioner on his/her responsibility to maintain and adhere to established ethical

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standards. The Canons should be interpreted consistent with the evolving practical day-to-day realities of servicing clients.

For the purposes of this Canon, “Prosthetist” or “Orthotist” means any Prosthetist and/or Orthotist who provides or assists in the provision of prosthetic or orthotic services to the patient.

## **Character and Fitness Rules and Procedures**

Upon request, the official Rules and Procedures, which include specific instructions and timelines for processing complaints, as well as a form on which to outline the complaint, will be provided.

## **CANONS OF ETHICAL CONDUCT**

### **ARTICLE I. Preamble**

#### **Section 1. Introduction**

The practice of Prosthetics and Orthotics (the “profession”) is a recognized allied health profession. The Prosthetist and/or Orthotist assumes specific responsibilities to the physician or other licensed health care practitioners, the patient, the public, associates and to the profession itself. These responsibilities must be discharged with honour and integrity to assure the maintenance of public confidence in the profession.

The profession exists for the primary purpose of assisting patients to maintain functional lives. The Prosthetist and/or Orthotist shall be responsible for making the greatest possible effort to satisfy the patient’s orthotic or prosthetic requirements. The manner in which the patient is served is the essential factor relating to appropriate ethical professional conduct.

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Members of the profession are responsible for maintaining and promoting ethical practice. This Canons of Ethical Conduct (“canons”), adopted by the Orthotics Prosthetics Canada shall be binding upon all who hold registered trademark credentials awarded by the board of directors of the corporation.

## **Section 2. Ethics, Custom and the Law**

Unethical conduct may involve violations of customs and usages of the profession as well as actions that violate the law. Failure to conform to these canons, including conduct that violates moral principles, customs and practices of the profession or the law, shall be subject to disciplinary action and ultimate determination by the adjudicative authority as established in the rules and procedures regarding ethical, character and fitness complaints (“Rules and Procedures”). Such disciplinary action depends upon the particular circumstances involved and how the conduct in question reflects upon the dignity and integrity of the profession.

Depending upon the circumstances, disciplinary action may range from a warning, reprimand, temporary suspension, de-certification, censorship or referral for criminal prosecution or civil action. Although loss of certification is the maximum penalty that may be imposed by the corporation on a Certified Prosthetist and/or Certified Orthotist who violates these canons, each Prosthetist and/or Orthotist has a civic and professional obligation to report to the appropriate governmental body any and all evidence that may come to his or her attention involving the alleged criminal conduct of any Prosthetist and/or Orthotist relating to the practice of orthotics or prosthetics.

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## **Article II. Practitioner Responsibilities to the Physician**

### **Section 1. Diagnosis and Prescription**

When the Prosthetist and/or Orthotist receives a prescription from a physician or appropriately licensed health care provider before providing any orthosis or prosthesis to a patient, the prescription must state that the patient is ready for orthotic or prosthetic management. It is the sole responsibility of the physician or appropriately licensed health care provider, and not the Prosthetist and/or Orthotist, to determine the medical appropriateness of the patient for orthotic or prosthetic treatment.

### **Section 2. Orthoses and Prostheses Evaluation and Recommendation**

It is the responsibility of the Prosthetist and/or Orthotist to recommend specific orthotic and/or prosthetic design. The Prosthetist and/or Orthotist shall recognize that each individual patient is different and deserves specific and responsive guidance from the Prosthetist and/or Orthotist. After evaluating a patient, the Prosthetist and/or Orthotist shall be guided at all times by concern for the physical, emotional, social and economic welfare of the patient. All decisions by the Prosthetist and/or Orthotist must be made with the understanding and intent that the patient's best interests are the primary concern.

### **Section 3. Changes in Patient's Condition**

When requested by the patient and/or the patient's physician or health care provider, the Prosthetist and/or Orthotist shall monitor and observe the patient's physical condition in connection with the orthotic and prosthetic care and the prescribed device to make certain the patient is responding appropriately. As soon as possible, the Prosthetist and/or Orthotist must notify the physician or referring health care practitioner and the patient of any change in the patient's

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condition related to the orthotic or prosthetic management plan and the patient's medical evaluation.

## **Section 4. Provision of Services**

The Prosthetist and/or Orthotist shall recognize the patient's freedom of choice in selection of the orthotic or prosthetic design and treatment. Professional affiliations, including employment and referral relationships, may not limit access to services and shall not affect the decision-making process of the Prosthetist and/or Orthotist. Prosthetist's and/or Orthotist's professional practices and their adherence to the ethical principles of the corporation shall take preference over business relationships. Provision of services for personal financial gain of the Prosthetist and/or Orthotist, rather than for the need of the individual receiving the services, is unethical.

## **Section 5. Altering Orthoses or Prostheses**

The Prosthetist and/or Orthotist may repair or adjust orthoses or prostheses without notifying the prescribing physician. However, such repairs or adjustments must conform to the original prescription. Any repairs, adjustments, modifications and/or replacements that substantially alter the original prescription must be authorized by the physician or the prescribing health care provider.

## **ARTICLE III. Responsibilities to the Patient**

### **Section 1. Confidential Information**

All information relating to a patient's background, condition, treatment, management plan or any other information relating to the Prosthetist and/or Orthotist -patient relationship is and shall always remain confidential and may not be communicated to any third party not involved in the patient's care without the prior written consent of the patient or patient's legal guardian.

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Patient information that may be derived as a result of any Prosthetist's and/or Orthotist's peer review process shall be held and always remain confidential by all participants unless written permission to release the information is obtained from the patient or patient's legal guardian. All patient information which is derived in a workplace from a working relationship among Prosthetist and/or Orthotist relating to any patient shall be held and always remain confidential by all parties. The confidentiality requirements set forth in this Section 3.1 shall be strictly adhered to by all certifees unless the information is required by court order or when it is necessary to disclose such information to protect the welfare of the patient and/or the community. In such event, all disclosures of confidential information shall be in accordance with applicable legal requirements.

## **Section 2. Competency**

All Prosthetist and/or Orthotist shall provide competent services and shall use all efforts to meet the patient's orthotic and prosthetic requirements. Upon accepting an individual for orthotic or prosthetic services, the Prosthetist and/or Orthotist shall assume the responsibility for evaluating that individual; planning, implementing and supervising the patient's care; re-evaluating and changing the program; and maintaining adequate records of the case, including progress reports.

## **Section 3. Research**

All Prosthetist and/or Orthotist are encouraged to support research activities that contribute to the understanding of improved patient care. In the event that any Prosthetist and/or Orthotist desires to engage in a research project or study, he or she shall first ensure that:

- all patients affiliated with such projects or studies consent in writing to the use of the results of the study;
- the data and information regarding the patient remains confidential,

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- the well-being of the patient shall be the primary concern;
- the research is conducted in accordance with all federal and provincial law;
- there is an absence of fraud;
- all data is fully disclosed;
- there is an appropriate acknowledgement of individuals making contribution to the research; and
- in the event that any acts in the conduct or presentation of research appear to be unethical or illegal, the Prosthetist and/or Orthotist shall immediately report the unethical or illegal conduct to the board of directors and, if appropriate, the applicable law enforcement authority.

## **Section 4. Trust and Honesty**

All Prosthetists and/or Orthotists shall always be truthful and honest to the patient, physician and the public in general.

## **Section 5. Fees and Compensation**

Fees for prosthetic and orthotic services should be reasonable for the services performed, taking into consideration the setting in which the services are provided, the practice costs in the geographic area, the judgment of other related or similar organizations, and other relevant factors. The Prosthetist and/or Orthotist shall never place his or her own financial interest above the welfare of the patient. It is unethical for the Prosthetist and/or Orthotist to engage in false, misleading or deceptive actions in relation to the ultimate cost of the services undertaken or furnished. Continuing to provide orthotics or prosthetics services beyond the point of possible benefit or providing services more frequently than necessary is unethical.

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Submission of false or misleading information in requesting reimbursement from third-party payers, including provincial funding and private insurers, is unethical.

## Section 6. Practice Arrangements

Prosthetists and/or Orthotists shall not:

- directly or indirectly request, receive or participate in dividing, transferring, assigning, or rebating any funds derived from a referral or a patient to any other individual or entity, whether affiliated with the Prosthetist and/or Orthotist or otherwise; or
- except for the fees earned for services performed for the patient, profit by means of a credit or other valuable consideration, such as an unearned commission, discount, or gratuity for providing orthotic and prosthetic services.

The Prosthetist and/or Orthotist shall refer all patients to the most cost-beneficial service provider, taking into consideration the nature and extent of the problem, treatment resources and availability of health care benefit coverage, and the likelihood of receiving appropriate and beneficial care. Participation in the business, partnership, corporation or other entity does not exempt the Prosthetist and/or Orthotist, whether employer, partner or stockholder, either individually or collectively, from the obligation of promoting and maintaining these canons and the ethical principles of the corporation. If the Prosthetist and/or Orthotist is involved in an arrangement with a referring source in which the referring source derives income from the Prosthetist's and/or Orthotist's services, the Prosthetist and/or Orthotist must disclose to the patient that the referring practitioner derives income from the provision of the services. Prosthetists and/or Orthotists shall advise their employer of any employer or employee practice which is in contradiction with these canons and the ethical principles of the corporation.

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## **Section 7. Delay in Services**

It is unethical for the Prosthetist and/or Orthotist to accept any prescription when the Prosthetist and/or Orthotist knows, or has good cause to believe, that the prosthesis or orthosis cannot be furnished within a reasonable period of time. In such instances, the Prosthetist and/or Orthotist must discuss the situation with the patient and prescribing health care practitioner.

## **Section 8. Compliance with Laws and Regulations**

Prosthetists and/or Orthotists shall provide consultation, evaluation, treatment, and preventative care, in accordance with the laws and regulations of the jurisdictions in which they practice.

## **Section 9. Consumer Protection**

All Prosthetists and/or Orthotists shall report to the board of directors any conduct that appears to be unethical, incompetent or illegal. Failure to report any such behaviour which is known to a Prosthetist and/or Orthotist shall be unethical.

## **Section 10. Delegation of Responsibility**

Prosthetists and/or Orthotists shall not delegate any responsibility requiring unique skills, knowledge or judgment to a less-than-qualified person. The primary responsibility for orthotic and prosthetic care performed by supporting personnel rests with the delegating Prosthetist and/or Orthotist. Adequate supervision is required to make certain that the patient receives the necessary and appropriate care.

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## Section 11. Information to Patient

Prosthetists and/or Orthotists are encouraged to educate the public about the profession through the publication of articles as well as participation in seminars, lectures and civic programs. All information provided to the public shall emphasize that each individual situation is unique and requires specific targeted evaluation and process. Prosthetists and/or Orthotists shall not use, nor participate in any use of, any form or communication containing false, fraudulent, misleading, deceptive, unfair or sensational statement or claim. Prosthetists and/or Orthotists shall not provide any consideration to any member of the press, radio or television or other communication medium in exchange for professional publicity in a news item. All advertisements shall be identified as advertisements unless it is absolutely clear from the context that it is a paid advertisement.

## Section 12. Illegal Discrimination

The Prosthetist and/or Orthotist shall not decline to accept a patient on the basis of race, gender, colour, religion or national origin or on any basis that would constitute illegal discrimination.

## Section 13. Sexual Relations with Patient Prohibited

The Prosthetist and/or Orthotist shall not have sexual relations with a current or former patient of the Prosthetist and/or Orthotist unless a consensual sexual relationship:

- existed between the Prosthetist and/or Orthotist and the patient prior to the provision of any orthotic or prosthetic services; or
- the Prosthetist and/or Orthotist has not provided any orthotic or prosthetic services to the patient for the one-year period preceding the beginning of the consensual sexual relationship.

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The Prosthetist and/or Orthotist shall not engage in, request, or demand sexual relations with a patient incident to or as a condition of any orthotic or prosthetic services.

## **ARTICLE IV. Responsibilities to Colleagues and the Profession**

### **Section 1. Dignity and Status**

All Prosthetist and/or Orthotist have the personal responsibility to conduct themselves in a manner that will assure the dignity and status of the profession. Examples of unacceptable behavior include, but are not limited to, the misuse of the certification title; defamation of another; disparaging former employers or other practitioners; disparaging former employees; and misrepresentation of capacity as a provider of services.

### **Section 2. Commercialization**

The primary professional function of the Prosthetist and/or Orthotist is to develop the orthosis and prosthesis as part of a medical treatment team. However, the Prosthetist and/or Orthotist is not prohibited from providing related commercial services, such as furnishing soft durable medical supplies, as long as each patient and the public in general is made aware of the differences between the Prosthetist's and/or Orthotist's professional and commercial services.

### **Section 3. Solicitation**

It is unethical for a Prosthetist and/or Orthotist to either directly or indirectly solicit the patronage of individual patients by way of intimidation, threats, harassing conduct, undue influence, coercion, duress, unwarranted promises of benefits or solicitation of a patient who is apparently in a mental condition that impairs his/her personal judgment to make decisions concerning the products or services being offered.

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## **Section 4. Peer Review**

The profession shall create a system of peer review to include a committee comprised of Certified Prosthetists and/or Orthotists. When established, the character and fitness complaints committee will determine whether the Prosthetist and/or Orthotist is practising in accordance with these canons and providing adequate services. If after following the process protocols as outlined in Article II of the character and fitness rules, the committee determines that there are violations of these canons and/or inadequate services are being provided, the committee shall forward its written decision, together with the procedures for appealing the decision, to the complainant and the involved member.

## **Section 5. Education**

All Prosthetist and/or Orthotist are encouraged to support quality educational programs and forums in academic and clinical settings. Each Prosthetist and/or Orthotist shall regularly attend appropriate seminars and lectures; review relevant periodicals, magazines and literature; and otherwise keep abreast of all major developments in the profession. It is unethical for the Prosthetist and/or Orthotist to participate in any programs, education or otherwise, that falsely or deceptively represent the rights and privileges of the profession.

## **ARTICLE V. Application of Canons to Residents, Interns, and Accredited Facilities**

### **Section 1. Adherence to Canons**

These canons shall apply to all registered Residents, Interns and accredited facilities that are or will be credentialed by the corporation and who provide services that are related and incident to the Prosthetist and/or Orthotist.

### **Section 2. Responsibility of Orthotists and Prosthetists**

The Prosthetist and/or Orthotist as well as the accredited facility supervising and/or employing the Residents, assistants and technicians shall be responsible

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for their compliance with these canons and shall use reasonable efforts to ensure that their Residents, assistants and technicians are in compliance with these canons.

## **ARTICLE VI. Patient Care by Other Professionals**

### **Section 1. Concern About Care by Peers**

The Prosthetist and/or Orthotist should exercise appropriate respect for other health care professionals. Concerns regarding patient care provided by other professionals should be addressed directly to that professional rather than to the patient. In the event that such concerns rise to the level of criminal violation, incompetence, malpractice or a violation of these canons, then the Prosthetist and/or Orthotist must immediately notify the board of directors. The committee will take appropriate action in accordance with these canons and applicable law.

## **ARTICLE VII. Certification**

### **Section 1. Use of Certification**

The Certified Prosthetist and/or Orthotist shall use the fact that they are certified only as evidence of meeting the requisite standard of knowledge and competency in the profession as defined by the board of directors. It is unethical for a non-certified Prosthetist and/or Orthotist to represent, directly or indirectly, that he or she is certified.

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## APPENDIX 5 – OFF-SITE RESIDENCY APPLICATION

### Prosthetic/Orthotic Residency Off-Site Application

Prior Approval by the OPC National Office is required to claim Residency hours for off-site clinical experiences. The Attending Supervising Certifee must be in good standing with OPC.

Steps for Off-Site Residency Procedure:

- 1) The Resident must complete the following application form. Both the Resident and the Resident's Supervising Certifee must sign the form.
- 2) Send application to the OPC National Office for approval.
- 3) Once approved, the Resident may attend the site for the dates indicated. **Note: it is the Residents responsibility to have appropriate workplace and liability insurance for the visit.**
- 4) While at the visiting clinic, have Attending Supervising Certifee sign the approved application form to indicate that the Resident has attended.
- 5) Resident is to keep application as record of hours. Visiting hours will be logged as per usual in Typhon and verified by Resident's Supervising Certifee.

Dates of off-site visit (please list): \_\_\_\_\_

Resident Name: \_\_\_\_\_

Resident Fax #: \_\_\_\_\_

Primary Supervising Certifee: \_\_\_\_\_ OPC REG # \_\_\_\_\_

Attending Supervising Certifee: \_\_\_\_\_ OPCREG # \_\_\_\_\_

Name of Visiting Clinic: \_\_\_\_\_

Visiting Clinic Address: \_\_\_\_\_  
Street

City Province Postal Code

W ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

**Resident Signature** \_\_\_\_\_

**Primary Certifee Signature** \_\_\_\_\_

Please return this to the OPC National Office:

Phone: 613.595.1919

Email: [info@opcanada.ca](mailto:info@opcanada.ca)

Fax: 613.595.1155

I, the Attending Supervising Certifee, confirm that the said Resident has participated in an off-site experience on the dates stated above. I ensure that the Resident is in compliance with the policies and procedures outlined by the OPC.

**Attending Certifee Signature** \_\_\_\_\_

**Office Use:**  
Approved by OPC National Office (circled): YES NO Signed: Date:

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## APPENDIX 6 – RESIDENCY CHANGE FORM

### CHANGES TO PROSTHETIC/ORTHOTIC RESIDENCY

Change requested (please select all that apply):

- PLACE OF EMPLOYMENT (complete section A, B and C)       SUPERVISOR (Complete section A and C)

#### SECTION A

NAME OF RESIDENT: \_\_\_\_\_

E-mail: \_\_\_\_\_

#### SECTION B

NEW PLACE OF EMPLOYMENT: \_\_\_\_\_

Street \_\_\_\_\_

City Province Postal Code

Contact Numbers: (T) \_\_\_\_\_ (F) \_\_\_\_\_

E-mail: \_\_\_\_\_

COMMENCEMENT DATE: \_\_\_\_\_

PREVIOUS PLACE OF EMPLOYMENT: \_\_\_\_\_

Street \_\_\_\_\_

City Province Postal Code

Contact Numbers: (T) \_\_\_\_\_ (F) \_\_\_\_\_

LAST DAY WORKED: \_\_\_\_\_

DISCIPLINE: PROS. \_\_\_\_\_ ORTH. \_\_\_\_\_ / FT \_\_\_\_\_ PT \_\_\_\_\_

EXAM APPLICATION TO BE SENT IN ENGLISH: \_\_\_\_\_ FRENCH: \_\_\_\_\_

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## SECTION C

PRIMARY SUPERVISOR

NAME: \_\_\_\_\_ C.B.C.P.O. REG. # \_\_\_\_\_

EMAIL: \_\_\_\_\_

NAME OF FACILITY \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

SECONDARY SUPERVISOR

NAME: \_\_\_\_\_ C.B.C.P.O. REG. # \_\_\_\_\_

EMAIL: \_\_\_\_\_

NAME OF FACILITY \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

As the supervising Certifee you will be responsible for ensuring that the Resident is prepared for the Certification Examination. The Resident must be working his/her Residency hours in the appropriate discipline, under your direct supervision as stipulated by Orthotics Prosthetics Canada (OPC).

- During scheduled unsupervised hours Resident must not conduct himself/herself in any way contrary to the C.B.C.P.O. Code of Ethics. See the Registry for further details.

REMOVAL OF SUPERVISOR(S)

NAME: \_\_\_\_\_ C.B.C.P.O. REG. # \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ C.B.C.P.O. REG. # \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

# OPC Residency Program Handbook

## I/WE SOLEMNLY DECLARE THAT:

1. To the best of our knowledge, information and belief, the statements contained in the foregoing application to Orthotics Prosthetics Canada (OPC) are true and correct in all respects.
2. We have read the regulations pertaining to certification as stated in the 2009-2010 Registry, and understand that any certification, which may be granted, shall be subject to such regulations.
3. We acknowledge and agree that Orthotics Prosthetics Canada (OPC) may keep the information, including all personal information provided, on file in accordance with its obligations at law pursuant to the *Personal Information Protection and Electronic Documents Act* and in accordance its Privacy Policy. Orthotics Prosthetics Canada (OPC) may use my personal information provided to assess my certification, administer my application and this examination, and other connected or related administrative matters.

**Primary Certiftee Signature** \_\_\_\_\_

**Secondary Certiftee Signature** \_\_\_\_\_

**Resident's Signature** \_\_\_\_\_

*NOTE: Any changes to Supervision Requires a new application to be submitted to the OPC National Office. Any changes to personnel information must be reported to the OPC National Office.*

Please return this to:

OPC National Office  
202-300 March Road  
Ottawa, ON K2K 2E2  
Tel: (613) 595-1919 Fax: (613) 595-1155  
Email: [info@opcanada.ca](mailto:info@opcanada.ca)

# OPC Residency Program Handbook

## APPENDIX 7 – SCHEDULE OF FEES

### Fee Schedule for Residency Program

Effective January 1, 2015

Residency Program Application Fee	\$500	Due at time of application
Annual Residency Fee	\$700	Due January 31
Annual Associate Member Fee	\$150	Due January 31
Typhon Fee – one time admin fee	\$80	Pay directly to Typhon
	Province of Residence	GST/HST Amounts by Province
Add: GST/HST	(BC/AB/SK/MB/QC)	+ 5% GST
	(ON)	+ 13% HST
	(NL/NS/NB/PE)	+ 15% HST

#### **Important Notes**

- The Annual Residency Fee is not due at the time of application to the Residency Program, but will be invoiced at the dues renewal the year following acceptance into the Residency Program.
- Typhon Fee - Upon accessing the Typhon Program, you will be prompted to pay a one-time admin/set-up fee of \$80.00 USD, which must be paid directly to Typhon (by credit card) prior to use of the program.

Regarding dues for OPC Members (Certified or Registered) whom are participating full or part-time in their 2nd discipline Residency or Internship: These Members will pay Residency/Internship fees (\$700/\$150) plus an additional \$400 to maintain their Certification/Registration during the time of their training in a second discipline so that their entire annual amount (\$1100/\$550) will be no more than the annual dues of a Certifee/Registered Technician. These Members continue to be responsible for fulfillment of the Mandatory Continuing Education requirements for their initial certification/registration status to remain in good standing