

ATRIUM

Spring 2005
Canadian Society of Cardiology Technologists, Inc.
Box 3121, Winnipeg, Manitoba, R3C 4E6

PRESIDENT'S REPORT

The Canadian Society of Cardiology Technologist (CSCT) is growing and is stronger than ever. This comes as a result of a very dedicated Board of Directors, outstanding volunteer work from committee members and of course the enthusiastic participation of our members.

It is with great pleasure that the CSCT welcomes our colleagues and friends from the newly amalgamated Ontario society, now named the "Ontario Society of Cardiology Technologists" (OSCT). The amalgamation would have never been a possibility without the outstanding professionalism and integrity demonstrated by the merger committee. This committee was made up of 6 individuals; Karen Rondinelli, Deby Hildrop, Jeanette Gray, Terri Walmsley, Irene Williamson and myself. The goal was to rebuild a united society, maintaining the CSCT high educational standards and therefore delivering high quality technologists to healthcare with the result of providing patient care and safety. The process involved competency comparison between exams, assessment of exam requirements, review of accredited schools and compliance to the CSCT's National Occupational Competency Profile (NOCP), were all major issues the merger committee analysis in detail. OSCT is committed to making this joint venture a seamless integration and will continuously work hard to earn your trust and support.

CSCT initiative to maintain high standard in education for its members and providing patient care and safety is our top priority. This is demonstrated in our commitment to the Canadian Medical Association (CMA) and our sponsorship to the Conjoint Accreditation process, our constant review of the National Occupational Competency Profile (NOCP) document and our ongoing efforts with the HRDC project.

Updating the NOCP is extremely important to our profession, as it defines competencies for all levels of practice and essential skills required. CSCT actively requests input from all of our members and a Thank-you to all who submitted suggestions, especially Karen Sarsfield and Richard Payne. The Examination Committee, (Lynn Zinger, Irene Williamson and Carol Griffin) will review everyone's submissions and update us with the revisions. These revisions will then be submitted to the CMA. Both Karen Sarsfield and Irene Williamson will be attending this year's annual meeting with the CMA.

As the CSCT continues to revise the NOCP, we also continue to drive education and improve methods of competency assessment. Karen Schaus has taken the lead with the HRDC funding project. This funding will support the increased development of the multimedia interactive video, testing competency levels of exam candidates and the French translation of our exams. Both Karen and Irene have put in a lot of hard work in this project and we anticipate the result will be announced within the next three months.

In addition, CSCT is pleased to announce a new public relations committee. Valerie Gilbert, Colleen Greeley and Karen Sarsfield have volunteered to promote our society and our values to health professions and to industry. This is a notably important initiative as it will help create and maintain good relations with the public and increase donations to assist us in carrying out planned programs. Creating awareness is the key to gaining support.

Plans for the 2005 Canadian Cardiovascular Congress are moving ahead quickly. The conference will be held in Montreal and will run from October 22nd to the 26th, 2005. New Brunswick is the hosting province this year, with Valerie Gilbert and Lynn Douglas coordinating the CSCT Annual General Meeting and planning the agenda for the Education Session and any additional CSCT events. CCC 2005 will undoubtedly be a great success!

I look forward to seeing you there!

CSCT is an organization that we can be really proud of. Together we continue to raise the standard of practice, the level of competence and the quality of patient care in Canada. I am honoured to be your President and will do all I can to support our continued growth. As always I appreciate the suggestions and feedback of members on any aspects of the CSCT. Feel free to contact me with your comments.

Respectfully submitted, Arlene Desousa
President, CSCT

Anything You Would Like to See in the Atrium?
Have Any Comments About Content or Layout?
How About Feedback?
Send It All To: secretary@csct.ca

Provincial Directors & Education Coordinators October 2004 - October 2005

<u>Newfoundland</u> Violet Wight Jackie Kennedy	<u>Ontario</u> Marg Mount Colleen Greeley
<u>Nova Scotia/PEI</u> Lynn Sharpe Linda Gregory	<u>Manitoba</u> Judith Castro Wilma Ablang
<u>New Brunswick</u> Lynn Douglas Nancy Vallis	<u>Saskatchewan</u> Michele Tkach Vince Sopczak
<u>British Columbia</u> Ina Adams Gretchen Dunn	<u>Alberta</u> Marie Roblick Wendy Wilson

CSCT Executive October 2004-October 2005

President:	Arlene Desousa
Vice-President:	Karen Sarsfield
Treasurer:	Karen Schaus
Secretary:	France Nickel
Registrar:	Valerie Gilbert
Education Director:	Irene Williamson
Exam Chair:	Lynn Zinger

E-mail Addresses for the CSCT Officers

president@csct.ca
vicepresident@csct.ca
treasurer@csct.ca
secretary@csct.ca
registrar@csct.ca
education@csct.ca



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EDUCATION REPORT Spring 2005

Hello everyone, another year, hard to believe. 2004 was extremely busy and it looks like 2005 will be more of the same. Most of us feel like we have 2 jobs volunteering for our professions on the CSCT Boards. It's a lot of work, but we make new friends and learn how other provinces are dealing with change and try to have some fun in the process. Please contact us at www.csct.ca if you would to pitch in with your ideas and suggestions all it takes is time!

New CSCT National Certification Exam Format

This new exam process adapts the traditional Objective Structured Clinical Evaluation (OSCE) to multimedia interactive video scenarios. Your actions during the video, findings and interpretation are evaluated through multiple choice questions. The multimedia interactive video scenarios are developed using decision making templates for evaluation of clinical competencies. The videos clips take place in virtual hospital or clinic. You are the cardiology technologist in the video and have to proceed as if you are responsible for the patient until other more qualified health care professionals arrives. There may be times when the scenarios, choices or a response does not apply to the protocols in your institutions or clinical site i.e. cardiology technologists only perform ETT's in the presence of a qualified physician and/or cannot administer nitroglycerin or oxygen. Candidates are asked to keep in mind this is a virtual hospital and you are making decisions based on clinical presentations and data, not necessarily on what they would or would not do in their place of employment.

Multimedia interactive video scenarios evaluate clinical skills such as judgment, problem solving, decisiveness, fact finding (documentation – store ECGs/rhythm strips during a procedure, etc.) and communication skills, etc. For more information go to csct.ca and Link to CSCT Exams - Practice Exam.

April/May Exam Results

In April/May, 2004, 13 candidates wrote the new format of CSCT National Certification Examination containing three multimedia interactive videos to assess entry level clinical competencies. Congratulations are due as everyone successfully complete the theory portion and there were 4 failures in the Interactive Multimedia portion of the exam. Three candidates were successful on their 2nd attempt at the Multimedia portion.

June/July Exam Results

38 candidates wrote; 18 were successful in the online Theory; 3 unsuccessful Interactive.

November/December Exam Results

34 candidates wrote; 23 were successful online Theory and 8 unsuccessful Interactive Multimedia. There were 7 rewrites and 5 were successful.

Exam Refunds

It was decided by the CSCT Board that there be NO refund of the CSCT exam fees.

Once an application and fees has been submitted to CSCT the candidates must write or provide proof of extenuating circumstance as outlined in the CSCT Examination Hand Guide found in the Student Area on the website.

Those candidates who fall under the Extenuating Circumstances policy will be required to pay a \$50.00 Administration fee prior to their next sitting.

Rewrites

Candidates do NOT need to apply by normal deadline dates as per CSCT Exam hand Guide. Please allow 4-6 weeks for arrangements to be made i.e. apply by Jan 15th then choose an exam date in the last 2 weeks in February. The CSCT requires this time to coordinate between the Provincial Education Coordinator, CSCT Exam Chair, Invigilator and the Justice Institute. Candidates need only to repeat the portion in which they were unsuccessful. Rewrite fee is \$250.

NEW POLL

The CSCT wants to know what your opinion would be regarding receiving the Newsletter more frequently, though only online, via the website or through e-mail.

To send in your comments, address them to:
studentsurvey@csct.ca

With "Atrium" in the Subject line.

Thanks!

We will take your opinions, go through them, and let you know what's up at the next AGM!

THANK YOU!!

Special Thanks to the Following Sponsors for our Educational Sessions at the 2004 CCC:

GE Medical
GlaxoSmithKline
3M
Novartis
Bristol-Myers Squibb
Roxon
ASRCT
DR. Patrick Ma
Karen Sarsfield

EDUCATION REPORT (cont.)

Candidates will be allowed to rewrite 2 times and if still unsuccessful the Exam Committee will review their results (feedback) and suggest a course(s) that must successfully completed prior to their rewrite.

Specialty Exams/Dates

Revisions to the Ambulatory Monitoring (AECG) Chapter and Specialty Exam are in progress. The goal is to use multimedia interactive evaluation to collect and classification of beats, identify rhythm, label morphologies and summary reports in regards to ECG data available. The CSCT plans to develop 4-6, 15 -20 minute videos which include many tasks similar to Holter monitoring. Candidates will be evaluated by how they document or lack of documentation, identification of artifact, labeling rhythm and final report information. Candidates ability to class edit, choose the necessary strips or saving the initiation (possible cause) and how the arrhythmia ends or identification of artifact that could possibly be called VT etc

The Pacemaker Technology Specialty Examination is in revision and being updated to reflect Implantable Cardiac Defibrillator (ICD) and Cardiac Resynchronization Therapy (CRT) technology and patient follow-up procedures. An Exam Blueprint for question weighting and a list of suggested reading can be from at the CSCT website under Student Area Exam Hand Guide. Additional Practical Skills Checklists including Implantable Cardiac Defibrillator and Cardiac Resynchronization Therapy are also under development. This exam is available in April and November.

CTAO Exam

The EC reviewed the CTAO exams (Registration, ETT, AECG, and Pacemaker) and felt that the exams in entirety have met our National Occupational (Competency) Profile and therefore approved their exams. Please note that legal counsel for both groups suggested that mergers between two groups of similar interest should not be required to complete the new online CSCT National Certification Exam.

Continuing Education Units

2002-2004 - Members who do not have their CEUs for this triennium will be given a one time 6 month extension, in which to get these 30 CEUs. After this time, the member will not be a "Member in Good Standing", and remains that way until the end of the next triennium. After this 6 month period, if they do not have their 30 CEUs, they will be required to have 60 CEUs by December 31st, 2007.

2005-2007 - Members who do not obtain their 30 CEUs will have to successfully complete the National CSCT Certification Examination.

Sooo, in a nutshell - GET YOUR CEUs!!!

CSCT Exam Candidates

If you know anyone who is doing a clinical rotation in cardiology technology in your health-care facility please direct them to our website (csct.ca) or your Provincial Education Coordinator. We need to get information out to our future colleagues.

Everyone have a good healthy year!

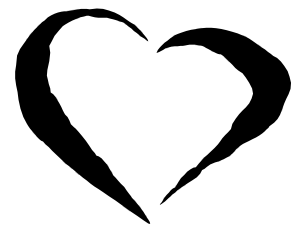
Respectfully submitted: Irene Williamson, CSCT Education Director & Lynn Zinger, CSCT Exam Chair



THANKS!

Thanks to the following Provincial Associations for donating money to help put on the CSCT Educational Sessions:

Alberta
Newfoundland
Saskatchewan
Ontario
Nova Scotia
B.C.



A Note from the Registrar

Great news!!!! All of the members will be receiving new membership cards this spring. These cards will be business card sized and will not be laminated. New ones will follow next year as well. Hope you all keep me posted on your current addresses so all of our news can get to you. Please feel free to contact me via our website with any concerns.

FOR THOSE OF YOU WHO PREFER SNAIL MAIL:

9 RIVERBEND COURT
GRAND BAY-WESTFIELD NB
E5K 3J3

PLEASE INCLUDE ANY COMMENTS OR SUGGESTIONS FOR IMPROVED COMMUNICATION-THAT'S HOW WE MAKE THIS WORK.

THANKS
VALERIE GILBERT, REGISTRAR

NEWS FROM THE PROVINCES

BC

Hello fellow members across Canada. The news from BC. Is that we have slated a May 29, 2005 date for this year's AGM. Due to unforeseen circumstances, the hosting region could not fulfill its function of putting on this year's AGM so without enough lead-time we are unable to organize a full weekend of education seminars and so will just be having our Annual General Meeting on that date. We apologize to our members for any inconvenience this has caused.

On March 6, 2005 there was a special meeting held to vote on matters affecting our status and bargaining rights within our union in the public sector. There was a vote taken at that meeting to support the application to the Labor Relations Board to pursue paramedical professional status for the Cardiology Technologists of British Columbia. This vote resulted in favor of pursuing this action through legal council.

There are a number of students in BC getting ready to write their CSCT Certification exam in April 2005 and we wish them good luck, and to also extend best wishes to all students across Canada sitting this exam. Have a great spring and enjoy the upcoming holiday.

Ina Adams

Alberta

The Alberta Society of Registered Cardiology Technologist's annual A.G.M. and education seminar will be held in Calgary on Saturday May 14th. Location and speakers to be announced in March.

A reminder to all registered members and associate (student) members to inform our registrar of address changes, so you receive notices, newsletters, proxies and other important information from ASRCT as well as CSCT.

A suggestion was made to post the provincial executive list in our workplaces, so our members can have easy access for enquiries or concerns.

The collection of CEU's has been quite successful in Alberta. Cheers to all the efforts of our members and a reminder to review the CSCT policy which was sent to all members in January.

We have four students attempting the CSCT exam in April, 2005. Congratulations to the successful candidates from 2004. Wendy Wilson, Alberta Education Co-ordinator is currently working on the Holter chapter for CSCT and will have a draft ready in March.

The Calgary Health Region is currently looking for casual Cardiology Technologist positions.

Marie Roblick

Saskatchewan

A general membership meeting was held in June at the Saskatoon City hospital very good attendance with great lectures. SCTA had there AGM on November 6. The lectures

on Resynchronization therapy in Biventricular pacing and Cardiac markers were excellent. CEU's have been a bit of a problem but most members are getting them in. The SCTA will be revising a CEU guideline for our members that will be easier to follow.

The SCTA raised approximately \$450 around Christmas time with bake sales and Basket draws.

Cardiology Techs in Saskatchewan are still waiting to see if their wages will be dropped in regards to the reconsideration to the Joint Job evaluation process.

Michele Tkach

Manitoba

The Manitoba Association of Cardiology Technologists (MACT) is pleased to announce that the projected start date for the Cardiology Technologists Certificate Program at the Red River College in Winnipeg, Manitoba will be in 2005/2006. The date of commencement will be based on the availability of qualified instructors.

Our Annual General Meeting and Education Session will be held at the Clinical Research Institute at Asper Centre (next to St. Boniface General Hospital) in Winnipeg, Manitoba.

It is also election time and we are desperately looking for members who are willing to donate time and make a two year commitment. Please seriously consider letting your name stand for nominations. It is essential to have membership participation and support for the board to build a strong association to represent our province during these challenging times.

Members are encouraged to attend the AGM and education sessions to accumulate CEU's in order to maintain their recognition as qualified technologists. The new triennium commenced on Jan. 01/2005 and will end Dec. 31/2007. To maintain your membership with MACT and CSCT, you must actively continue your education.

One BCIT student wrote the CSCT examination in Jan. 2005.

Polly Pachu

Ontario

At the end of 2004, the members of OSCAP and CTAO voted to merge their groups to form OSCT(Ontario Society of Cardiology Technologists).

We are happy to announce this merge as it will only be to our benefit. We have been very busy getting together a new Board of Directors and finalizing the last details of our merge.

Our dues notices went out with information letters and dues are coming in nicely.

We have combined both Websites to form one Site with membership personalized E-mail accounts..Everyone is welcome to visit us at www.osct.ca Our Website will become our main communication source as we move to a more electronic system in Ontario.

On May 7,2005 we will be hosting our first combined AGM in Aurora, Ont just north of Toronto. We are working on an interesting line

up of speakers for our Education Sessions and will have our AGM later on in the afternoon. It looks to be a great day.

Some of our future projects include setting up a By-laws Committee, Working with Ontario Colleges to ensure they move ahead with Program Accreditation, Ensuring members collect CEU's in a timely fashion, and ,as in many other provinces, Legislation.

As you can see, things are moving forward in Ontario. I would like to thank all those who have supported me in this rather, at times, overwhelming job as Provincial Director.

Marg Mount

Newfoundland

On May 28, 2005 CTAN will be holding it's Education Day and AGM at the Health Science Centre in St. John's. We have two speakers who will be presenting : Dr. Sean Connors will present on Signal Average ECG, and Anne Marie Whelan, Cardiology Clinical Educator, will present on ICD's. An election of officers will take place at this time. A preceptor's workshop will also be offered. On the evening of May 27 there will be a social event which will allow all Tech's to get together for a fun time.

Violet Wight

New Brunswick

We are so excited in New Brunswick to inform the rest of Canada that in June 2004 we were successful in becoming the first Province to be legislated. This has been a long and expensive endeavor but worth it in the end. Anyone working in the field of Cardiology Technology in our Province must now hold a membership with the NBSCT. Being a Legislated Body makes our Society self-governing. We are protecting the public by providing Professional Technologists to perform the various duties of our Society.

Our Annual General Meeting is coming up soon. A tentative date of April 30th has been set, with a meeting time and place to be announced with the Notice of Meeting, to be sent out soon with our new membership cards.

Also on a positive note the NBSCT is pleased to be hosting the CSCT portion of the Canadian Cardiovascular Conference in Montreal. We look forward to seeing many of our members there to support and lend a hand to those who are planning this event.

Lynn Douglas

Nova Scotia

Nova Scotia has had a very busy and productive year in the Association. We are working hard on the legislation process and have recently met with the Department of Health and have exchanged valuable information to help with the process. This is a timely process and we will be patient and continue to work together to make this become a reality in the future.

Lynn Sharpe