CONTINUING COMPETENCE PROGRAM FRAMEWORK

Strengthening Occupational Therapy Practice

Approved May 2015
# Table of Contents

New Framework for COTNS Continuing Competence Program (CCP) ................................................................. 1

Purpose of CCP .................................................................................................................................................. 1

Goal of the Program ........................................................................................................................................ 1

Guiding Principles ........................................................................................................................................ 1

Standards of Practice .................................................................................................................................... 1

Authority and Mandate ................................................................................................................................ 2

Continuing Competence Program Components ............................................................................................ 2

  a) Competence Maintenance .......................................................................................................................... 2

  b) Competence Review ................................................................................................................................ 2

  c) Competence Improvement ......................................................................................................................... 2

Appendix A: Continuing Competence Program Structure ............................................................................. 3

Appendix B: Competence Review and Competence Improvement Flowchart ............................................ 4

References/Bibliography ................................................................................................................................ 5
Purpose of CCP:

- The purpose of the CCP is to support, monitor and ensure that occupational therapists in Nova Scotia are competent practitioners.

Goal of the Program:

- To demonstrate to the public that occupational therapists in Nova Scotia practice in a safe, ethical, and effective manner.
- To support occupational therapists in Nova Scotia to maintain competence in skills, attitude, knowledge and judgment required for occupational therapy practice.

Guiding Principles:

The CCP is built on a solid foundation of beliefs and guiding principles as follows:

- Public protection is the priority for CCP.
- All COTNS registrants will participate in the CCP.
- Demonstrating competence is the responsibility of all COTNS registrants.
- The CCP will support registrants in understanding, applying and demonstrating the Essential Competencies of Practice.
- The CCP is designed to be dynamic, flexible and accessible for use by all registrants.
- Confidentiality will be maintained to the extent possible within the legislative mandate (such as the Occupational Therapists Act (OT Act) and other related provincial legislation).
- The CCP is designed to reflect quality, fairness and fiscal responsibility.
- The CCP will reflect the diversity of the profession and be meaningful for registrants at every stage of their professional development.

Standards of Practice:

COTNS sets minimum standards of practice that registered occupational therapists are required to meet. These standards ensure the public is provided with safe and ethical practice by competent therapists.

In Nova Scotia, the standards of practice for occupational therapists are guided by the following documents:

- Code of Ethics
- Essential Competencies of Practice for Occupational Therapists in Canada - 3rd Edition (ACOTRO, 2011)
Authority and Mandate:

The board of COTNS, as the regulatory authority for occupational therapists in Nova Scotia, under the OT Act, is responsible for establishing continuing-competency requirements [Section 6 (3)(b) and a peer-assessment program [s.6 (3)(e); s.64 (2)- (3)].

All COTNS registrants are required to maintain continuing competence requirements as mandated under s.17 A (1) and every registrant whose standards of practice are the subject of an assessment shall co-operate fully with the Peer Assessment Committee and assessors [s. 64 (6)].

Under s. 64 (2)-(3), the Board shall establish a Peer Assessment Committee and authorize the Peer Assessment Committee to develop and administer a Peer Assessment Program.

Continuing Competence Program Components:

The CCP has three components:

a) Competence Maintenance:

This is the supportive component of the Continuing Competency Program. This component describes the basic activities required by all registrants to demonstrate that they are engaging in reflective practice and complying with regulatory requirements.

b) Competence Review:

This is the evaluative component of the Continuing Competency Program. It is designed to assess registrants' skills, knowledge and judgment required for occupational therapy practice and identify the registrants who require to improve their practice.

This component involves two -step review:

i) Assessment of skills, knowledge and judgment of all registrants using written exam

ii) Onsite assessment of registrants by an assessor. Designed for registrants who require further assessment following the written exam or registrants recommended by the College.

c) Competence Improvement:

This component is the improvement component of the Continuing Competence Program. It is designed to improve competencies of registrants identified through Competence Review as having competence level below acceptable standards. The Peer Assessment Committee makes improvement recommendations based on results from Competence Review.
Appendix A: Continuing Competence Program (CCP) Structure

**Continuing Competence Committee**

Oversees the development, implementation and evaluation of CCP and the administration of Peer Assessment Process

**Continuing Competence Program:** There are three components

- **Competence Maintenance**
  - Reflective Component: Provides structure to support reflective practice, professional development and compliance with regulatory requirements.

- **Competence Review**
  - Evaluative Component: Provides structure for assessing/evaluating the Continuing Competency requirements and competence of all registrants.

- **Competence Improvement**
  - Improvement Component: Provides structure to support improvement of competencies that are below acceptable standard.

### Key Elements

#### 1. Currency Hours
- **Participants (Who):**
  - All registrants - Mandatory
- **Tools (What):**
  - Annual Continuing Competence Declaration - Mandatory
- **Frequency (When):**
  - Annually at the time of registration/renewal

#### 2. Assessment of Essential Competence and Professional Development Plan
- **Participants (Who):**
  - All Registrants
- **Tools (What):**
  - Self-assessment - Optional
  - Colleague/Peer Feedback - Optional
  - Professional Development Plan - Mandatory
- **Frequency (When):**
  - Every two Years

#### 3. Practice Education Modules (PEM)
- **Participants (Who):**
  - All Registrants - Mandatory
- **Tools (What):**
  - Online Self-learning Practice Education Modules
  - Self-Learning Module Quiz
  - Certificate of completion
- **Frequency (When):**
  - Each registrant MUST complete at least one PEM every year

#### Key Elements

1. **Written Competence Exam**
- **Participants (Who):**
  - All Registrants - Mandatory
- **Tools (What):**
  - Online written exam (Standard of Practice and Code of Ethics)
  - Notification Letter to registrants on outcome of the Competence Exam
- **Frequency (When):**
  - Every 5 years - All registrants will write the exam every 5 years

2. **On-site Assessment**
- **Participants (Who):**
  - Registrants who fall below established Competence Exam threshold
  - Randomly selected registrants
  - Registrants recommended by College
- **Tools (What):**
  - Onsite Peer Assessment by Peer Assessor
    - Behaviour-based Interview
    - Review of Occupational Therapy Record
    - Review of Professional Development Plan
    - Review of PEM Completed
  - Mobile Assessment Tool (MAT)
  - Peer Assessment Report template
- **Frequency (When):**
  - Yearly
  - Number assessed is based on # of registrants requiring onsite Peer Assessment

3. **Recommendations for Improvement**
- **Participants (Who):**
  - Registrants identified from Competence Review
- **Tools (What):**
  - Peer Assessment Report from Peer Assessor
  - Recommendations to registrant from Peer Assessment Committee (PAC)
- **Frequency (When):**
  - As needed - based on Peer Assessment recommendations

4. **Individualized Improvement Plan Developed**
- **Participants (Who):**
  - Registrants whose Peer Assessment recommends areas for improvement
- **Tools (What):**
  - An Individualized Improvement Plan
  - Letter of recommendations from PAC
- **Frequency (When):**
  - As required

5. **Individualized Improvement Plan Completed**
- **Participants (Who):**
  - Registrants who have Individualized Improvement Plan
- **Tools (What):**
  - Evidence of improvement
  - Is re-assessment required
  - Evidence review by PAC. Letter to registrant
- **Frequency (When):**
  - As required
Appendix B: Competence Review and Competence Improvement Flowchart

Peer Assessment Committee (PAC) Oversees Competence Review and Competence Improvement

Function of the Peer Assessment Committee (PAC)
- In consultation with the College coordinate the implementation of the Written Competence Exam
- Reviews the results of the Written Competence Exams
- Communicates to each registrant/registrant the outcome of the his/her Written Competence Exam
- Using established threshold, PAC identifies individuals who require On Site Assessment
- Recruits and coordinates training for Peer Assessors
- Assigns Peer Assessors to conduct On Site Assessment
- Communicates with registrants the outcome of the On Site Assessment including recommendations for improvement

Step 1: Written Competence Exam
All registered Occupational Therapists participate in the Written Competence Exam

- PAC Reviews the results of the Written Competence Exams
- PAC communicates to each registrant the outcome of his/her Written Competence Exam
- Using established threshold, PAC identifies individuals who require On Site Assessment

Step 2: On-Site Peer Assessment
Registrants who fall below established threshold (Competence Exam)
Randomly selected registrants
Registrants are recommended by College to participate in On-site Peer Assessment

- PAC assigns Peer Assessor to Conduct On-Site Peer Assessment
- Assigned peer assessor contacts registrant to set up time for on site assessment
- Registrant participates in review providing access to all required documents
- Assessor completes peer assessment report and forward to PAC
- PAC reviews report and forward the report to the registrant for his/her response
- Registrant sends his/her response to the report to PAC
- PAC reviews registrant’s response and determine action/recommendations

PAC makes recommendations for Improvement
- Take No Action: Acceptable Standards of Practice
- Specific Recommendations: Some aspect of standard of practice falls below acceptable level
- Improvement Recommendations: Requires remedial training or education to improve competency

Step 3: Competence Improvement
- Registrant reviews recommendations for improvement and develop Individualized Improvement Plan
- Registrant follows through and complete actions identified in Individualized Improvement Plan
- Registrant provides PAC with Evidence of Improvement
- PAC reviews evidence and communicate to registrant the outcome

Competence Review Completed.
Registrant’s practice is within acceptable Standard of Practice. Registrant continues to engage in ongoing continuing competency activities.

Is On-Site Assessment Required?

Is standard of Practice below acceptable level?

Is re-assessment or additional recommendations?
References/Bibliography


