Continuing Competence Program (CCP):

Answers to Frequently Asked Questions (FAQs)

The questions and answers contained in this document are compiled from questions commonly fielded by ACOT staff along with questions and comments raised in the survey responses and focus groups conducted as part of ACOT's Continuing Competency Program (CCP) Review that occurred April-July 2019. A summary of the findings and recommendations stemming from the *CCP Review 2019* can be accessed from double-clicking on the paperclip icon below.

CCP Review 2019 Report - Abridged Version

NOTE: Within this document, questions or comments along a similar vein have been grouped with a common response provided. If have a question that is not in this list, please email your question to info@acot.ca and one of the ACOT staff will get back to you as soon as possible.

Question Categories:

A. Regulatory Requirements

B. Completing the CCP Components

C. Making the CCP Fit With Your Practice

D. CCP Audits and Practice Visits

Answers:

A. Regulatory Requirements

➢ Is the self-assessment optional?
➢ Why do we have to complete a Practice Challenge Log?
➢ Is it necessary to have a Competence Portfolio if I have just written everything down in my Action Plan?
➢ Why do I have to write everything down? Don't you trust my professional commitment to continuous learning?

Having a Continuing Competence Program (CCP) is a requirement within the *Health Professions Act* (the HPA) and the *Occupational Therapists Professional Regulation* (the *Regulation*).

A CCP is one of the ways regulatory Colleges in Alberta ensure that the public receives safe and competent services from their registrants. Section 13(1) of the *Regulation* specifies the required components of a CCP for occupational therapists (OTs) including the annual completion of:

a) a practice challenge log;
b) a self-assessment questionnaire;
c) a competence maintenance log; and,
d) a continuing competence portfolio.

ACOT is responsible for determining how each of the required CCP components are operationalized and how registrants' continuing competence is monitored. Completion of all four components is mandatory and required for permit renewal. Registrants with incomplete or falsely completed CCP submissions are considered to be non-compliant with the HPA and *Regulation* and can be investigated for unprofessional conduct.

The four required components and how ACOT has chosen to operationalize these (in both the former and updated CCP) are described in the table below:

CCP requirement as per Section 13	Former CCP component	Updated CCP component	Intent
1. Self-assessment questionnaire	Self-Assessment Tool reflecting on and selecting *practice challenges* from the nine	Self-Assessment Tool reflecting on and selecting *areas of focus*	The exercise of self-assessment provides registrants the opportunity to reflect on how their practice adheres to the foundational elements/indicators of ACOT's Standards of Practice and, with the updated CCP, the Code of Ethics. It is within this component that

		Standards of Practice	from the ten[1] Standards of Practice and the three values and principles of the Code of Ethics	registrants identify which of the indicators they would like to focus on for practice growth and continuous improvement.
2.	Practice challenge Log	Practice Challenge Log	Action Plan	The first section of the Action Plan is where the selected areas of focus are listed and registrants: i) reflect on why they have selected certain indicators to focus on in the upcoming year; and, ii) specify a learning goal(s) to address the selected area(s) of focus for growth;
3.	Competence maintenance log	Action Plan	Action Plan	The second section of the Action Plan continues to be the place where registrants: iii) report on and record progress on the learning activities undertaken to achieve the learning goal; and, iv) reflect on how those activities have impacted practice.
4.	Competence portfolio	Portfolio (paper or electronic documents retained separately by registrant)	Online Portfolio	A collection of documents gathered and uploaded to the online platform as evidence of learning activities undertaken and/ or samples of the OT's work that illustrate the quality of their practice such as redacted clinical case/chart notes, program development reports, briefing notes, etc. The newly added Learning Records section is where registrants can upload documents if appropriate or relevant. The details included in the Learning Record itself can also act as a competence portfolio record.

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[1] A tenth standard of "Maintain Appropriate Boundaries" was added to clearly define who is considered a "patient" for the purposes of the newly added sexual abuse and sexual misconduct provisions in the *Health Professions Act* which went into effect on April 1, 2019.

> I feel like I am declaring incompetence or non-compliance with the standards if I indicate that I have a "practice challenge."

We heard this repeatedly from the registrants who participated in the *CCP Review 2019*. As a result, going forward you will be asked to reflect on either of the Standards and/or the Code of Ethics and select and confirm one to three indicators that will be an "area of focus" (no longer labelled a "practice challenge") for learning in the upcoming registration year. The indicator(s) selected will auto-populate in the Action Plan. There is no longer the option to select an area of focus to address "this year" or in the "future"; you will only be selecting an area(s) to focus on for the upcoming registration year.

> The current self-assessment doesn't lend itself well to "continuous learning".
> The Standards of Practice are too limiting for me to find a practice challenge to select because they are: too clinical; not clinical enough; too theoretical; not applicable to my academic/research/non-traditional role; not applicable when I have practiced in the same area for over 10, 20, 30 years; etc.
> Can an "Other" option be added to the self-assessment tool so I can specify a goal that is relevant to my practice?

To address these issues, the updated CCP will include the Code of Ethics indicators in the Self-Assessment Tool to offer additional options for registrants to choose from. This addition, along with the wording change from "practice challenge" to "area of focus" should make the addition of an "other" section unnecessary. As well, examples of how to apply the Standards and Code of Ethics to the diverse areas of OT practice (e.g. clinical, non-clinical, academic, research, etc.) can be found in the **CCP Step-by-Step Guide** which can be found in the *Continuing Competency Program Resources* section of the "[News and Resources](#)" page of the ACOT website.

> Why do I have to keep portfolio records for five years?

Keeping portfolio documents for five years was a required practice when ACOT was auditing CCP submissions prior to shifting to the online version of the CCP in 2014. At that time, ACOT had aimed to audit 20% of registrants each year (thus presuming a registrant could be audited once every five years).

With the upgrades to the online platform allowing electronic upload of portfolio documents, registrants no longer have to worry about retaining paper or electronic portfolio documents (unless they wish to) as they will be retained within the platform as of the 2020-21 renewal year (and optionally for 2019-20).

> How is the competence portfolio being used? If there were a practice concern could it be used as evidence?

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The competence portfolio is a requirement of the *Regulation* and is used by registrants to demonstrate compliance with this requirement. To date, competence portfolio documents have not been used as evidence in the investigation of a complaint but they could going forward.

➢ What is enough/relevant to include in a portfolio and what is too much to include?

The updated version of the platform now allows for uploading of electronic documents that relate to the goal(s) identified in your Action Plan or are illustrative of the quality of your practice. As there are space limitations within the platform, registrants are encouraged to include only the most relevant documents (in either image or pdf form) relating to the learning activities identified to achieve the specified goal and/or one to three sample documents illustrating the quality of their practice. Documents that can/should be uploaded include: summaries of articles reviewed, written feedback on performance (from employer, clients/families, peers), certificates of courses/workshops attended, redacted clinical case/chart notes, program development reports, briefing notes, etc.).

➢ What we are expected to do seems to be more complicated than what other professional colleges expect. Are other colleges are asking for this type of proof?

The HPA requires all professions listed in it to have some form of Continuing Competence Program; Section 3(1)(c) states:

> *"A college must establish, maintain and enforce standards for registration and of continuing competence and standards of practice of the regulated profession."*

The regulations for each profession outline to varying degrees what is required for registered members to demonstrate continuing competence (e.g. some regulations are very prescriptive, others less so and some not at all). Each college also operationalizes the intent of regulatory requirements differently. In addition to the CCP tools/methods used by ACOT, other colleges employ tools such as: peer review of practice; client satisfaction surveys; electronic portfolios; formal tracking and reporting of continuing education credits (both registrant-selected and college mandated education activities, with some colleges tracking credits in various categories) or jurisprudence exams.

➢ What are the rules around including professional development or volunteer work towards currency hours?

As per the *Regulation*, to maintain your Practice Permit you must engage in the practice of occupational therapy for not fewer than 400 hours within the past year; 800 hours in the past 2 years; 1200 hours in the past 3 years; or 1550 hours in the past 5 years.

The practice of Occupational Therapy is defined in Schedule 15 Section 3 of the HPA:

… collaboration with their clients, develop and implement programs to meet everyday needs in self care, leisure and productivity,
… assess, analyze, modify and adapt the activities in which their clients engage to optimize health and functional independence,
…interact with individuals and groups as clinicians, consultants, researchers, educators and administrators, and
…provide restricted activities authorized by the regulations.

Hours engaged in the above activities are practice hours and can be counted towards those hours required to renew your practice permit. If the professional development activity does not fall within this definition it cannot be counted.

Practice hours can include volunteer hours if you are using the title of Occupational Therapist in that volunteer role and are complying with the Standards of Practice and Code of Ethics (e.g. documenting client consent, assessment results, treatment plan, ensuring the secure retention of client records, etc.). Volunteering while not using the title of OT does not qualify as practice hours and these hours cannot be counted toward your practice permit.

B. Completing the CCP Components

➢ Why does the platform time-out after 20 minutes? Will there be an autosave option in the updated version?

The time out feature is required so that the platform can still adhere to the security standards for the protection of your personal information. The security standards followed by the platform developer also discourage the use of auto-save features on sites that house your personal information.

Improvements to the platform that will help to mitigate the risk of losing content that has been entered include:
- the time-out has been extended to 30 minutes.
- the Self-Assessment Tool now automatically saves after you select any indicator as a potential area of focus and you will be cued to submit the confirmed areas of focus before leaving the Self-Assessment Tool.
- The reflection on why you have selected an indicator(s) as an area(s) of focus will now be completed in the Action Plan (no longer within the Self-Assessment Tool). This will eliminate the need to leave the Action Plan page to view what you had written in the Self-Assessment Tool.
- IMPORTANT: You will still need to remember to *click the "Save for Later" button* when completing your Action Plan and be careful not to leave the Action Plan page to view any other pages within the platform (you can still open another tab in your web browser

though). Anything you have worked on in the Action Plan will be lost unless you have pressed the "Save for Later" button before leaving the page.

- o You can open a new tab in your browser just don't click on another tab or page in the CCP unless you have clicked the "Save for Later" button.
- o Your work will still be saved even after the 30-minute timeout as long as the "Save for Later" button has been clicked; you will be cued to log-in again though.

➢ Is there a web browser that works better for completing the CCP?

The platform developers recommend using either Chrome or Firefox although you can still use the most up-to-date versions of Microsoft Edge or Safari.

➢ When am I supposed to complete each CCP component?

ACOT's CCP is designed to occur in the following order:

CCP Component	When to complete
Self-Assessment Tool	At start of registration year
Action Plan – Reflection on selected area(s) of focus	At start of registration year (or throughout the year if area(s) of focus change e.g. due to change of role or employer; or once newly registered on either the General or Provisional Register)
Action Plan – Setting Learning Goal(s) and selecting Learning Activity(ies)	At start of registration year (or throughout the year if area(s) of focus change e.g. due to change of role or employer)
Action Plan – Progress Updates/Learning Records	Throughout the registration year
Action Plan – Reflection on goal achievement	On completion of goal or at the end of the registration year at the time of renewal for the next registration year
Online Competence Portfolio	Throughout and/or at the end of the registration year at the time of renewal for the next registration year

A review of CCP submissions and records of registrant log-ins to the online portal reveals that most registrants are doing all of the CCP components at the end of a registration year when preparing to renew registration for the upcoming year rather than in the order listed in the table above.

The updated platform will now require registrants to complete their CCP submission for the past year and immediately initiate their CCP for the upcoming year (the Self-Assessment and the first part of the Action Plan).

➢ Is it required to reflect on every Standard? How much detail should be included in a reflection?

Registrants are required to review the Standards of Practice and Code of Ethics at least annually as part of the self-assessment component of the CCP. Going forward, a written reflection is only required for the one to three Standard(s)/Code of Ethics where an indicator(s) has been selected as an area of focus for the upcoming year. In the updated version of the CCP, those reflections will be recorded within the Action Plan.

> ➢ How do I know if I am completing the CCP components properly? What is expected for me to include? Can examples be provided? Can a guide (in print and video form) be created that outlines how and when to complete the various CCP components?

ACOT has created several resources to guide you in completing the CCP components. This includes a CCP Step-by-Step Guide and a CCP rubric which offer guidance on when and what to complete and how much detail to include. Video tutorials on how to navigate the CCP and Registration Renewal process and a "Making the CCP work for you" document are also under development. Resources are available in the *Continuing Competency Program Resources* section of the "News and Resources" page of the ACOT website.

> ➢ What does ACOT expect in terms of: numbers of challenges/how many goals set/how many learning activities selected? How much detail should I include in my Learning Activity description?

It is recommended that you choose one to three areas of focus for which to develop a learning goal. In the updated version of the CCP, the learning activity description is now optional. It is still recommended that you identify no more than three learning activities for each learning goal as, effective the 2020-21 registration year*, you will be expected to complete a "Learning Record" (which includes a reflection statement on how that particular activity has impacted your practice) for each learning activity selected. The CCP Step-by-Step Guide has been updated to include instructions on how to complete Learning Records.

Note: For the 2019-20 year, the use of the Learning Records is optional and the "Progress Update" section is still available for you to document, in narrative form, the details of the learning activities undertaken to achieve your learning goal(s). The "Progress Update" section will no longer be available in the 2020-21 registration year and will be replaced with the completion of Learning Records.

> ➢ When am I supposed to complete my goal reflection?
> ➢ What/how much detail should be included in a goal reflection? Can there be prompting questions for this reflection?

A goal, or year-end, reflection is to be completed once the learning activities you have identified to achieve that continuous learning goal have been completed or at the end of the registration year when you are completing your registration renewal. Your reflection is intended to be a

enhancement to the current CCP process. However, written feedback emphasized the burden of effort and cost this might impose particularly for OTs on maternity leave or those working in part-time, sole-charge, or private practice roles/settings. It was also noted that this requirement could be burdensome for most OTs given that very few employers fund the cost of formal courses or offer paid education days. Other survey respondents voiced a concern that formal professional development, although valuable, doesn't replace the value of on-the-job training and other mentorship models, or even self-directed study. As well, there is not enough evidence in the literature currently to support the use of continuing education credits as an indicator of competence.

However, due to the overwhelming number of survey respondents indicating a preference for some sort of continuing competence credit system, the updated version of the CCP will include a place for registrants to track the number of hours spent in each of the learning activities undertaken to achieve their continuous learning goal(s) in their "Learning Records". ACOT is proposing that an evaluation of this new functionality be conducted 2-3 years after implementation to see if there is a minimum number of hours that all registrants attain. This minimum could act as a benchmark going forward however, nothing will proceed without consultation with registrants and approval of ACOT Council.

➢ What am I expected to complete when I am on parental (maternity/paternity) leave or any other unpaid leave?

This depends on whether you decide to cancel your registration or choose not to renew by the Feb 28/29 deadline while on maternity leave. If you are cancelling your registration, we suggest that prior to the start of your leave you document activities completed towards your goal(s) and reflect on how what you have done to date has impacted your practice; this will ensure you are compliant with the HPA/*Regulation* for when you resume registration and return to work. Otherwise, when you reapply for registration, you will be required to complete your last CCP and initiate a new CCP as soon as you register.

What has been described above also applies to other leaves of absence where you do not plan to use the occupational therapy title or practice as an OT.

Please also note that f the start of your leave of absence coincides with registration renewal and you were planning on letting your registration lapse, you are required to login in to the online platform and formally cancel your registration. This ensures that the you have an up-to-date report of practice hours and a complete and finalized CCP submission. It will also stop the automatic notification of cancelled registration going to your last known employer.

More information on maternity/paternity leaves can be found here.

➢ What am I expected to complete when I am on <u>paid</u> medical leave or any other paid leave?

When you are on a leave from work and are receiving pay or benefits from your employer based on being an OT, you are considered to still be using the title of OT even though you may not be practicing OT. As such, we recommend that you maintain your registration and update your CCP as/when you are able so that you can ensure you are compliant with the HPA/*Regulation*.

C. Making the CCP Fit With Your Practice

➢ What does "competence" really mean? Can an OT's competence actually be determined from their CCP submission?

Competence is defined in Section 1 of the HPA as "the combined knowledge, skills attitudes and judgement required to provide professional services." Completion of all the CCP components does not directly reflect an OT's knowledge, skills, attitudes and judgement, however, the reflective practice and demonstration of continuous learning that CCP completion requires is considered a proxy for tracking OT competence.

Although every OT is ultimately responsible for their own professional practice and ethical behavior, the annual completion of the required CCP components by each registrant is ACOT's way of indirectly monitoring the competence of OTs as part of a regulatory body's mandate to serve the public.

Demonstrating that the methods/tools used by regulators to monitor the competence of self-regulating professionals are actually an accurate reflection of competence is a challenge facing all colleges and regulatory bodies internationally. ACOT is committed to ensuring that our CCP is the most accurate proxy of registrant competence as possible.

➢ It feels like I am choosing the same challenges/areas of focus to work on every year – is that OK?

Absolutely, as long as you are setting specific goals and selecting learning activities for those same challenges/areas of focus that demonstrate a commitment to continuous learning that is impacting and evolving your practice each year.

➢ I don't feel like I am gaining anything from this process; sometimes I make up a lot of what I submit.

As mentioned above, completion of the CCP components by all registrants is ACOT's way to adhere to its mandate to serve the public. You are encouraged to undertake the activities of self-

reflection and goal-setting mindfully and seriously as adhering to the legislative and regulatory requirements are what allow ACOT, and other colleges under the HPA, the continued privilege of self-regulation. Including accurate information in your CCP is a requirement outlined in the HPA in Section 51.1 (1):

> *"If the competence committee, registration committee or registrar is of the opinion that a regulated member has intentionally provided false or misleading information about their continuing competence program, they must refer that information to the College's complaints director"*

➢ Can CCP completion align with self-assessment/ performance agreements required for my employer?

It is understood that employer performance management program schedules seldom align with the completion of the CCP components. You can refer to the CCP Step-by-Step Guide (accessed from the **Continuing Competency Program Resources** section of the "News and Resources" page of the ACOT website) for pointers on how to streamline your efforts while adhering to the completion deadlines of both the CCP and employer performance management program requirements.

➢ Can I use my CCP in place of my employer performance agreement?

This will depend on your employer's performance management program. Larger employers (like Alberta Health Services or Covenant Health) have set forms/processes to be used/followed by all managers and employees along with expectations for frequency of performance reviews. If your employer does not have a set performance management program, you can inquire about whether you can use the CCP components in lieu of an employer mandated program. The new version of the online platform allows registrants to print out reports for each of the Self-Assessment Tool and Action Plan; these reports have better formatting than what was possible in the old version of the platform so may be more appealing and acceptable to employers.

➢ Can I use my employer performance agreement in place of the CCP?

No, but we encourage registrants to align their performance agreement goal(s)/activity(ies) with their CCP learning goal(s)/learning activities whenever possible to support completing both. You may also choose to upload documents prepared for your employer's performance management program to the online Competence Portfolio if those documents are relevant to your CCP learning goals and have additional detail beyond what has already been documented in online platform.

D. CCP Audits and Practice Visits

➢ I haven't been asked to have my CCP audited since I graduated 4 years ago – is ACOT still auditing individual CCP submissions?

Auditing of CCP submissions is a requirement in the *Regulation* which specifies in Section 14 (1):

> *"The Registrar or Competence Committee must periodically select regulated members in accordance with criteria established by the Council for a review and evaluation of all or part of a regulated member's continuing competence program."*

When ACOT transitioned from the paper-based CCP to the online version, audits of the CCP shifted to occurring at the "program-level" (a de-identified sample of CCP submissions reviewed for completeness) rather than the individual-level (CCP submissions of individual registrants selected on a regular basis and are reviewed for completeness; registrant involved in review process and feedback offered).

The most recent program-level audit of ACOT's CCP was conducted in 2018 (See Appendix A of the *CCP Review 2019* Report (embedded on page two of this document for the audit findings and recommendations).

ACOT's Council is deliberating whether audits will resume at the program-level, the individual-level or both and will advise registrants about any decisions made regarding auditing before resuming them with individuals. Regardless, a program-level audit of the updated CCP will occur as a means of evaluating whether the updated CCP has achieved the desired outcomes of improved clarity, usability and fit (the *CCP Review 2019* Report has more details on how ACOT plans to evaluate the updated CCP)

➢ What would an audit of my CCP submission look like?
➢ How is a quality submission determined?
➢ If resuming individual-level audits, ACOT needs to be clear on why/how each OT is selected and use an objective way of rating submissions.

Respondents to the 2019 CCP survey reported frustration with how individual-level audits were undertaken in the past (e.g. feedback not provided - only a letter indicating that their CCP was compliant, no feedback or letter received, unhelpful editorial feedback only). ACOT also fielded concerns about the frequency and intervals between individual audits where certain registrants had their CCP submissions audited more frequently than every five years and others were not audited at all.

A Standing Competence Committee, comprised of volunteer OTs from across the province and areas of practice, has been appointed and will make recommendations to Council for evaluation

of the updated CCP. They will also and to develop policies and procedures for an audit process including what might trigger a practice visit.

As well, ACOT Council has approved a draft rubric that will serve as a guide for registrants as they complete their CCP components each year and for the Registrar/Competence Committee to use when auditing CCP submissions (whether at the program or individual-level or both).

If Council decides to reintroduce individual-level audits, it will be done so only with ample notice and with a plan to ensure that registrants are audited at a reasonable frequency and that constructive feedback is offered.

➢ The recent CCP Review survey mentioned "practice visits" - what are practice visits?

CCP audits and practice visits are two tools described in the *Regulation* that ACOT can use for monitoring registrant competence.

Section 14(2) of the *Regulation* indicates:
> *"If a regulated member does not comply with the continuing competence requirements set out in Section 13, the Register or Competence Committee may require the regulated member to submit to a practice visit."*

ACOT has not undertaken practice visits since the initiation of the online platform.

➢ Is ACOT oversight of practice required? Is it not the employer's role to oversee and address a clinician's performance or practice issues?

This is correct – it is not ACOT's mandate to monitor an OT's performance but rather whether they are providing ethical and competent OT services to their clients.

To clarify the purpose and intent of practice visits for registrants, ACOT Council has approved the following: "A practice visit will be conducted on an 'as needed' or 'as requested' basis with the intent to determine whether the OT's practice adheres to ACOT's Standards of Practice and Code of Ethics."

The Standing Competence Committee will bring forward recommendations to Council regarding audits and practice visits. They will also be developing policies and processes for conducting CCP audits and undertaking practice visits. It is anticipated that registrants will be engaged to offer input similar to when they were engaged to offer input on how to improve the CCP.