

## Frequently Asked Questions About: *CCP Review & Evaluation*

Prepared April 2021

### *Background*

The questions and answers contained in this document are compiled from questions and comments raised in the survey responses and focus groups conducted as part of ACOT's Continuing Competency Program (CCP) Review and questions fielded by ACOT staff since it was announced that review and evaluation (formerly known as audits) of CCP submissions would be resuming in 2021.

For answers to questions about the CCP in general, refer to the CCP FAQs document accessed from the [CCP Resources](#) page of the ACOT website along with other written and video resources developed to support OTs in completing their CCP Learning Plans.

If you have a question that is not in this document, please email your question to [info@acot.ca](mailto:info@acot.ca) and one of the ACOT staff will get back to you as soon as possible.

### *Questions and Answers:*

#### CCP Review & Evaluation (Audit) and Practice Visits

- Is anyone looking at my CCP submission? If so, what are they looking for and what criteria will be used to determine the quality/acceptability of my submission?

The review and evaluation of CCP submissions (formerly known as audits) is a requirement in the OTPR 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."*

The review and evaluation of CCP submissions is anticipated to resume in July 2021. A **Rubric** has been created which outlines the criteria Reviewers would be using to rate whether a CCP submission is acceptable or unacceptable. As well, the Policies and Procedures for the CCP Review and Evaluation process are posted on the [CCP Review and Evaluation](#) page of the ACOT website.

- What does "competence" really mean? Can an OT's competence actually be determined from his/her/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 recording and reflection on the continuous learning activities that CCP completion requires is considered an indirect indicator of competence.

Regulators around the world acknowledge that more evidence is required to support or disprove that the various methods and tools used in health professional continuing competence programs. ACOT is committed to ensuring that our CCP acts as an accurate and reliable indicator of competence and will be seeking opportunities to initiate and/or participate in research activities that explore the effectiveness of our CCP as a reliable indicator of competence.

- 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. Performance assessment/performance management is the responsibility of an employer or the individual (if self-employed). ACOT’s public protection mandate is achieved through the regulation of ethical and competent OTs. Acceptable completion of ACOT’s CCP is the way each OT can demonstrate his/her/their commitment to continuous learning (as an indirect indicator of competent and ethical practice).

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 HPA and OTPR refer to “practice visits” – what are practice visits?

Practice visits\* are a tool described in the current iteration of the HPA that regulatory bodies can use if a registrant is not complying with the CCP requirements. Section 14(2) of the OTPR 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.”*

\*Note, the term “practice visit” will be replaced by “assessments of regulated members’ competence” once the amendments proposed in the *Health Statutes Amendment Act* are proclaimed.

ACOT envisions that practice visits would be undertaken if a registrant does not incorporate Reviewer feedback into his/her/their CCP within the required timeframe (in the following year’s submission for minor errors/omissions; within 30 days for significant errors/omissions as per the Rubric criteria). The Competence Committee is in the process of developing policies and procedures for practice visits/competence assessments.

If you have any questions about how to complete the CCP, navigate the updated CCP platform, or have feedback on any of the resources prepared, feel free to call 780.436.8381 or email to [info@acot.ca](mailto:info@acot.ca).