



Continuing Competence Program Manual

Guide to the College's CCP

Effective September 28, 2024

If you have any questions about the Continuing Competence Program (CCP) or have feedback on any of the content within this document, please call (780.436.8381) or email: info@acot.ca

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1. INTRODUCTION

1.1 Legislative Background & Purpose of the CCPM

The Continuing Competence Program Manual (CCPM) aligns with the requirements set out in *Part 3 Continuing Competence and Practice Visits* of the [Health Professions Act](#) (HPA). Section 50(2)(a)(b) of the HPA requires that all colleges have a self-directed Continuing Competence Program (CCP) in place for registrants to maintain competence and enhance the provision of professional services. The HPA requires, as part of the CCP, that registrants participate in a program of self-directed professional development and, as necessary, practice visits, examinations, interviews or other competence assessments.

The CCPM, as a supplemental policy document to ACOT's *Standards of Practice* and *Code of Ethics*, consolidates the requirements of ACOT's Continuing Competence Program including mandatory participation in Member Selected and College Selected activities. The CCPM also outlines registrant obligations that may arise following the review and evaluation of their CCP submissions and/or a practice visit. Finally, the CCPM describes the College's confidentiality and record keeping requirements. For guidance on the specific steps to navigate the online platform and complete CCP submissions, please refer to the *CCP Step by Step Comprehensive Guide* on the ACOT website.

ACOT uses the terms **member** and **registrant** interchangeably to refer to regulated members as described in the HPA.

1.2 Competence Defined

HPA section 1(1)(f) defines competence as “the combined knowledge, skills, attitudes and judgment required to provide professional services.” For the purposes of the CCP, the following more comprehensive definition of competence is used by ACOT: “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values and reflection in daily practice for the benefit of the individual and community being served”; it is “developmental, impermanent and context specific.” (Epstein & Hundert, 2002, p. 226). This latter definition illustrates that a registrant's competence is multidimensional and contextual.

1.3 Provision of Professional Services

As outlined in the *Health Professions Act*, Schedule 15, section 3, in their practice, occupational therapists do one or more of the following:

- (a) *in collaboration with their clients, develop and implement programs to meet every day needs in self care, leisure and productivity,*
- (b) *assess, analyze, modify and adapt the activities in which their clients engage to optimize health and functional independence,*
- (c) *interact with individuals and groups as clinicians, consultants, researchers, educators and administrators, and*
- (d) *provide restricted activities authorized by the regulations.*

The restricted activities an occupational therapist may be authorized to perform are outlined in section 38 of the [Health Professions Restricted Activity Regulation \(HPRAR\)](#).

1.4 The CCP and ACOT's Standards of Practice and Code of Ethics

Every occupational therapist, as a registered member of the *Alberta College of Occupational Therapists* (ACOT), is responsible for managing their own professional practice in accordance with the College's [Standards of Practice](#), [Code of Ethics](#), and the [Competencies for Occupational Therapists in Canada](#).

ACOT's *Competence Standard of Practice* and *Code of Ethics* set the requirement and ethical responsibility of registrants to practice within their level of competence and actively participate in reflective practice and ongoing learning throughout their career. This helps registrants to acquire, maintain and enhance their competence in the provision of professional services. As outlined in the *Code of Ethics*, a registrant has an ethical responsibility to provide services only in areas of competence and to seek support and additional education, training, mentorship or supervision when a gap in competence is identified. As such, clients can expect that the occupational therapy services they receive are provided by an occupational therapist who is competent to practice safely and effectively. The *Standards of Practice* also require registrants to participate in and submit annually during practice permit renewal, the CCP requirements established by Council and published in this *Continuing Competence Program Manual* (CCPM).

1.5 ACOT's CCP Policies

In addition to the *Standards of Practice*, *Code of Ethics*, and the CCPM, ACOT maintains policies regarding the CCP, as approved by ACOT's Council:

- (a) [CCP Individual-Level Review and Evaluation Policy and Procedures](#): outlines the processes for selecting, reviewing and evaluating individual registrants' CCP submissions.
- (b) [CCP Program-Level Review and Evaluation Policy and Procedures](#): outlines the processes for selecting, reviewing and evaluating aggregate registrants' CCP submissions, in addition to identifying CCP submission trends in order to target training and supports, and determine whether the CCP is an accurate indicator of OT competence.
- (c) [Continuing Competence Practice Visits Policy and Procedures](#): outlines the intent, processes and outcomes for practice visits.

These ACOT policies, along with additional CCP resources can be found on the ACOT website under the Continuing Competence tab.

1.6 Reflective Practice Defined

Not only is reflective practice a requirement of registrants per the *Standards of Practice* and *Code of Ethics*, but it is also foundational to ACOT's *Continuing Competence Program*. Reflective practice is defined in ACOT's *Standards of Practice* as the structured and purposeful examination of a registrant's own knowledge, skills and practice and personal experience throughout one's career. Reflection is part of practice reasoning – the critical thinking and decision-making processes that contribute to competence and the delivery of ethical, accountable and effective services (Egan & Restall, 2022; Schön, 1983). Registrants are referred to the definition in the *Standards of Practice* for further explanation of the concepts of reflection on practice, reflection in practice and critical reflection.

2. PROGRAM ACTIVITIES

2.1 Mandatory Participation

Successful completion of the CCP is required as part of practice permit renewal for regulated members on the General and Provisional Registers. Regardless of the registrant's role and responsibilities (clinician, consultant, researcher, educator or administrator), employment status (full time, part time, casual, on leave, not working, looking for work, retired), and what month the registrant came on the register, the CCP requirements must be completed prior to submitting payment for renewal or prior to cancelling registration with ACOT.

2.2 CCP Reporting Period

Registrants are required to complete the Member Selected goal and the College Selected Mandatory Training during the registration year (March 1-Feb 28) and prior to renewal of their practice permit.

2.3 Accommodations

Registrants with physical and/or mental disabilities, or those facing extenuating circumstances can be accommodated with respect to their participation in any stage of the CCP. Registrants seeking accommodation should contact the Director of Competence and Practice or the Registrar to develop an accommodation plan as soon as they become aware of the extenuating circumstance and need for accommodation.

2.4 CCP Reporting Requirements

Using the member portal on the College's website, registrants are required to complete a **Member Selected Goal** and the **College Selected Annual Mandatory Training**. Both must be completed to proceed with renewing their practice permit. The steps and components of the Member Selected and College Selected requirements are summarized in the following image.



2.4.1 Member Selected

The Member Selected self-directed goal follows the steps of **Intention**, **Action** and **Review** as depicted in the diagram.

Intention

The Member Selected Goal accounts for individual registrants having their own individual competency development needs and professional practice context. During renewal in January/February, registrants will articulate a yearly **Intention** for learning using the CCP template in the online member portal. They will identify one meaningful, action-oriented goal that aligns with the registrant's practice and will advance their competence and provision of occupational therapy services to the public. An acceptable goal clearly states what the registrant will work towards and is time limited. The registrant will complete an initial reflection and describe why this goal was selected and how they plan to achieve their goal. The registrant will then identify the Domain within the *Competencies for Occupational Therapists in Canada* that aligns to the competencies their Intention will target. These activities must be completed in the member portal prior to completing the renewal process.



General activities that occur as part of the registrant's regular provision of occupational therapy services are not acceptable Member Selected goals. For example, "I will work a 7.5-hour day" is not an acceptable Member Selected goal. A Member Selected goal may align with a goal the registrant has set with their team/employer/organization; however, the basic requirements (Intention, Action and Review) must be completed in alignment to the occupational therapy competence Domain the registrant aims to develop or enhance.

A registrant may change their self-selected goal during the year. Changes, such as moving into a different role/position or changing employers during the registration year may result in the need to identify a new goal.

Action

From March through to the following renewal period, registrants will complete learning activities related to their *Intention* that contribute to enhancing their competence. During this **Action** component of the CCP process, registrants are required to complete one Learning Activity Record. If desired, the registrant can submit up to five additional Learning Activity Records.

Review

During the subsequent renewal period (January/February), the registrant will **Review** their progress and document their review in the member portal. They will report on their goal status and reflect on what they have learned over the past year from the activities they completed in relation to their goal. With reference to the [Competencies for Occupational Therapists in Canada](#), the registrant will describe a scenario and illustrate how the goal enhanced their competence with respect to at least one Indicator of Competency for the Domain selected. If the status of the goal is marked as "ongoing" as opposed to "complete", the registrant will document the actions they already completed over the year along with the actions they plan to complete in the upcoming registration year to achieve the goal. As a final step in the Review stage, the registrant will identify which *Standard of Practice* or *Code of Ethics* indicator was addressed by participating in this goal.

Supporting documents of the Member Selected activity such as certificates of completion are not required to be submitted in the member portal. Refer to the CCP Step-by-Step Comprehensive Guide for examples of supporting documents that further the understanding of what was accomplished and are acceptable in the member portal.

2.4.2 College Selected

The College Selected Annual Mandatory Training exists to raise the profession's awareness of issues, practice standards, ethical conduct and legislation governing occupational therapists' practice. Mandatory participation ensures a profession-wide collective and common understanding of a topic.

The mandatory training may include completion of learning modules, self-evaluation of knowledge, skills and attitudes or reflection on learning. The topic will vary year to year, however, at the direction of Council, ACOT requires the completion of the *Prevention of Sexual Abuse and Sexual Misconduct* learning module every second year.

The College Selected Annual Mandatory Training will be made available upon renewal for the registrant to complete at any point after March 1st during the registration year. The mandatory training will either be completed in the member portal or registrants will be provided direction from ACOT to attest to completion. The College Selected activity, like the Member Selected activity, must be completed to process renewal of the registrant's practice permit.

2.5 CCP Performance Expectations

Completion of the Member Selected and College Selected activities as described in this manual constitutes the minimum performance expectation for the Continuing Competence Program.

3. COMPETENCE ASSESSMENTS

3.1 Review and Evaluation of CCP Submissions

Section 50(2)(b) of the HPA allows for colleges to perform practice visits, examinations, interviews or other competence assessments of their regulated members. ACOT's *Standards of Practice* set requirements for the assessment of a registrant's competence as part of the CCP. Specifically, the *Competence Standard of Practice* states that a registrant must participate in competence assessments including periodic review and evaluation of all or part of their CCP submission. ACOT's [CCP Individual-Level Review and Evaluation Policy and Procedures](#) outlines the processes for selecting, reviewing and evaluating registrants' CCP submissions.

3.1.1 Criteria for Evaluation

The [*CCP Review and Evaluation Rubric*](#) outlines the criteria for acceptable, conditional and unacceptable ratings of CCP submissions. The intent of the Rubric is for registrants to use it as a guide for what to include in their CCP submission, and for CCP submission Reviewers to objectively rate and offer feedback on the acceptability of a CCP submission. Overall ratings are summarized as follows.

Acceptable

Acceptable CCP submissions will receive feedback in one of three categories: Exceeds Expectations, Meets Expectations, or Almost There. If the CCP submission is acceptable, the registrant's name will not be put back into the pool for randomized selection for 5 years unless requested or required.

Conditional

The CCP submission reviewed has minor content missing and does not meet ACOT's expectations for an acceptable submission. Reviewer's feedback is to be incorporated into next year's submission. The CCP submission will be reviewed again next year to verify that feedback has been incorporated.

Not Acceptable

The CCP submission reviewed has major content missing and does not meet ACOT's expectations for an acceptable submission. The registrant is required to set up a **coaching conversation** with ACOT's Director of Competence and Practice and incorporate reviewer feedback within 30 days. The CCP submission will be reviewed again the following year to verify feedback continues to be incorporated.

3.1.2 Coaching Conversations

A registrant will engage in a coaching conversation with the Director of Competence and Practice when their CCP submission is deemed not acceptable. The conversation is designed to support the registrant's understanding of the legislative requirements and ACOT's expectations for completing the CCP. Coaching conversations may be paired with CCP meetup sessions, directed readings of the CCP Step-by-Step Comprehensive Guide, or other measures to support the registrant in updating their CCP submission to an acceptable level.

3.1.3 Review and Evaluation Appeals

A registrant may appeal the results of their review and evaluation as described in the [CCP Individual-Level Review and Evaluation Policy and Procedures](#).

3.2 Practice Visits

Practice visits must align with section 50(1) of the HPA and ACOT's *Competence Standard of Practice*. ACOT's [Continuing Competence Practice Visits Policy and Procedures](#) outlines the intent, processes and outcomes for practice visits. Practice visits are conducted on an 'as needed' or 'as requested' basis with the intent to determine whether the registrant's practice adheres to ACOT's *Standards of Practice and Code of Ethics*.

A registrant may request a practice visit, or they may be selected to receive a practice visit based on non-compliance with the CCP requirements or for having a "not acceptable" CCP submission more than once in a five-year period, or conditional (and/or not acceptable) submissions twice or more in a five-year period.

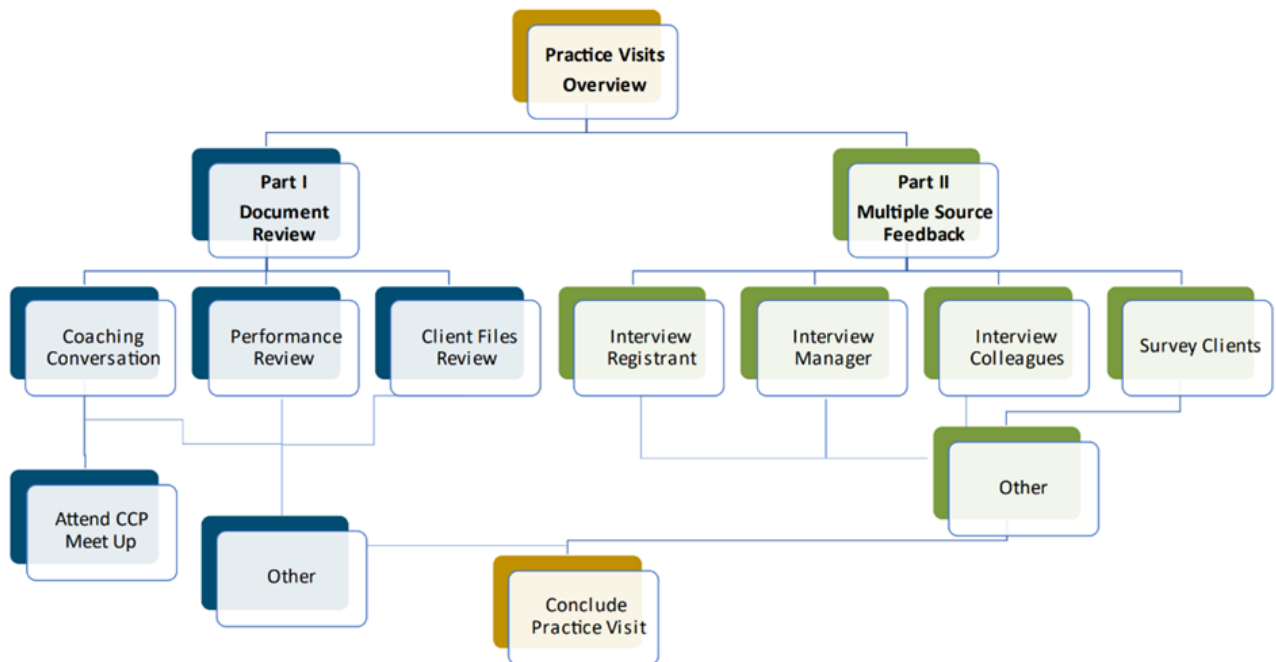
Per section 51(2) of the HPA, registrants must cooperate with the competence committee and any person appointed under section 11 of the HPA when conducting an assessment of the registrant's competence.

3.2.1 Practice Visit Timeline

Registrants are given 30 days' notice prior to a practice visit taking place. Reviewers will have four weeks to complete each assigned component of the practice visit. Results of practice visits are provided to the registrant within 90 days as required by section 51(5a-b) of the HPA.

3.2.2 Practice Visit Components

Section 50(3a-f) of the HPA outlines what may be included in a practice visit. ACOT currently describes practice visits in two parts: Part I Document Review and Part II Multiple Source Feedback as shown in the following image.



Part I Document Review

When a practice visit is indicated, the process begins with a coaching conversation as described earlier in this manual. The Director of Competence and Practice may advise the registrant to attend or review ACOT CCP webinars/education. The reviewers will review the past 5 years of the registrant’s performance reviews as well as a sample of ten client files that the registrant has provided professional services to in the past 5 years. If there is sufficient evidence of adherence to ACOT’s Standards of Practice and Code of Ethics after Part I, Part II will not be required.

Part II Multiple Source Feedback

If the document review is inconclusive or does not show sufficient evidence of adherence to ACOT’s Standards of Practice and Code of Ethics, the reviewers may engage in interviews with the registrant, manager(s) or colleagues and conduct surveys with clients. Interviews with the manager, colleagues and clients occur with their informed consent.

3.2.3 Access to Private Dwelling or Publicly Funded Facility

For the purposes of conducting a practice visit, any or all members of the competence committee or persons appointed under section 11 of the HPA, may at any reasonable time and with notice, enter and inspect any place where the registrant provides professional services. However, Reviewer(s) must first obtain consent of the occupant of private dwellings or consent and agreement from the person who controls or operates the publicly funded facility as detailed in section 51 of the HPA.

3.2.4 Other Competence Assessments

In addition to the assessments of competence described in the preceding section of this manual, the HPA section 51(3), allows for ACOT to engage in other assessments of competence as deemed necessary. These may include direct observation of the registrant providing services if the person who is receiving the professional services consents, as well as assessing the safety and condition of equipment and technology used by the registrant in the provision of professional services.

3.2.5 Outcome of a Practice Visit

Within 90 days after completing a practice visit, the competence committee must give a report to the registrant setting out the findings of the visit. The competence committee determines and advises the registrant and the Registrar whether the results are

- (a) satisfactory,
- (b) if the registrant must comply with directions imposed in accordance with the *Standards of Practice*, or
- (c) if the matter is to be referred to the Complaints Director.

3.2.6 Practice Visit Appeals

The results of a practice visit may be appealed as per the process outlined in ACOT's [Continuing Competence Practice Visits Policy and Procedures](#).

3.2.7 Non-Compliance with CCP Requirements

If the registrant does not comply with (i.e., refuses to participate or complete), the CCP activities the Registrar may:

- (a) refer the registrant for a practice visit (or additional practice visit), and/or
- (b) deny practice permit renewal; and/or
- (c) refer the registrant to the Complaints Director.

3.2.8 Referral to the Complaints Director

In accordance with the HPA section 51.1, the competence committee or Registrar must make a referral to the Complaints Director in any of the following situations as it pertains to the CCP

- (a) the registrant intentionally provided false or misleading information;
- (b) the registrant displays a lack of competence in the provision of professional services that has not been remedied by participating in the continuing competence program;
- (c) the registrant may be incapacitated, or
- (d) the conduct of the registrant constitutes unprofessional conduct that cannot be readily remedied by means of the continuing competence program.

3.2.9 Conditions on a Practice Permit

Section 40.1(1) of the HPA allows for the Registrar, Complaints Director, registration committee or competence committee to impose conditions on a regulated member's practice permit. Reasons for the decision must be provided. Conditions that may be imposed include, but are not limited to, conditions that the registrant

- (a) practice under supervision;
- (b) limit practice to specified professional services or to specified areas of practice;
- (c) refrain from performing specified restricted activities;
- (d) refrain from engaging in sole practice;
- (e) submit to additional practice visits or other assessments;

- (f) report to the Registrar on specified matters on specified dates;
- (g) be granted a practice permit valid only for a specified purpose and time;
- (h) be prohibited from supervising students, other members or other health professionals, and;
- (i) completes the continuing competence requirements within a specified time.

3.2.10 Reinstatement

Registrants who apply for their registration to be reinstated on the General or Provisional Register are required to demonstrate they completed the Member Selected and College Selected activities during the last year they were most recently registered before registration will be reinstated. If the registrant cannot demonstrate completion of these activities, the Registrar may place conditions on the registrant's practice permit and/or direct the registrant to undertake any of the actions outlined in the "Non-Compliance with CCP Requirements" section of this manual.

4. CONFIDENTIALITY AND RECORD RETENTION

4.1 Confidentiality, Disclosure of CCP Information

In accordance with section 52(1) of the HPA, information related to participation in the CCP is confidential, subject to the exceptions listed in Part 3 of the HPA. These exceptions include the publication of aggregate data regarding ACOT's CCP and referral to the Complaints Director as set out in section 51.1 of the HPA. Please also refer to ACOT's [Privacy Policy](#) posted on the ACOT website.

4.2 ACOT's Retainment of CCP Documents

ACOT will retain CCP related documents for a minimum of 10 years and will maintain privacy and confidentiality measures for safe storage.

5. REFERENCES

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