
Effective Date:	April 2022
Date Last Updated:	February 18, 2025; July 23, 2025
Next Review Date:	July 2028
Policy:	Continuing Competence Program (CCP) Practice Visits Competence Assessments Policy & Procedure
Applicable Legislation:	<i>Health Professions Act</i> (HPA), Sections 11, 50, 51 & 52
Applicable Bylaws:	Section 2 (1) & (2) and Section 16
Persons Affected:	Registrants, CEO & Registrar, Competence Committee, Director of Competence and Practice, Complaints Director, Council and the Public

1.0 Purpose

The CCP Practice Visits Policy is guided by the principles of accountability, transparency, fairness and education. ACOT's objective in conducting practice visits is to maintain registrant competence and enhance the provision of professional occupational therapy services. This policy outlines the requirements and processes with respect to practice visits.

The intended outcomes of this policy are:

- ACOT's CCP practice visits, as permitted by the *Health Professions Act* section 50(2)(b), are conducted in a manner that meets the requirements outlined in Part 3 of the *Health Professions Act*.
- Registrants receive feedback about their practice and activities to support continuing competence.
- Registrants who require guidance to comply with ACOT's *Standards of Practice*, *Code of Ethics* and the *Competences for Occupational Therapists in Canada* are identified and given support.

2.0 Policy Statement:

In accordance with section 50(2)(b) and 51 of the HPA and as authorized by ACOT's *Standards of Practice*, the Competence Committee may direct that a registrant

participates in a practice visit, to assess a regulated member's competence. In doing so, the registrant must co-operate with the Competence Committee and any person appointed under section 11 of the HPA. The Director of Competence and Practice ("the Director") is responsible and accountable for overseeing the practice visit process. The Practice Visit Reviewer ("Reviewer") must give a report of the findings of the assigned aspects of the practice visit to the Director. Based on the collective findings from the Reviewer and the Director, the Director advises the registrant and the CEO & Registrar if the results are (a) satisfactory, (b) if the registrant must comply with directions imposed in accordance with the Standard of Practice D. Competence clauses 7 & 8, or (c) if the information obtained from the practice visit is to be referred to the Complaints Director as indicated in section 51.1 of the HPA.

3.0 Scope

This policy applies to all ACOT employees, registrants, Council and any other person acting on behalf of ACOT including contracted staff.

4.0 Procedures

4.1 Selection of Registrant for a Practice Visit

- a) As part of the Continuing Competence Program any registrant may be selected for a practice visit. Selection of a registrant for a practice visit may occur as follows, but is not limited to:
 - i. Self-selection (at the request of the registrant).
 - ii. Non-compliance with CCP requirements including but not limited to not participating in a Coaching Conversation after the CCP submission is rated as Not Acceptable.
 - iii. Conditional or Non-acceptable CCP submission more than once in a five (5) year period, or one (1) conditional and one (1) Not Acceptable CCP submission in a five (5) year period.

- iv. In accordance with competence risk factors established by the Competence Committee.
- v. A randomized sample selection established by the Competence Committee.

4.2 CCP Practice Visit Reviewers

- a) The Director will oversee recruitment and training of Reviewers and assignment of practice visit components to the Reviewers.
- b) Reviewers are selected first from the Competence Committee membership.
- c) If additional Reviewers are required beyond those available from the Competence Committee, registrants from the General Register with a minimum of five (5) years of practice experience may be invited to apply from across the province and across practice areas. Successful applicants will serve 3-year terms, renewable up to two times.
- d) Each Reviewer is required to sign an Oath of Confidentiality prior to engaging in the practice visit process.
- e) Each Reviewer is required to complete Reviewer training synchronously. Reviewer training will include an overview of the CCP submission requirements; the practice visit components and process of Part I and Part II; use of the *ACOT Standards of Practice*, *ACOT Code of Ethics* and the *Competencies for Occupational Therapists in Canada* in the context of practice visits; and completion of relevant practice visit forms.
- f) Reviewers are provided an opportunity to recuse themselves from participating in practice visits of registrants who are family, close friends, those they have a personal or financial relationship with, colleagues whom they work, supervise or report to, or any situation which may be perceived as a potential conflict of interest.
- g) Reviewers will be paid an honorarium for each practice visit, at the rate of a mid-range OTII at Step 5 of the current HSAA contract, with one (1) day provided for each practice visit, including writing-up of findings.

- h) Reviewers will remain anonymous, and the files they review will be anonymized as much as practical.
- i) At least one member of the Competence Committee and one ACOT staff member will be designated as Reviewer Consultants who can be consulted by any of the other Reviewers for a second opinion on a practice visit component. Reviewer Consultants should have more years of experience reviewing submissions/practice visit documents or more in-depth knowledge of the CCP requirements, relative to Reviewers.
- j) The Competence Committee may appoint one or more people who have technical expertise or other relevant knowledge to inquire into and report to the Competence Committee any aspect of a practice visit in accordance with sections 11, 20 and 51 (2-5) of the HPA.

4.3 Conducting Practice Visits

- a) Registrants will be given thirty (30) days of notice by ACOT before a practice visit is to take place.
- b) Practice visits consist of two (2) parts, *Part I Document Review* and *Part II Multiple Source Feedback*, as depicted in Appendix A. Registrants will begin by participating in Part I (Document Review). Registrants who do not successfully complete Part I will proceed to Part II (Multiple Source Feedback).
- c) At the beginning of Part I, the registrant will engage in a Coaching Conversation with the Director. Coaching Conversations will follow a standard, templated process that is aimed at being supportive, strength-based and non-punitive. The conversation will include an explanation of the reason and process for a practice visit and promote the registrant's understanding of applicable legislation and regulation, ACOT's *Standards of Practice* and *Code of Ethics*, the *Competencies for Occupational Therapists in Canada*, as well as foster reflective practice.
- d) Practice visit Reviewers will be assigned to complete components of Part I and/or Part II as required and requested by the Director.

- e) Throughout Part I and Part II, the Director and Reviewers will compare the requirements in ACOT's *Standards of Practice* and *Code of Ethics* and the *Competencies for Occupational Therapists in Canada* to the registrant's practice as evidenced through the various components of the practice visit.
- f) As provided by the Director, templated forms will be used by the Reviewers for consistent documentation throughout each component of the practice visit and to determine and document final results.
- g) Reviewers will have approximately four (4) weeks to complete each assigned part of the practice visit, which they will forward to the ACOT office for final determination of results by the Director.
- h) To conduct Part I of a practice visit, the Director or CEO & Registrar will oversee obtaining the following information, as available, from the registrant's employer and/or contracting agency, and provide it to the practice visit Reviewer:
 - i. A copy of the registrant's job description and confirmation of the registrant's related practice area(s);
 - ii. Copies of the registrant's most recent performance reviews, (or internal competency reviews where available), conducted in the past five (5) years; and
 - iii. Copies of a minimum of ten (10) client files, or for those in non-client facing roles, copies of a minimum of ten (10) work products such as briefing notes, presentations, reports, etc.
- i) When providing the document review package to the assigned Reviewer, the Director will notify the Reviewer of any expected documentation that is not included and will adjust the scoring criteria accordingly.
- j) If the Reviewer notices any expected documentation appears to be missing, the Reviewer will notify the Director. In turn, the Director will review and adjust the scoring criteria accordingly.

- k) The Director may choose to proceed to Part II of the practice visit if the document review (Part I) was inconclusive or did not show sufficient evidence of the registrant's adherence to ACOT's *Standards of Practice*, *Code of Ethics* and/or the *Competences for Occupational Therapists in Canada*, including evidence of meeting the continuing competence requirements.
- l) The Director will determine the specific components to be used for Part II of a registrant's practice visit in accordance with section 51(3) of the HPA such as: interviews (including surveys); observation of the registrant providing professional services; and assessment of equipment and technology used by the regulated member in the provision of services.
- m) Practice visits will occur in person or virtually. When occurring in person, Reviewers or ACOT staff will obtain permission from the occupant of a private dwelling or publicly funded facility where applicable to access the registrant's workplace or appropriate alternate venue for purposes of the practice visit, in accordance with HPA section 51 (4 a-b). Permission will be documented within the practice visit standardized documentation.

4.4 Results of Practice Visits

- a) The registrant will be advised by the Director of the practice visit results within ninety (90) days after completing a practice visit, as required by section 51(5) of the HPA.
- b) If the results of the practice visit are deemed unsatisfactory, the Competence Committee may direct a registrant to comply with directions imposed in accordance with the ACOT Standard of Practice D.7 (a-d) within a specified period of time:
 - i. To complete specific CCP requirements;
 - ii. To correct any problem identified in the practice visit;
 - iii. To submit to periodic review and evaluation; and/or
 - iv. To report to the Competence Committee on specified matters.

- c) As required in section 51.1(1) and (2) of the HPA, the Competence Committee must make a referral to the Complaints Director if, based on information obtained during the continuing competence program, including a practice visit, it is of the opinion that:
 - i. The registrant intentionally provided false or misleading information;
 - ii. The registrant displays a lack of competence in the provision of professional services that has not been remedied by participating in the CCP;
 - iii. The registrant may be incapacitated; or
 - iv. The conduct of the registrant constitutes unprofessional conduct that cannot be readily remedied by means of the continuing competence program.
- d) Using a templated form, the Director will notify the registrant's manager(s) that a practice visit is complete and that the results are confidential between the registrant and ACOT. Practice visit results will not be shared with employers, and employers will be notified of this prior to conducting a practice visit by either the Director or designated ACOT staff.

4.5 Appeal Process

- a) Registrants can appeal the results of the practice visit by submitting an appeal to the ACOT office.
- b) An appeal request must be received by the ACOT office within thirty (30) days of the notification to the registrant of their practice visit results. Appeals will be completed typically within four (4) weeks of receipt of the appeal request. Complexity of the appeal and availability of Reviewer human resources may impact the completion timeline.
- c) Practice visit results submitted for appeal are reviewed by a panel of two (2) new Reviewers who must come to a consensus on their practice visit recommendations. The two new Reviewers can either:

- i. Uphold the recommendations of the original practice visit, or
 - ii. Update the recommendations from the original practice visit, at which point regular follow-up would be implemented as described in section 4.4 of this policy and procedure.
- d) The decisions of the two new Reviewers are final.

5.0 Confidentiality

All ACOT staff, the Competence Committee and Reviewers participating in the practice visit competence assessment process must adhere to the confidentiality requirements as set out in section 52 of the HPA.

6.0 Approval

This policy requires approval by the Competence Committee and ACOT Council.

7.0 Related Resources

- *Health Professions Act, RSA 2000, Chapter H-7*
- *ACOT Bylaws*
- *ACOT Continuing Competence Program Manual*
- *ACOT Standards of Practice*
- *ACOT Code of Ethics*
- *CCP Review and Evaluation Rubric*
- *Oath of Confidentiality – Competence Committee Reviewers*
- *Competencies for Occupational Therapists in Canada/Référentiel de compétences pour les ergothérapeutes au Canada. (2021/2024) ACOTRO, ACOTUP & CAOT*
- *Continuing Competence Program (CCP) Review and Evaluation Competence Assessments – Individual Level Policy and Procedure*

- *Continuing Competence Program (CCP) Review and Evaluation Competence Assessments – Aggregate Submissions Policy and Procedure*

8.0 Appendices

Appendix A: Practice Visits Overview

