



College of Traditional Chinese Medicine
Practitioners and Acupuncturists of Ontario

Ordre des praticiens en médecine traditionnelle
chinoise et des acupuncteurs de l'Ontario

Quality Assurance Program Framework

College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario

Approved by the transitional Council on:
Amended on:

January 14 and 15, 2013
March 24, 2017

Introduction

The Quality Assurance (QA) Program is an important aspect of the College's mandate. All Colleges under the Health Procedures Code, Schedule 2 of the *Regulated Health Professions Act, 1991 (RHPA)* must:

- develop, establish and maintain programs and standards of practice to assure the quality of practice of the profession: and
- develop, establish and maintain standards of knowledge and skill and programs to promote continuing evaluation, competence and improvements among the members.

The QA Program for all Colleges must include:

- a) continuing education or professional development designed to:
 - I. promote continuing competency and continuing quality improvement among the members;
 - II. promote inter-professional collaboration;
 - III. address changes in practice environment; and
 - IV. incorporate standards of practice, advances in technology, changes made to entry to practice competencies and other relevant issues in the discretion of the Council;
- b) self, peer and practice assessment;
- c) a mechanism for the College to monitor members' participation in, and compliance with the quality assurance program.

The goal of the CTCMPAO Quality Assurance Program is to protect the public by working in partnership with R. TCMPs and R. Acs to support and provide them with tools to demonstrate their ongoing competence.

The *RHPA* requires a health professional College to establish a Quality Assurance Committee and to make regulations prescribing a QA program. It authorizes a QA Committee to appoint assessors for the purpose of the QA program. All members of the College are required to participate in the QA program and to cooperate with the assessors and the Quality Assurance Committee.

R. TCMPs and R. Acs are members of the CTCMPAO. Registration ensures that they have met the professional requirements of the College and are competent to practice. The QA program ensures that R. TCMPs and R. Acs initial competencies acquired to practice as members of the College are maintained through members engaging in professional development and continuing education activities that relate to the practice of the profession.

Assumptions underlying the development of the Quality Assurance Program

Although over the years R. TCMPs and R. Acs have proven their commitment to professionalism and quality patient care through on going self-development, such efforts have not been formally documented and recognized in many cases.

The College has developed the QA program based on important assumptions about the profession and the practice of R. TCMPs and R. Acs. These include:

- R. TCMPs and R. Acs are members of the College of Traditional Chinese Medicine Practitioners and Acupuncturists of Ontario (CTCMPAO). This ensures that they have

- met the professional requirements of the College and are practicing competently;
- The QA program is intended to be educative not punitive. (There are other processes under the *RHPA* that enable Colleges to deal with complaints about a member's practice);
- The QA program is based on the Standards of Practice that have been developed to assure the quality of practice of the profession. The Standards of Practice are the underpinnings of the QA program;
- Members understand the Standards of Practice;
- Members practice in a variety of settings;
- Members have unique learning needs;
- Access to learning resources may be limited due to geographical or financial constraint;
- Members can identify their own learning needs, they will engage in activities to meet their learning needs and they will document the learning activities and the learning outcome if they are given the right tools. (Based on the Principles of Adult Education)
- The program is based on helping members to enhance their practice.

Who Administers the QA Program?

The Quality Assurance Committee (QA Committee) is responsible for administering and monitoring the QA program. The QA Committee is one of the statutory committees of the College. The QA Committee is separate from the other statutory committees of the College including the Executive Committee, the Registration Committee, the Inquiries, Complaints and Reports Committee, the Patient Relations Committee and the Discipline Committee.

Self-Assessment, Continuing Education and Professional Development

Members must participate in self-assessment, continuing education and professional development activities on an annual basis. Members must complete 15 hours of professional development activities each calendar year. The College has developed tools that will make up the QA records to assist members in performing these activities in a thoughtful and organized fashion.

Peer and Practice Assessment

A peer assessment is where another member of the profession reviews a member's practice with the member to identify areas of strength and areas that may benefit from enhancement.

The Components of the QA Program

The QA program includes a Self-Assessment, a Professional Development Plan, and evaluation by the QA Committee of the member's Self-Assessment and Professional Development Plan, a practice assessment of members and participation by members in any corrective activity.

The QA program requires that each member of the College do the following each year:

- Complete the Self- Assessment made up of parts A and B. The Self-Assessment has been designed to assist members in identifying what areas related to the Standards of Practice they would like to learn more about and to identify their continuing education or professional development learning activities for the upcoming year.
Part A of the Self-Assessment focuses on the members practice and what areas of responsibility are included in his or her practice as well as addressing any expected changes in his or her practice environment. Part A also addresses any advances in technology and any inter-professional collaboration that is anticipated in the members practice. Part B of the Self- Assessment is based on the Standards of Practice of the profession and describes the knowledge, skills and judgement relevant to the member's practice.
Part B of the Self-Assessment will assist members in identifying professional development activities (i.e. what they would like to learn more about and learning activities they would like to undertake) to promote continuing competency and continuing quality improvement in their practice and how these selected areas will help the member in his or her current and/or anticipated practice.
- Complete the **Professional Development Plan**. The Professional Development Plan is a tool that has been designed for members to document his or her professional development activities. The Professional Development Plan provides a section for the member to document his or her top priority areas that he or she is interested in learning more about, a description of the activities, the date the activity is completed, the length of the activity in hours and the type of activities undertaken. When the learning activity is completed the member will document how the learning activity helped the member in his or her practice. This is a key component of the QA program as it provides evidence of the members continuing competency and continuing quality improvement.
- Complete the **Quality Assurance Declaration** annually. This declaration provides the College with confirmation of each members continued competence and participation in the QA program. It is completed and sent to the CTCMPO with the member's annual registration.
- Maintain his or her own self-assessment based on the annual Self-Assessment forms, his or her own Professional Development Plan and related QA records for 3 years.

The Process that the QA Committee will undertake to monitor the QA records

Each year the QA Committee will require a percentage of members to submit their Self-Assessment forms and Professional Development Plan and related QA records or portions of them to the Quality Assurance Committee for review.

When and how Members will be advised that they have been randomly selected to submit their QA records to the Quality Assurance Committee for review

The members who have been randomly selected to submit their Self-Assessment forms and Professional Development Plan will be advised in writing **at least three months** prior to the date that the QA records must be received by the College. This allows members time to discuss any questions

that they may have regarding the QA program with the College staff and prepare adequately for the evaluation of their QA records.

Training the Assessors

The QA Committee will be trained to assess each members Self-Assessment Parts A and B and the Professional Development Plan and related QA records or portions of them using an objective, consistent, fair and transparent evaluation process. The QA Committee will look for the number of hours of activities to be assured that the member has completed 15 hours of professional development activities in the calendar year, they will review the description and type of activities undertaken by the member to ensure that the activities are related to the practice of the profession and finally they will review how the activity helped the member in his or her practice.

The Evaluation Process

The QA Committee will evaluate each members Self-Assessment forms and his or her Professional Development Plan and related QA records or portions of them. The Committee will review the Self-Assessment Parts A and B to evaluate that they are complete and that the member has noted any changes in his or her practice environment, advances in technology and inter-professional collaboration that is anticipated in his or he practice. The Committee will review the Self-Assessment to determine the areas for professional development or learning activities that the member has identified as an area that he or she would like to undertake to promote continuing competency and continuing quality improvement in his or her practice.

The QA Committee will review each member's Professional Development Plan to assess that the member has documented his or her top priority areas that he or she is interested in learning more about, the description of the activities presented by the member to be sure that the professional development activities are related to the practice of the profession, the date the activity is completed, the length of the activity in hours and the type of activities undertaken.

The QA Committee will look for the number of hours of professional development activities to be assured that the member has completed 15 hours of professional development activities in the calendar year.

The QA Committee will review the section respecting how the learning activity helped the member in his or her practice. This is a key component of the QA program as it provides evidence of the member's continuing competency and continuing quality improvement.

The Decision

After reviewing the records if the QA Committee is satisfied that the records are complete and meet the requirements of the QA program the member will receive a written report that will advise the member that the QA Committee is satisfied that the member's Self-Assessment Parts A and B and Professional Development Plan are complete and meet the requirements of the Quality Assurance Program.

If the QA Committee is not satisfied with any of the material submitted by the member, the QA Committee will consider the following options:

- require the member to complete the QA records;
- require the member to participate in the QA program;
- require the member to confer with the Committee.

The member will receive a written report outlining the decision of the QA Committee based on any one of the above options. The member will have at least 14 days to make a written submission to the QA Committee. Given the complexities of mail and members busy schedules, the member will have 30 days plus 10 days to accommodate Section 39 (2) of the *RHPA* to make a written submission to the QA Committee.

The QA Committee will review and consider a written submission (the submission may be additional or corrected QA records) submitted by a member and will make a decision of whether the QA Committee is satisfied that the member's records are complete and meet the requirements of the program. The member will receive a written report outlining the decision of the QA Committee.

If serious concerns are raised by the QA Committee while monitoring the professional development, and self- assessment components of the quality assurance program the member may be required to undergo a practice assessment.

Subject to certain limited exceptions, the QA Committee and any assessor appointed by it cannot disclose to any other committee of the College information that was given to it by the member or that relates to the member and was acquired through an assessment or evaluation.

Peer and Practice Assessment

A practice assessment conducted by peers provides a picture of a specific individual's performance in the practice setting. The practice assessment process provides a means to assess how members of the profession actually perform in practice. The assessment process is intended to be a formative/development evaluation where another member of the profession reviews a member's practice with the member to identify areas of strength and areas that may benefit from enhancement.

Each year the QA Committee will require a percentage of members to undergo a peer and practice assessment to assess the members' knowledge skills and judgement. Members may also be selected if concerns are raised while monitoring the Self-Assessment forms, the Professional Development Plan and related QA records.

Members may be selected on the basis of other criteria specified by the Committee and the criteria will be published on the College's website three months before the member is selected on the basis of those criteria. Quality Assurance Regulation, Section 7 (c). In the first year of the peer and practice assessment will involve recruiting volunteers to agree to be assessed and volunteers to be assessors. Criteria to be an assessor or to be a member who will be assessed through the QA program which has been established by the QA Committee and is listed next.

The volunteer must:

- be a member of the CTCMPAO;
- have been in practice for at least 5 years in Ontario;
- be able to communicate in English effectively;
- be willing to provide the time to train as an assessor;
- be willing to provide time for his or her practice to be assessed;
- be willing to work with the College to evaluate and refine the Peer and Practice Assessment tool;
- have an understanding of the Quality Assurance Program and the Quality Assurance Regulation;
- have a clear understanding of the powers and the role of the assessor and the role and the powers of the QA Committee;
- be willing and able to clearly draft a written report in English of the assessment to be submitted to the QA Committee;
- be willing to participate in an evaluation of the process to provide feedback to the College with respect to any changes that need to be implemented in the practice assessment forms and assessment process;
- sign a confidentiality agreement based on Section 36 (1) of the *RHPA*.

The assessors will be appointed by the QA Committee based on the criteria.

Training the Assessors

The assessors will be trained to assess each member's practice using an objective, consistent, fair and transparent evaluation process based on the member's performance in meeting the Standards of Practice. In addition, the assessors will receive training on how to draft a brief objective report that will serve as a summary of the practice assessment. The completed check list and the summary will be provided to the QA Committee and will be used by the QA Committee in making a determination respecting the practice assessment.

The Practice Assessment Tool

The tool to be used by the assessors to assess the member's knowledge, skills and judgement is based on the CTCMPAO Standards of Practice. The focus of the assessment tool relates to safe practice and record keeping. It is in the form of a check list and the assessor will be required to rate the members practice using a six-point scale. There will be a section for the assessor to draft a brief written report that is objective and provides a summary of the assessment. The completed check list and the summary will be provided to the QA Committee and will be used by the QA Committee in making a determination as to whether or not the member is practicing to the expected standard, thereby ensuring effective and safe practice.

How the Practice Assessment of the Member's Knowledge, Skills and Judgement will be conducted

The following steps will make up the practice assessment process:

- member will be given notice by the QA Committee that he or she has been selected to undergo a peer and practice assessment to assess the members' knowledge, skills and judgement on the premises where the member practices;
- member will receive a copy of the assessment tool with the notice, the name of the proposed assessor and a proposed date at least three months in the future of when the assessment will take place;
- QA Committee with the member will determine a mutually agreed upon date when the assessment will be conducted;
- member must confirm in writing the agreed upon new date;
- Committee will appoint two assessors to conduct the assessment;
- assessors will undertake a training program to ensure that the assessment is conducted using an objective, consistent, fair and transparent evaluation process. In addition, the assessors will receive training on how to draft a brief objective report that will serve as a summary of the practice assessment;
- QA Committee will provide a "copy of the results" of the assessment to the member. This may take the form of a summary of the report, particularly where the results are satisfactory. Or it may take the form of a copy of the entire report, particularly where it is unsatisfactory;
- QA Committee will review the assessor's report. After considering this information, the Committee will make a preliminary determination of whether the members knowledge, skills or judgment is satisfactory;
- QA committee is satisfied that the members knowledge, skills or judgment is satisfactory and that the member meets the requirements of the QA program the member will receive a written report outlining the decision of the QA Committee;
- QA Committee will provide the member with at least 14 days to make a written submission to the QA Committee. Given the complexities of mail and members busy schedules, the member will have 30 days plus 10 days to accommodate Section 39 (2) of the *RHPA* to make a written submission to the of the QA Committee;
- QA Committee may determine that one or more of the members' knowledge, skills or judgment is not satisfactory;
- QA Committee will advise the member of the decision in a written report and will provide the member with at least 14 days from the date of receiving the notice to make a written submission to the Committee. Given the complexities of mail and members busy schedules, the member will have 30 days plus 10 days to accommodate Section 39 (2) of the *RHPA* to make a written submission to the QA Committee;
- QA committee will review and consider a written submission submitted by a member. If the Committee is of the opinion that the member's knowledge, skills or judgement is still not satisfactory, the QA Committee may require the member to participate in remedial activity – including specified education, refresher or continuing education programs, courses or initiatives.

IMPORTANT POINTS ABOUT THE QA PROGRAM

Each member of the CTCMPAO:

- is required to complete a minimum of 15 hours of professional development activities in order to show commitment to the College's QA program;
- will maintain his or her own Self-Assessment Parts A and B and Professional Development Plan that documents his or her professional development activities based on the annual Self-Assessment;
- will undertake and document only professional development activities that are related to the practice of the profession of Traditional Chinese Medicine;
- will retain a copy of the Self-Assessment Parts A and B, Professional Development plan and the Quality Assurance Declaration for three years;
- must submit the Quality Assurance Declaration each year with his or her annual registration
- is required to cooperate with the Quality Assurance Committee and with any assessor it appoints to conduct a Peer and Practice Assessment.

Acknowledgements

Thanks to the College of Medical Radiation Technologists of Ontario for its support and for the use of its materials.