

Compliance with Quality Assurance Program Requirements

Section 7 7-240

Section: Quality Assurance

Applicable to: Occupational Therapists who have a general certificate of registration

Approved by: Quality Assurance Committee

Date Established: December 7, 2017

Date Reviewed: March 17, 2020, July 6, 2021, September 2021

Purpose

This policy describes the process the College follows when occupational therapists do not comply with the mandatory requirements of the Quality Assurance (QA) program.

Principles

Occupational therapists are responsible for reflecting and improving upon their own practise. The QA program provides a framework for doing this. This helps ensure that they maintain the necessary knowledge, skills, and judgment to practise competently, while also identifying learning needs.

Policy Content

The QA program includes annual requirements, the competency assessment process, and any resulting required remediation. Visit the College <u>website</u> for more information about the QA program.

The **annual requirements** include:

- 1. **The Self-Assessment and Professional Development Plan:** These promote reflection by occupational therapists about their practice. These must be completed annually, and the insights gained are used to set and document learning goals for the year.
- 2. **Prescribed Regulatory Education Program (PREP).** Each year, occupational therapists must complete a self-directed eLearning module. This enhances their knowledge of current professional practice standards and responsibilities.

At annual renewal and when registering with the College, occupational therapists declare a commitment to complete their QA requirements on time.

Procedures: What happens when occupational therapists do not meet the annual requirements

Failing to meet one annual requirement in one year

If occupational therapists do not meet one annual requirement of the program and did not have an approved extension, or exemption, they are sent a letter and are informed that:

- they are required to complete the requirement
- it will be marked as late once it is complete



Failing to meet two annual requirements in one year

If occupational therapists do not meet two requirements of the program, and did not have an approved extension or exemption they are sent a letter and are informed that:

- if they do not complete their requirements within 30 days, they will be referred to the Quality Assurance Committee
- if they complete their outstanding requirements by the specific date, their requirements will be marked as late and their case file will be closed.

Competency Assessment Process

Occupational therapists are required to participate in the competency assessment process. This can happen through a selection process at various intervals throughout an occupational therapist's career, or if directed by the Quality Assurance Committee. The competency assessment process includes three steps:

Step 1: Selection based on identified risk indicators.

Step 2: Completion of a screening tool, within timelines provided by the College. For some registrants, the Competency Assessment process may conclude at this stage, and some may move to Step 3.

Step 3: Participation in a peer and practice assessment within the timelines provided by the College.

Procedures: What happens when occupational therapists do not meet the competency assessment requirements

Failing to complete the competency assessment screening tool

If occupational therapists do not complete their screening tool by the timeline specified by the College, and did not have an approved deferral, they are sent a letter and are informed that:

- they are required to complete the tool within 30 days
- it will be marked as late once it is completed and if they are required to participate in a peer and practice assessment, the Quality Assurance Committee will be informed of the late completion of the tool
- if they do not complete the tool by the new due date, they will be referred to the Quality Assurance Committee regardless of the outcome of their screening tool and peer and practice assessment.

Failing to participate in a peer and practice assessment

If occupational therapists do not complete their peer and practice assessment by the timeline specified by the College, and did not have an approved deferral, they are sent a letter and are informed that:

- they are required to complete their assessment within 60 days
- the deadline extension will be noted for the Quality Assurance Committee as part of their review
- if they do not meet the new deadline, they will be referred to the Quality Assurance Committee for a decision about next steps.

Decision Criteria: Occupational therapists may be referred to the Quality Assurance Committee if:

• They fail to complete one annual QA requirement in consecutive years



- They fail to complete two annual QA requirements in one year and have previous registration, QA or Investigations and Resolutions (I&R) history with the College
- They fail to complete the competency assessment screening tool by an extended date
- They fail to complete the peer and practice assessment by an extended date
- They request an extension, exemption, or deferral after already receiving one or when the reason for their request falls outside of what is listed on the Extension / Exemption, or Deferral Request Form
- They fail to complete a QA requirement, including a remedial activity, by one extended date.

Outcome: What the Quality Assurance Committee can decide

The committee makes its decisions based on the facts in each case. Where occupational therapists fail to comply with an element of the QA program, the committee may take any of the following actions:

- Take no action
- Grant or deny a request for an extension, exemption, or deferral
- Require the occupational therapist to complete the outstanding requirement(s) by a new due date
- Require the occupational therapist to take part in an element of the <u>Competency</u> Assessment process
- Ask the occupational therapist to sign an agreement to comply with their QA requirements
- Require the occupational therapist to take part in a / another Peer and Practice Assessment
- Refer the matter to the College's Inquiries, Complaints and Reports Committee.

Legal Requirement: General Regulation - Ontario Regulation 226/96 (amendment O.Reg. 376/12)

- 27.(1) Every member shall carry out his or her self-assessment and professional development activities in the form and manner approved by the Committee.
- (4) The Committee may refer a member to a peer and practice assessment, where, in the opinion of the Committee,
- (a) the member's records that are required to be kept under subsection (2) are not complete or are inadequate; or
- (b) the results of any learning module or self-assessment tool are inadequate.
- 28. (1) Each year the College shall select the names of members required to undergo a peer and practice assessment.

Regulated Health Professions Act, 1991, S.O. 1991, c. 18, Schedule 2 – Health Professions Procedural Code

80.2 (1) The Quality Assurance Committee may do only one or more of the following:



4. Disclose the name of the member and allegations against the member to the Inquiries, Complaints and Reports Committee if the Quality Assurance Committee is of the opinion that the member may have committed an act of professional misconduct or may be incompetent or incapacitated.