

## BRIEFING NOTE

**TO:** Council

**FROM:** Quality Assurance Committee

**DATE:** May 27, 2019

**SUBJECT:** 8.2 Quality Assurance Program Review

---

**Purpose:**

To review the Quality Assurance (QA) Committee's proposed changes to the current QA program and to determine whether to circulate the proposed changes and a draft QA Non-Compliance Policy and flow-chart for stakeholder feedback.

**Background:**

Under the *Regulated Health Professions Act, 1991*, (RHPA), all health professionals in Ontario must comply with a QA Program prescribed by their College's Council which promotes continuing competence and ensures all members maintain a high standard of practice and professionalism in the public interest. To assist opticians in meeting these legislative obligations, the QA Committee developed a QA Program that requires opticians to engage in self-assessment and professional development each year through the completion of a Professional Portfolio.

As defined in Schedule 2 of the RHPA, the Health Professions Procedural Code (the Code), the purpose of the QA program is to "assure the quality of practice of the profession and to promote continuing evaluation, competency and improvement among the member". The Code stipulates that all QA programs must contain: a continuing education/professional development requirement; a self, peer and practice component; as well as a mechanism to monitor member participation and compliance with the program. Each profession sets its own regulations for any additional profession-specific QA requirements and components in their individual Act. While the QA regulations align with the minimum requirements established in the RHPA, individual regulatory Colleges execute these common requirements in a variety of ways.

The College's current QA program has three components: Competency Enhancement; Competency Review and Evaluation; and Competency Assessment. Together, the three QA program components meet the College's legislated QA requirements outlined in the Code. Every year, each registered optician must complete the competency enhancement component of the QA program. In addition, the QA Committee selects approximately 20% of members to participate in the Competency Review and Evaluation process every year. Approximately 1% of

members every year are required to complete the Competency Assessment component of the QA program.

The College's current QA Program was developed and implemented in 2014. By the end of 2019, the majority of members will have been selected to participate in the current Competency Review and Evaluation process at least once. At its meeting on December 11, 2018, the Committee committed to reviewing the current QA program in 2019.

In February, 2019, an environmental scan was conducted of all RHPA Colleges' QA programs. The majority of Colleges (72%) require members to complete a minimum specified amount of continuing education or professional development on a yearly basis or cycle basis. Only one College (the College of Pharmacists) has no formal tool or structure for member self-assessment but requires each member to formulate a personal plan for continuing education activities. All other Colleges require members to complete some form of self-assessment on a yearly or cycle basis which is linked to any applicable College Standards of Practice, Guidelines or Competencies. These Colleges require members to link their learning to any deficiencies identified from their self-assessment.

The majority of Colleges (72%) randomly select, on an annual basis, a proportion of members to complete a Peer and Practice Assessment. Lastly, the majority of Colleges (56%) randomly select members to submit proof of participation/compliance on a yearly or cycle basis. A few Colleges (28%) require members to upload or report proof of participation/compliance on to the College on a yearly or cycle basis.

In March, 2019, an eBlast was sent to all opticians with an invitation to participate in an anonymous survey regarding the College's Quality Assurance program and Professional Portfolio requirements. A total of 610 survey responses were received. In April, 2019, continuing education providers were invited to participate in a discussion with the College regarding the College's current Quality Assurance program and Professional Portfolio requirements. The College received feedback from the following continuing education providers: Academy of Ophthalmic Education, Ontario Opticians Association and Opticians Association of Canada.

#### **For Consideration:**

At its meetings on February 28 and April 30, 2019, the Committee reviewed the above information and proposed the following revisions to the College's current QA program:

- Require members to upload/report QA requirements to the College via the Member Portal by December 31 of each year
- Develop an additional accreditation category to cover "professional growth" topics
- Require members to complete all jurisprudence chapters on a cycle basis
- Review the existing Multi-Source Feedback questions to ensure alignment with updated National Competencies and Standards of Practice

- Review benefits of conducting peer and practice assessments in-person or remotely
- Review conducting peer and practice assessments using case scenarios instead of behavior based

At its meeting on April 30, 2019, the Committee developed a draft definition of a new accreditation category covering professional development topics as follows:

Professional Growth: Content to enhance opticians as effective healthcare providers. Topics in this category may include: jurisprudence, patient relations or communications.

The Committee is proposing that in the new QA program, opticians be required to completed 4 self-directed hours, 4 accredited professional growth hours, 4 accredited contact lens hours, and 4 accredited eyeglass hours. The Committee will explore accrediting portions of the College's jurisprudence tool as a professional growth activity.

At its meetings on April 30 and May 14, 2019, the Committee reviewed a draft Quality Assurance Non-Compliance Policy and flow-chart outlining the process for members who fail to report or upload their QA requirements to the College by December 31. A draft QA Non-Compliance Policy is attached as Appendix A for consideration. A draft QA Non-Compliance Flow-Chart is attached as Appendix B for consideration.

The Committee will work to complete the additional proposed changes by the end of 2019.

### **Recommendations:**

The Quality Assurance Committee recommends that Council circulate the Committee's proposed changes to the QA program as well as the draft QA Non-Compliance Policy and flow-chart for stakeholder feedback.

## APPENDIX A

### Quality Assurance Non-Compliance Policy

---

#### Legislative Background

The *Regulated Health Professions Act (RHPA), 1991*, mandates that all health professionals in Ontario comply with a QA program prescribed by their College's Council which promotes continuing competency and ensures all members maintain a high standard of practice and professionalism in the public interest. To assist opticians in meeting these legislative obligations, the QA Committee has developed a QA program that requires opticians to engage in self-assessment and professional development each year through the completion of a Professional Portfolio. The RHPA also mandates that the Colleges establish mechanisms to monitor members' participation in, and compliance with, the Quality Assurance program. Section 9 of the College's General Regulation under the *Opticianry Act, 1991*, states that every member who holds a certificate of registration as a registered optician shall participate in the program and fulfil its requirements.

#### Intent

This policy outlines the College's Quality Assurance program requirements and the College's approach to member non-compliance.

#### Quality Assurance Program Requirements

##### Professional Portfolio Requirements

Every year by December 31, members are required to complete a Professional Portfolio.

##### Reporting Requirements

Every year by December 31, members are required to upload/report their accredited continuing education hours to the College via the Member Portal.

#### Non-Compliance Notifications

##### 1<sup>st</sup> Notification – Reminder Email:

After December 31 of each year, the College will identify all members who have not uploaded/reported the minimum amount of accredited continuing education hours to the Member Portal. The College will send a reminder email to these members requesting that they enter the information into their profile through the Member Portal **within 30 days** of the date of the email.

##### 2<sup>nd</sup> Notification – Final Reminder Letter:

After the submission deadline identified in the initial reminder email, the College will identify all members who have still not uploaded/reported the minimum amount of accredited continuing education hours to the Member Portal. These members will receive a letter from the Quality Assurance Committee requesting that the member:

1. Complete the outstanding requirements and upload/report the minimum amount of accredited continuing education hours **by no later than the date specified**; and

## APPENDIX A

### Quality Assurance Non-Compliance Policy

---

2. Submit a written response to the Committee that includes reason(s) for non-compliance and a plan of action **by no later than the date specified**.

#### Continuing Non-Compliance

Failure to provide a response by the dates specified in the final reminder letter or failure to comply with the Committee's requests may result in one or more of the following actions by the Quality Assurance Committee:

- Refer the member for a Peer and Practice Assessment (at the member's cost)
- Refer the member to the Inquiries, Complaints and Reports Committee (ICRC)\*

\*Under the Health Professions Procedural Code, failing to co-operate with the QAC is an act of professional misconduct. The name of the member and allegations against the member may be disclosed 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.

## APPENDIX B

Quality Assurance Non-Compliance Flow-Chart

---

All members must report/upload their accredited continuing education to the College by December 31 of each year.

