



Continuing Competency Program What You Need to Know



Saskatchewan Society of
Occupational Therapists

Presented by Richelle Ryan and Sandra Jones
May 10, 2013

Making Everyday Tasks Reachable



Objectives

- Update of Continuing Competency Program
- Understanding PDPOs
- Understanding Evidence
- Audit requirements



Background of CCP

- SSOT was given the privilege of Self Regulating Saskatchewan Occupational Therapists through provincial legislation, (The Occupational Therapists Act, 1997)



Background of CCP

- The Association of OT Regulatory Organizations (ACOTRO) mandated that all Canadian Regulatory bodies have a CCP in place or in development.
- It is SSOT's responsibility to protect the public by ensuring the ongoing competence of it's members

Continuing Competency Foundational Document



- Approved by SSOT Council in 2006
- Assist OTs to achieve, and to continue achieving beyond a minimum level of competence as outlined in the Essential Competencies of Practice for Occupational Therapists in Canada
- Enable OTs to become aware of and demonstrate their competency, maintaining the privilege of being licensed as an OT



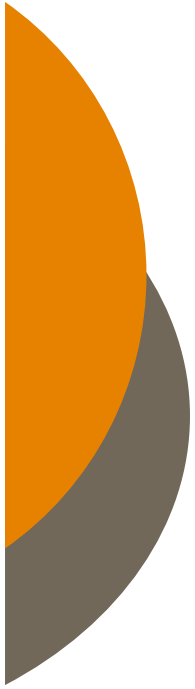
Assumptions About Competency

- Develop and demonstrate the required competencies to enter practice through successful academic prep at an accredited institution, fieldwork, and examination process
- Maintain and enhance competence through ongoing learning applied to their practice
- Many pursue and achieve excellence in their area beyond that described in Essential Competencies



Assumptions About Competency

- Excellence in one area does not compensate for weakness in another
- OTs who do not actively pursue continuing competency may fall behind as the profession advances



Background of CCP

- 2004-2009: SSOT CCP development
- 2010: SSOT Council approved the CCP Policies and Procedures
- 2011: Participation in the CCP became a requirement for practicing SSOT members.



2011

- All practicing SSOT members submitted a Professional Development Plan (PDP)
- Audit completed on 5% of SSOT members Professional Development Plan (PDP).
- Audit focused on quality of goals
- SSOT Mentorship Program was established.



2012

- Professional Development Plan and Outcomes (PDPO) replaced PDP
- Audit completed on 5% of SSOT members 2012 PDPO and evidence related to their 2011 PDP goals
- Audit focused on engagement in professional development and quality of goals and evidence



2013

- At renewal members required to submit their completed PDPO from previous year along with goals for upcoming year
- Essential Competencies of Practice for Occupational Therapists in Canada 3rd edition
- Clinical and Non Clinical Self Assessment Tools

Essential Competencies of Practice for Occupational Therapists in Canada 3rd ed



- Fine tuning of areas that were duplicative in previous edition
- Adjustments to reflect changes in practice context
- Includes descriptions of:
 - elements of competence
 - competencies for non clinical work
 - competencies related to interprofessional practice and teamwork
 - competencies related to client safety

Essential Competencies of Practice for Occupational Therapists in Canada 3rd ed



○ Requirements of OTs:

- Competent to practise safely, effectively, and ethically in his or her practice domain
- Autonomous in decision-making and accountable for his or her professional judgment
- Makes responsible decisions based on critical thinking, reasoning, and reflection related to current evidence
- Uses these competencies in diverse practice contexts
- Addresses occupational performance issues using a client-centred approach

Clinical vs Non-Clinical S.A.T.



- ANY amount of direct contact with a client → CLINICAL S.A.T.
- NO direct contact and/or responsibilities to a client → NON CLINICAL S.A.T.
- If OT fills roles in both → CLINICAL S.A.T



Examples of Clinical Situations



- Providing unpaid client services
- Communicating results of assessments
- Expressing opinion about client's condition that will assist in determining eligibility for benefits or funding for treatment
- Gathering information that will be used in the treatment/care of the client
- Clients involved in OT education
- Researchers or managers provide client services on part time basis

Clinical vs Non Clinical Competencies



	Clinical	Non Clinical
Assume Professional Responsibility	*	*
Think Critically	*	*
Demonstrates Practice Knowledge	*	
Utilizes an OT Process to Enable Occupation	*	
Communicates & Collaborates Effectively	*	*
Engages in Professional Development	*	*
Manages own Practice & Advocates Within System	*	*



Understanding PDPOs

- Working document
- Completed and updated annually (at minimum) OR sooner if goal becomes irrelevant or unattainable due to:
 - Change in practice area
 - Funding request declined
 - Course cancelled
 - Other unforeseeable circumstances



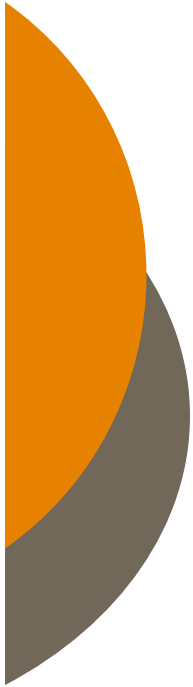
Understanding PDPOs

- Taking a leave from one's practice or position does not exempt members from participating in the CCP and completing PDPOs if the member chooses to continue to hold a Practicing License
 - Maternity Leave
 - LOA to volunteer, travel, etc.



Understanding PDPOs

- Goals to be written using S.M.A.R.T. format:
 - Specific
 - Measurable
 - Attainable
 - Relevant
 - Time Oriented



PDPO



Continuing Competency Program Professional Development Plan and Outcomes (PDPO)

Name: _____

Date Form Completed: _____

	Item No. from Self- Assessment tool	Goals	Strategies	Anticipated Completion Date	Outcomes/Evidence of Progress (indicate the location of evidence in portfolio)	Current Status
2013						<input type="checkbox"/> Completed Date: <input type="checkbox"/> In Progress <input type="checkbox"/> Omit (Reason)
2013						<input type="checkbox"/> Completed Date: <input type="checkbox"/> In Progress <input type="checkbox"/> Omit (Reason)



Example of PDPO Goals

	Item No. from S.A.T.	Goals	Strategies	Anticipated Completion Date	Outcomes/ Evidence of Progress	Current Status
2012	Clinical S.A.T. 3.1	I will increase my knowledge of cognitive assessments being used by OTs in acute care settings.	<ol style="list-style-type: none"> 1. Review assessments currently being used at St.Paul's Hospital. 2. Research online/journals for current assessments. 3. Work with respected colleagues to help identify when to use the appropriate assessment. 	October 31, 2012		<input type="checkbox"/> Completed Date: <input type="checkbox"/> In Progress <input type="checkbox"/> Omit (Reason)
2012	Clinical S.A.T. 5.2	I will complete a chart note within 7 days of seeing my client.	<ol style="list-style-type: none"> 1. Schedule 30 min. every day to chart. 2. Complete random chart audit of 7 clients every 3 months to check date of intervention and date charted. 	May 15, 2012		<input type="checkbox"/> Completed Date: <input type="checkbox"/> In Progress <input type="checkbox"/> Omit (Reason)

Example of Completed PDPO



	Item No. from S.A.T.	Goals	Strategies	Anticipated Completion Date	Outcomes/ Evidence of Progress	Current Status
2012	Clinical S.A.T. 3.1	I will increase my knowledge of cognitive assessments being used by OTs in acute care settings.	1.Review assessments currently being used at St.Paul's Hospital. 2.Research online/journals for current assessments. 3. Work with respected colleagues to help identify when to use the appropriate assessment.	October 31, 2012	1.List of articles read 2.Examples of assessments used: -Frontal Assessment Battery -Frontal Behavioural Inventory -MoCA -Exit 25 Interview 3.Learning Log 4.Reflection Journal 5. Certificate of completion for inservices (x2) attended. 6. Certificate for inservices (x2) provided to peers.	<input type="checkbox"/> Completed Date: X In Progress <input type="checkbox"/> Omit (Reason)

Example of Completed PDPO



	Item No. from S.A.T.	Goals	Strategies	Anticipated Completion Date	Outcomes/ Evidence of Progress	Current Status
2012	Clinical S.A.T. 5.2	I will complete a chart note within 7 days of seeing my client.	1. Schedule 30 min. every day to chart. 2. Complete random chart audit of 7 clients every 3 months to check date of intervention and date charted.	Sept. 15, 2013	Chart Audit Results Document : -11/14 charts had documentation within 7 days. 3/14 charts had documentation that was greater than 7 days.	X Completed Date: Sept. 12, 2012. <input type="checkbox"/> In Progress <input type="checkbox"/> Omit (Reason)



Understanding Evidence

- Demonstrates achievement of goals and ongoing learning
- May be related to goals identified on PDPO
- Demonstrate how learning influences the way one practices
- A way to consider things that went wrong as well as your successes



Examples of Evidence

- Certificates from courses, workshops, etc.
- Learning Logs
- Reflective Journaling
- Personal comments on your own work
- Research notes
- Extracts from lectures, books, journals
- List and handouts from Inservices (formal and informal) attended and/or provided
- Results of a chart audit
- Performance Evaluation

Creating a Learning Log & Reflective Journaling



- Begins with your own experience as a professional practitioner
- You are the expert in terms of what you have learned
- Although requires an investment of time initially in the long run it saves you time and energy
- Think of problems as opportunity for learning



Learning Log Example

Learning Log

Date: December 15, 2012

Learning Experience:

- A two hour webinar on Cognitive Assessments currently being used by Occupational Therapists in Canada

Conducted by:

- CAOT Lunch and Learn series 2012

What I learned:

- There are a large number of cognitive screens and assessments being used across Canada.
- How to choose the best assessment based on my initial screening and client's diagnosis.
- How to use the results of the assessment to help determine the most appropriate level of care.

Impact on Practice

- I am able to determine which assessment to use, in different settings in Acute Care. e.g Emergency Unit, Palliative Care, and a Medical Unit.
- I am confident of providing sound clinical reasoning when I recommend the most appropriate level of care for a client.

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Reflection Journal Example



Reflection Journal

Name: Sandra Jones **Date:** September 20, 2002

Learning Experience:

- A one day workshop on “Reflective Practice and Professional Portfolio Development.”

Conducted by:

Anne Kinsella and Ann Bossers.

Alberta Association of Registered Occupational Therapists.

What I learned:

- How to collect and validate my learning experiences.
- How to use this knowledge to reflect on achievements, problems encountered and how to use this moving forward, both professionally and personally.

Impact on Practice:

I will incorporate this knowledge to:

- Develop my own Professional Portfolio.
- Participate in a reflective practice process with peers.
- Support the Occupational Therapy group at my place of work, to develop a Portfolio.

Example of Evidence for Charting Goal



Chart Audit

Process:

- 14 charts were randomly selected from March 1, 2013-September 1, 2013

Results:

- 11 had assessment results and treatment plans documented within 7 days of initial assessment
- 3 had discharge notes documented within 20 days of last date of intervention/contact with the client

What I learned:

- I am efficient in documenting initial assessments but do not complete all of my discharge notes in a timely manner
- I need to develop a plan to ensure I complete discharge notes on all my clients within one week of his/her last intervention. This may include scheduling an additional 30 min. immediately after I see him/her to complete this instead of letting my charting pile up for the end of the week or month.

Strengthening Your Evidence



- Self Declaration statements
- List of education sessions attended
- Copies of handouts, presentations, course certificates, journal articles



- Statements, Learning Logs, and Reflective Journals to demonstrate impact on practice



2013 Audit Process

- A minimum of 5% of eligible members
- Random selection
- Selected members will be notified by September 1
- Selected members will be assigned an audit number



2013 Audit Requirements

- 2012 PDPO
- Evidence related to 2012 PDPO Goals
- 2013 PDPO
- Submission to be received by SSOT by October 1



2013 Audit Requirements



- PDPO Requirements:
 - Must have at least two goals
 - Goals must be related to Occupational Therapy Practice
 - Goals must be based upon the Essential Competencies of Practice for Occupational Therapists in Canada 3rd Edition
 - Goals must be specific, measurable and have an anticipated completion date

2013 Audit Requirements



- PDPO Requirements:
 - If goal is the same as previous year, the strategy must show progression
 - PDPOs must show reasonable progress towards completion of goals submitted the previous year



2013 Audit Requirements

- Evidence submission requirements:
 - Learning activities must be related to Occupational Therapy Practice
 - Documentation/evidence substantiates that the learning goals have been achieved or progress towards goal completion
 - If submitting evidence for a goal that has progressed from a previous year, ensure to send all evidence from beginning of goal to current so that progression can be determined



Submission of Evidence

- Submit only evidence related to goals identified on PDPO
- Documentation must be clearly organized in relation to PDPO goals
 - Digital format
 - Hardcopy documents
- Ensure client confidentiality-do not submit any client records or personal information



Audit Completion

- PPC Chair makes recommendations to SSOT Council
 - Audit criteria met: no further action required
 - Audit criteria not met:
 - Provide member with recommendations to improve his or her practice
 - Refer member to SSOT Mentoring Program
 - Request member be audited the following year
 - Other



SSOT Mentoring Program

- Established to support members by:
 - Helping to identify members' strengths, performance, and challenges as they relate to the development of their PDPO by using the Self Assessment Tool
 - Assisting in planning strategies to bridge the gap in the learning process



SSOT Mentoring Program



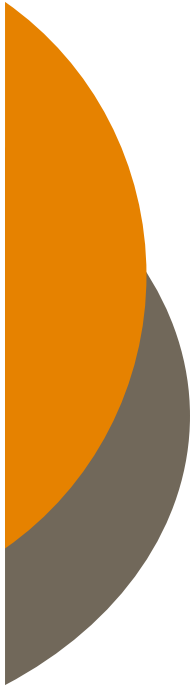
- Providing support, guidance and encouragement as the selected member develops their PDPO and compiles their evidence
- Acting as a facilitator or mentor while the selected member takes the actions necessary to achieve his/her goals



Summary

- Good submissions in the past two years
- Captures what we already do as OTs
- Learning process
- Journey we are all on together

“Continuing Competence is like rowing upstream, not to advance is a drop back” (COTM)



Questions???



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Contact Information

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