Continuing Competence Program

Special thanks to all those volunteers who worked tirelessly on this program over the last decade, without whom the CCP would not be where it is today.

Acknowledgements to Jenn Billeck, Gil Magne, & Leah Dlot in the preparation of the following presentation.
Outline

1. Overview of the Continuing Competence Program
2. Participation to date
3. Next steps
Continuing competency program

87(1) A council must establish, by regulation, a continuing competency program to maintain the competence of the members and to enhance the practice of the regulated health profession. The program may provide for, but is not limited to,

(a) reviewing the professional competence of members;
(b) requiring members to participate in programs intended to ensure competence; and
(c) conducting practice audits in accordance with this Act.
## Comparison of selected MB HCP Colleges

<table>
<thead>
<tr>
<th>Portfolio</th>
<th>Learning Goals</th>
<th>Multi-Source Feedback</th>
<th>Practice Audit</th>
<th>Jurisprudence</th>
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## Comparison of selected Cdn PT Colleges

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<th>Portfolio</th>
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<th>Exam</th>
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Why not mandatory Continuing Education hours?

1. Cannot guarantee that members will learn or apply learning to practice;
2. Members may select programs that are unrelated to their practice;
3. Formal education activities may be inaccessible to some members because of cost and/or geographic issues;
4. Programs that meet learning needs may not be available;
5. There is a lack of conclusive evidence that mandatory continuing education is an effective means of maintaining or increasing competence;
6. Mandatory continuing education should be considered as an approach to encourage professional development/ongoing learning but not as a direct measure on continuing competence.

National Framework for Assuring the Continuing Competence of Physiotherapists in Canada, 2000
Continuing Competence Program Philosophy

CPM’s Continuing Competence Program (CCP) values lifelong learning to promote and ensure competency in physiotherapists.

The program is built on the belief that physiotherapists are:
• Competent practitioners
• Motivated adult learners
• Able to select and implement continuing education tools
• Self-directed in achieving a change in knowledge and/or skills that becomes reflected in their practice
• Ethical practitioners.
Continuing Competence Program Goal

To promote high practice standards and allow registrants of the College to demonstrate continuing competence. The program will support registrants in maintaining their competence through participation in reflective practice activities and practice audits.
Continuing Competence Framework

Practice Reflection
- 100% participation annually
- 20% random selection annually to submit documents

Practice Audit
- ~5% selection annually
- On-site ~ every 5 years
- Anticipate pilot in 2016

Practice Support
- Participation as indicated
- Individually designed
Practice Reflection Component

GOAL

To promote self-assessment, professional accountability and practice reflection to continuously improve the quality of professional performance.
Practice Reflection Self-Assessment

• Physiotherapists are encouraged to:
  ✔ develop and maintain a Professional Portfolio
  ✔ develop & track two (2) personal Learning Goals annually
  ✔ develop related Accomplishment Statements one (1) year later.

• Randomly selected physiotherapists (~20%) will be required to submit documents, when requested, to the College for peer review.
Professional Portfolio

• provides opportunity to take time to reflect on your practice
• represents a tool for life
• provides evidence that learning has taken place
• can be applied to annual performance appraisals
• must be organized & easy to follow (e.g. by year; by topic)
• can be electronic or hard copy (examples)
Professional e-Portfolio
Professional e-Portfolio
Professional e-Portfolio
Professional e-Portfolio

<table>
<thead>
<tr>
<th>LEARNING PLAN: Goal 1</th>
<th>2015</th>
</tr>
</thead>
</table>

**Professional Development: Goal for this Year**

- I want to learn how and become efficient at electronic charting at my place of employment.

**Please identify the intended service user for this goal:**

- Self, employer, colleagues, students.

**List proposed learning activities and resources you need to achieve your goal:**

- Take a training workshop in e-charting at my workplace; consult with colleagues about any tips and/or difficulties; seek additional help from training manual or on-line resources; review CPM’s Practice Standard 4.17 on Record Keeping (Section B. Electronic Record Guidelines).

**Indicators of Success: Which objective measures will you monitor to ensure you have met your goal?**

- By the end of the year,
  1. 75% of my charting will be completed electronically;
  2. The time needed to submit the e-chart will be reduced by 50%;
  3. My colleagues will refer to my e-chart entries either in their own notes, in discussion or at rounds at least three times.

- I will benefit from this by reducing my stress level related to this new skill; my employer will benefit by my increased efficiency; my colleagues will benefit by easy access to legible notes; my students will benefit by my expertise and modeling.

**Target Date for Completion:** 09/30/2015

**Date:** 01/21/2015

**ID Number:** XXXX

Please complete and attach to your Professional Portfolio. The completed sheet will be requested when your Portfolio is audited.
Professional e-Portfolio

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## Professional e-Portfolio

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Professional Portfolio

Advantages

- develops reflection skills
- identifies your areas of strength
- identifies short and long-term learning
- prioritizes short and long-term goals
- identifies learning strategies to accomplish goals
- assesses the impact of this learning on your practice
- demonstrates the extent of your professional growth and development
Professional Portfolio

Include

• 2 learning goals, activity tracking sheets and 2 accomplishment statement sheets annually *(mandatory)*
• documentation of learning activities (e.g. critical reviews of articles read, projects undertaken, pathologies seen, teaching sessions attended)
• description of learning outcomes
• record of events and/or experiences (e.g. committee work, student supervision, practice mentor)
Learning Activities

Learning Goals, Tracking of Learning, Accomplishment Statements

All forms & guides available on-line
Developing relevant goals

Consider the following:

1. Your own context of practice
e.g. setting, clientele

2. List any areas/knowledge/skills you feel you could improve in
e.g. clinical care, education, administrative, research

3. Who will be impacted?
e.g. patients, employees, students, colleagues

4. Keep it simple yet clear
Avoid acronyms or abbreviations
Developing relevant goals

Learning activities & resources

What do you need in order to reach your goals?
Require a mixture – course, reading, discussion

Indicators of success

How will you know if you achieved your goals?
How will your goals impact your service user(s)?
What do you expect your future practice to change as a result?
3 requirements for goal setting

1. Learning activities need to be a mixture and relevant to your goal;

2. You need to be able to demonstrate that your learning contributed to the quality of your practice and service delivery (if it does not, explain why not);

3. You need to be able to demonstrate that your learning benefited the service user(s).
Learning Goal (example)

**Goal:** I want to learn how and to become efficient at electronic charting at my place of employment by the end of the year.

**User(s):** self, employer, colleagues, students.
Learning Goal (example cont’d)

**Learning Activities / Resources:** Take a training workshop in e-charting at my workplace; consult with colleagues about any tips and/or difficulties; seek additional help from training manual or on-line resources; review CPM’s Practice Standard 4.17 on Record Keeping (Section B. Electronic Record Guidelines).
Learning Goal (example cont’d)

**Indicators of success:** By the end of the year,
1. >75% of my charting will be completed electronically;
2. The time needed to submit the e-chart will be significantly reduced (from 20 mins to 10 mins per chart entry);
3. My colleagues will refer to my e-chart entries either in their own notes, in discussion or at rounds at least three times.

I will benefit from this by reducing my stress level related to this new skill; my employer will benefit by my increased efficiency; my colleagues will benefit by easy access to legible chart notes; my students will benefit by my expertise and modeling.
Tracking of Learning Activities

• Tracking sheet available on-line
• On-going throughout the year
• Keep in your portfolio
• Will help you complete Accomplishment Statements the following year
# LEARNING ACTIVITIES TRACKING SHEET

**Goal:**

<table>
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<tr>
<th>Educational Experience/Activity</th>
<th>Name of Provider (facilitator, self-directed etc.)</th>
<th>Date/Location</th>
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**Impact on my practice:**

**Comments/Evaluation:**

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<tr>
<th>Educational Experience/Activity</th>
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**Comments/Evaluation:**

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**Impact on my practice:**

**Comments/Evaluation:**

Please complete and attach to your Professional Portfolio. The completed sheet will be requested when your Portfolio is audited.
# Tracking of Learning Activities

<table>
<thead>
<tr>
<th>Goal: efficient at electronic charting</th>
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</thead>
<tbody>
<tr>
<td><strong>Educational Experience/ Activity</strong></td>
</tr>
<tr>
<td>Took hospital e-charting workshop</td>
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**Impact on my practice**
I now know how to log on; review other notes; and chart without checking manual every time.

**Comments/Evaluation**
This was a great introduction but I need to practise. It still takes me about 2X as long as doing a hard copy chart note. I need to check with my colleagues if they know of any shortcuts.
Completion of Accomplishment Statements

• Review the goals from the prior year
• Describe the activities you have done to reach your goal over the past 12 months
• Describe how these activities have impacted your practice and what change(s) you may have made as a result
• What has changed for the service user(s)?
Accomplishment Statement (example)

**Goal:** I want to learn how and to become efficient at electronic charting at my place of employment by the end of the year.

**User(s):** self, employer, colleagues, students.

**Status:** Please check one.

- [x] Completed
- [ ] Ongoing
- [ ] Other - (please explain)
Accomplishment Statement (example)

Accomplishment Statement
After taking a workshop, consulting with the manual and my colleagues, I think I have finally mastered e-charting. I am sure there are still shortcuts I can learn, but I can now log on, enter my chart note and read other chart notes in as much time as it took me to do it in the old hard copy chart (~10-12 mins). I still make some typos and don’t type very fast, but at least I know everyone else on the team can read my notes.

I believe I have met my goal as my e-notes have been referenced during discharge rounds on more than 1 occasion. I have even got to the point where I have helped other team members with their own e-charting!
Review of Practice Reflection

Learning Goals & Accomplishment Statements
Practice Reflection Peer Review Process

Developed by Manitoba physiotherapists for Manitoba physiotherapists including:

- Online submission and review of 20% of randomly selected registrants
- Learning Goal Sheets or Accomplishment Statement sheets
- Review form
- May be requested to resubmit
- Continuing to be refined thanks to registrant feedback

Continuing Competence Evaluation Committee consisted of 10 PTs in 2015

- Work in pairs to review each submission for completion and reflection on practice

College of Physiotherapists of Manitoba
“Building Confidence Together!”
## On-line Submission

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<th>Year</th>
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Practice Reflection Participation Rates

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<tr>
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<tbody>
<tr>
<td>Learning Goals</td>
<td>48%</td>
<td>51%</td>
</tr>
<tr>
<td>Accomplishment Statements</td>
<td>47%</td>
<td>72%</td>
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</table>
Practice Reflection Completion Rates

- **Learning Goals**
  - 2014: 71%
  - 2015: 89%

- **Accomplishment Statements**
  - 2014: 90%
  - 2015: 90%
Evaluation of 2014 Reflective Practice Program

• Commissioned from Dr. Marla Nayer, PT from ON
• On-line survey accompanying 2014 submissions
• 50% response rate of 179 participants
• Results:
  • 50% reported that the portfolio was educational & assisted in setting learning goals
  • 80% reported that they had created a plan to achieve their learning goals
  • 74% reported that they made changes in their practice as a result of their learning activities over the past year
  • 10% disagreed that the process provided sufficient guidance
Next Steps

• Further refinement of the Practice Reflection component

• Contribution to the development of necessary Regulations
## Continuing Competence Framework

| Practice Reflection | • 100% participation annually  
|                     | • 20% random selection annually to submit documents |
| Practice Audit      | • ~5% selection annually (n=40)  
|                     | • On-site ~ every 5 years  
|                     | • Anticipate pilot in 2016 |
| Practice Support    | • Participation as indicated  
|                     | • Individually designed |
Practice Audit Component

GOAL

To allow registrants to demonstrate competency while providing a positive learning experience.
Practice Audit Philosophy

The Practice Audit will verify that physiotherapists are competent practitioners.

In addition, the Practice Audit will
• provide an educational experience for the physiotherapist
• be relevant to the physiotherapist’s current role(s) and accountabilities
• be applicable to all contexts of practice
• be feasible in terms of cost and time
• assess what a physiotherapist actually does
• be acceptable to the profession.
Practice Audit

Main foci
1. Professional portfolio review (e.g. annual learning goals, reflection)
2. Record keeping evaluation (e.g. record storage, comprehensiveness)
3. Practice issues evaluation (e.g. infection control, informed consent)
4. Selected chart recall (6) (e.g. relevance of findings, missing data)

Where relevant
Business practices evaluation (e.g. fee schedule, advertising)
Next Steps

• Finalization of the Practice Audit component
  • Acknowledgements to CPO for sharing of documents & June/2014 workshop participants
  • Approval of Practice Audit forms
  • Development of job description for Practice Auditors
  • Recruitment and training of Practice Auditors
  • Pilot anticipated in next two years

• Contribution to the development of necessary Regulations
Continuing Competence Framework

Practice Reflection
- 100% participation annually
- 20% random selection annually to submit documents

Practice Audit
- ~5% selection annually
- On-site ~ every 5 years
- Anticipate pilot in 2016

Practice Support
- Participation as indicated
- Individually designed
Practice Support Component

GOAL

To support Registrants in deficient areas of clinical practice as identified through the Practice Audit process.
Practice Support Philosophy

Practice Support will address Registrant deficits in the areas of physiotherapy-related knowledge, skill and/or judgement that are felt to be necessary to ensure public safety and confidence in the physiotherapy profession in Manitoba.

The Practice Support program will be individually designed to support the needs of Registrants throughout the process, from self-assessment to implementation of a relevant learning plan.
# Continuing Competence Committees, 2015

## Continuing Competence Committee
- Katie Dyck, Chair
- Laura Harder
- Kathy Johnson
- Jan Lumsden
- Ray Hoemsen

## Continuing Competence Evaluation Committee
- Thom Berzish
- Olivia Coneys
- Lindsay Clarke
- Sarah Eisbrenner
- Dan Fillion
- Maxine Koroscil
- Danny Halpin
- Leah Lindsay
- Gil Magne
- Megan Senchuk
- Lori Weiman

## Practice Audit Development Contributors
- Heather Martin-Brown
- Gisele Pereira
- Susan Bowman
- Darryl Penner
- Rachel Hamm
- Barb Shay
- Monique Levesque
- Chet Yoder

Thank you!!
Questions?

Feedback and ideas welcome!

Staff in-services available; e-mail me at moni.cpm@manitobaphysio.com