



2010

# Respiratory Therapists Continuing Competency Program

Owner

Nova Scotia College of Respiratory

Therapists

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## Introduction

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Respiratory Therapists in Nova Scotia are members of a self regulated health profession. The Nova Scotia College of Respiratory Therapists is the body that regulates the practice of Respiratory Therapy and governs its members in accordance with the Respiratory Therapists Act and the Regulations to: insure they have the capacity, competence, capability and character to safely and ethically practice Respiratory Therapy.

The NSCRT assures entry to practice competence by ratifying a competency profile for Respiratory Therapists, endorsing accredited educational institutions and entry to practice examinations. Respiratory Therapists continuing competency is regulated by requiring minimum practice hours and compliance with a continuing competency program.

The following **Continuing Competency Program** outlines the requirements a Respiratory Therapist must meet to continue to practice in Nova Scotia. These requirements include the minimum practice hours, activities that promote professionalism and professional behavior, and continuing education requirements.

A list of **Recognized Methods of Learning** defines ten categories of learning activities and assigns point value to each category.

The **Standards of Practice for Respiratory Therapists** are provided to guide reflection on your current competencies as a Respiratory Therapist.

**A Practice Assessment Guide** will assist to define the duties and activities of your practice.

**My Learning Goals** outline how you wish to enhance your knowledge and/or skill .

**The Professionalism/ Continuing Education Credits Log** is provided to: record your learning activity or professional development activity and relate how it applies to your practice, and the goals you have established. Record learning activities and points on the log to assure you achieve a minimum **total of 20 points** throughout the licence year, April 1<sup>st</sup> to March 31<sup>st</sup>.

The Registrar will continue to conduct a random audit of 10% of the membership annually. When you are selected for an audit you will receive notification from the Registrar with direction to submit a copy of your **Practice Assessment, Professionalism/Continuing Education Credits Log, and verification of hours worked in the past year** by the date outlined in the notification. The Registrar will contact you if there are any questions or concerns about your portfolio. Once your portfolio has been reviewed the Registrar will notify you in writing.



## Continuing Competency Requirements

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### **Hours of Work**

An RT must have worked at least 1500 practice hours in the previous 4 years. Record the number of practice hours in the past year on the Registration Renewal Form.

### **Professionalism: one point for each activity or one point for each shift of mentorship/preceptorship – minimum of 5 points required**

Professionalism is defined as the following activities: revisit these categories particularly volunteerism and communication

- Interprofessional Interaction: presenting at multidisciplinary rounds, serving on interprofessional committees, providing education or inservices to members of other health professions, other interprofessional activities;
- Volunteerism: serving as a member of the NSCRT Board or a committee; promotion of Respiratory Therapy, health and wellness promotional activities, serving as a member of a health related organization;
- Mentorship/Preceptorship: respiratory therapy students, new respiratory therapy staff, healthcare staff other than respiratory therapists;
- Communication: activities and/or learning experiences directed toward maintaining or improving verbal and written communication skills. Some example activities are: participation in community activities such as coaching, school advisory council, leadership opportunities within the community, committee work, etc.

### **Continuing Education: minimum of 15 points required**

You are required to have activities from a minimum of 4 categories of recognized methods of learning that are directly related to your practice and/or identified learning goals for the year. Recognized methods of learning are outlined as follows with assigned points.



## Recognized Methods of Learning

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### **1. On the Job**

Participation in multidisciplinary patient rounds, teaching rounds, or attendance at grand rounds with subject matter identified and related to your practice or learning goals. Development/revision or audit of policies and procedures. Educational module design. Continuing education activities offered or approved by employers that are related to your practice or learning goals.

**1 point for each activity**

### **2. Journal Review**

Participation in Journal Clubs or independent review of a journal article related to your practice or learning goals. Provide a brief summary of the content.

**1 point for each article reviewed; 1 additional point for leading a journal club**

### **3. Inservices**

Presentations, given or attended, on specific topics such as new equipment, medication, therapy, diagnostic procedure, etc. Inservices may be in person, by teleconference, webex, telehealth, etc. Identify subject matter and relate it to your practice or learning goals.

**1 point for each inservice attended, 2 points for inservice presented,**

### **4. Lectures**

Formal lectures attended or given at a conference or group setting, or by electronic means such as teleconference, webinar, telehealth. Identify the subject matter of the lecture and relate it to your practice or learning goals.

**1 point for each lecture attended; 2 point for lecture presentation;**

### **5. Interactive Workshops**

Hands-on interactive learning activities that are designed to improve skills and competencies. Identify the skills and competencies targeted by the workshop. Relate the learning activity to your practice or learning goals.

**1 point for each hour of workshop attended, 2 points for each hour of workshop presented**



## **6. On Line Learning**

Tutorials or courses offered on line with identified continuing education credits assigned. There must be a copy of a certificate of completion or a completed test submitted. Relate the learning activity to your practice or learning goals.

**1 point for each hour of the course or the number of points assigned to the course**

## **7. Certification Courses**

Recognized courses that provide certification in specific skills or competencies such as BCLS, ACLS, PALS, NRP, ACORN, STABLE, ECMO. Relate the activity to your practice or learning goals. Must submit a copy of the certificate.

**1 point per hour to a maximum of 5 points for each completed course**

## **8. Formal Education Program**

Credit courses provided by an educational institution to further your professional education. Completion of programs that provide additional professional certification such as COPD Educator or Asthma Educator, etc. Must submit a copy of certification.

**5 points for each course completed within a program**

## **9. Research**

Hours involved in the acquisition of data and literature searches related to a formal research project. Include a paragraph summary of activities, findings and include the senior researcher's name and title.

Hours involved in the development of a research proposal. Must submit an approved proposal.

**1 point for each hour dedicated to a specific research project to a maximum of 5 points.**

## **10. Published Articles**

Required to submit the article published. If the article is related to formal research the associated research will be credited under the research heading above.

**5 points for each article written for publication**



## Standards of Practice for Respiratory Therapists

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### **SPECIALIZED BODY OF KNOWLEDGE**

Respiratory therapists possess a specialized body of knowledge, and base the performance of their duties on respiratory therapy theory and practice.

Respiratory therapists are essential members of the healthcare team, and assume a variety of roles in different areas of practice, such as clinical, education, health promotion, management, research, administration, and consulting.

Respiratory therapists practice independently, interdependently, and collaboratively, and may practice within legislated professional regulations.

### **SAFE PRACTICE AND APPLICATION OF KNOWLEDGE AND TECHNOLOGY**

Respiratory therapists safely and effectively apply their skills, knowledge, and judgment based on the needs of their patients.

Respiratory therapists are committed to quality outcomes, and intervene so as to contribute to the best possible outcomes for their patients.

Respiratory therapists who are involved with technical procedures must do so in accordance with any regional, provincial, or manufacturer standards or recommendations. These procedures must incorporate best practice standards, and should be research based.

Respiratory therapists, in consultation with peers, relevant others, equipment manuals, and CSA guidelines shall select, operate and maintain equipment to provide safe, effective care.

Respiratory therapists ensure that all equipment is appropriately cleaned, disinfected or sterilized, and is properly maintained and calibrated by trained personnel.

Respiratory therapists will notify and discuss with the physician if he or she feels the ordered therapy/diagnostic procedure is inappropriate for the patient's condition. The respiratory therapist may refuse to perform such therapy/diagnostic procedure if they feel that it is detrimental to the patient. Such refusal must be made clear to the physician and be documented.



## **COMMUNICATION AND COLLABORATION**

Respiratory therapists shall understand the objective of the ordered therapy/diagnostic procedure and will clarify with the physician if necessary.

Respiratory therapists will inform the patient of the therapy/diagnostic procedure that will be performed, respecting the personal and legal rights of the patient including the right to informed consent and refusal of treatment.

Respiratory therapists will maintain effective communication with members of the healthcare team regarding the patient's status and progress.

Respiratory therapists will institute immediate supportive measures and notify relevant members of the healthcare team in the event of deterioration of the patient's condition.

Respiratory therapists will document all information relevant to the provision of care as per organizational policies and procedures.

## **ASSESSMENT**

Respiratory therapists will determine the initial clinical status of the patient, and ensure the ordered therapy/diagnostic procedure is consistent and correct for the patient's condition.

Respiratory therapists will collect data from the patient, the patient's family, members of the healthcare team, health records and reference material to identify the patient's level of function as well as relevant risks affecting and factors contributing to the patient's health.

## **PLANNING**

Respiratory therapists will develop and implement the plan of care in collaboration with members of the healthcare team.

Respiratory therapists use evidence-based knowledge in selecting strategies and interventions.

Respiratory therapists select strategies and interventions according to their effectiveness, efficiency and suitability in relation to the goals of the plan, and ensure that the goals of the plan are appropriate for each patient.

Respiratory therapists will maintain, modify, or discontinue the plan in consultation with members of the healthcare team.



## **EVALUATION**

Respiratory therapists will evaluate the effectiveness of strategies and interventions by comparing actual outcomes to anticipated outcomes.

Respiratory therapists will use the results of the evaluation to improve policies and procedures in respiratory therapy practice related to patient care.

Respiratory therapists will evaluate his/her performance of individual procedures and overall practice.

## **PROFESSIONAL ACCOUNTABILITY AND RESPONSIBILITY**

Respiratory therapists are accountable for meeting the ethical and legal requirements of the profession of respiratory therapy.

Respiratory therapists shall follow sound scientific procedures and promote ethical behaviour in practice and in research.

Respiratory therapists shall demonstrate behaviour that reflects integrity and compassion, supports objectivity, and fosters trust in the profession and its professionals.

Respiratory therapists shall report unsafe practice or professional misconduct of a peer or other healthcare worker to appropriate authorities.

Respiratory therapists will provide care without discrimination on any basis, with respect for the rights and dignity of all individuals.

Respiratory therapists shall refrain from indiscriminate and unnecessary use of resources, both economic and natural, in their practice of the profession.

Respiratory therapists promote disease prevention and wellness.

Respiratory therapists promote the growth of the profession, and present a positive image of respiratory therapy to the community.

## **CONTINUING EDUCATION AND COMPETENCE**

Respiratory therapists are committed to life-long learning to upgrade their knowledge and skills in order to keep their practice current.

Respiratory therapists shall assume responsibility for maintaining competence in their practice of respiratory therapy, and shall seek opportunities for professional growth.



Respiratory therapists shall acknowledge limitations in their knowledge, skills, or judgment, and will function within those limitations.

Respiratory therapists strive for excellence in the profession by participating in, and promoting the use of self-assessment tools as well as obtaining feedback from appropriate others in order to determine and improve their knowledge, skills, and judgment.



## Practice Assessment Guide

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Name \_\_\_\_\_

Year \_\_\_\_\_

**Area of Practice:** (check all that apply)

<input type="checkbox"/> Critical Care/ER	<input type="checkbox"/> Polysomnography	<input type="checkbox"/> Anesthesia	<input type="checkbox"/> Health Promotion
<input type="checkbox"/> Air Transport	<input type="checkbox"/> General Therapeutics	<input type="checkbox"/> Home Care	<input type="checkbox"/> Education Asthma/COPD
<input type="checkbox"/> Rehabilitation	<input type="checkbox"/> Diagnostic	<input type="checkbox"/> Research	<input type="checkbox"/> Education Professional
<input type="checkbox"/> Management	<input type="checkbox"/> Hyperbaric Medicine	<input type="checkbox"/> Other: _____	

### Duties and Activities of My Practice

Done Daily	Done Weekly	Done Occasionally	Done Rarely but Required



## My Learning Goals

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Based on the duties of my position and after review of the Standards of Practice for Respiratory Therapists I wish to enhance my knowledge and/or skills in the following areas:




## Professionalism/Continuing Education Credits Log

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Date: Points:	Professional Activity or Method of Learning	How it applies to my Practice/Goals



Date: Points:	Professional Activity or Method of Learning	How it applies to my Practice/Goals



## Frequently Asked Questions

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**Q. What do I need as proof of hours worked?**

A. An RRT is required to work at least 1500 hours in a 4 year period. If requested this could be provided by the employer.

**Q. How long should I keep supporting documents for my CECs?**

A. All documents should be kept until March 31<sup>st</sup> of the following year. However you may benefit from keeping a learning log over several years.

**Q. What are the consequences of not having obtained the required number of CECs?**

A. The required number of CECs must be met or exceeded each year or the RRT could be denied their license or issued a license with conditions.

**Q. If I exceed the required number of CECs, can I bring them forward into the next year?**

A. At this time the CECs are required on a yearly basis. They cannot be transferred to the next year.

**Q. Does a learning activity have to be related to a learning goal?**

A. Your learning activities should meet the goals you have established. However other education opportunities are valuable provided you can relate them to your practice.

**Q. Can I get points for volunteering outside of Health Care?**

A. Yes. The College encourages involvement on the Board/Committees of the NSCRT and other Health related organizations. It also recognizes and encourages involvement in the community as it supports professional



development. These points are captured under the Communication category of Professionalism.

**Q. Is the Practice Assessment Guide meant as a guide for the individual or an auditing tool for the Registrar?**

A. It is definitely a guide for the RRT. Once you complete the guide it can be kept from year to year. It will need to be modified if your practice changes and/or new duties are introduced. The Registrar will request it for audit purposes to establish your area of practice.

**Q. What “on-line learning” is accepted?**

A. Accepted “on-line” learning activities must have identified credit hours or CEC points associated with the course, must include testing and completion certificate. All other on-line activities may be captured under inservices or lectures in the recognized methods of learning guide.

**Q. If an educational event already has assigned points from another professional body, can I use these points?**

A. Yes, if the learning activity can be related to your practice and is certified by another professional body you can use these points.