



Nova Scotia College of Respiratory Therapists

Policy Title: Audit Assessment Criteria Policy	
Date Approved: January 6, 2020	Category: Registration
Date of next revision:	Authority: Act S 2(E) (H), 4 (G), 10(F) (O) Regulations S 10(d), 13 General Bylaws C (1,2)

Policy Statement:

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 ensure members have the capacity, competence, capability and character to safely and ethically practice Respiratory Therapy.

The Continuing Competency Program (CCP) is a tool developed by the NSCRT Credential Committee to ensure that all licensed members of the College maintain and further develop the competencies required to safely, competently and ethically provide clinically appropriate care. Through an annual review of randomly selected audits of professional portfolios, the NSCRT ensures members comply with this mandatory program. An audit assessment criteria rubric (AACR) is used to score audited professional portfolios and determines whether the member's portfolio is deemed compliant or non-compliant within the CCP requirements.

Definitions:

- **Assessor** – The person who evaluates the compliance of a member's professional portfolio with the requirements of the continuing competency program.
- **Audit** – An official review by the NSCRT of members' practice and/or practice areas, generally performed through a review of professional portfolios.
- **Audit Assessment Criteria Rubric (AACR)** - An audit scoring system, listing all required components of the Continuing Competency Program, used in the review of professional portfolios to determine compliance.
- **Competence** – The ability to integrate and apply the knowledge, skills and judgement required to practise safely and ethically in a designated role and practice setting and includes both entry-level and continuing competencies.
- **Compliant** – Having all components of a professional portfolio be in accordance with the standards of the Continuing Competency Program.
- **Continuing Education Credits (CECs)** – activities that have been defined as eligible under the continuing competency program.



Nova Scotia College of Respiratory Therapists

- **Continuing Competency Program (CCP)** – is a regulatory program and quality assurance mechanism that ensures ongoing education is taking place for all active practice members of the College, and includes members of the non-practicing class, members on maternity, parental or sick leave, or members who registered late in the year.
- **E-Volve E-learning module** – A mandatory, online continuing education credit developed by the College to assist registrants in acquiring information relevant to practice and to maintain currency.
- **E-Volve Self-Assessment Tool** – A mandatory, online assessment tool developed by the College to assist registrants in self-identifying areas of professional development.
- **Learning Log** – An online record, located on NSCRT members' portal, where identification of learning goals, resources, timelines, learning activities and self-reflection are recorded.
- **Non-compliant** – Failing to have any component of a professional portfolio be in accordance with the standards of the continuing competency program.
- **Professional Portfolio** – An online record of members' completed e-learning module, practice self-assessment, learning log, and record of practice hours.
- **Random Selection** – A defensible, transparent method of choosing members for professional portfolio review, where all individuals have an equal chance of being selected.

Policy/Procedure:

The assessor will review each submission and examine each of the criteria in the rubric to determine compliance or non-compliance. To be considered compliant, the member must successfully meet all listed requirements and submit all documents as per the College's CCP guidelines, by-laws, and policies. The following list contains the requirements of the audit assessment criteria rubric (AACR):

1. Receipt of professional portfolio by the submission deadline, as stated in the College's Audit policy (exceptions made in extenuating circumstances only and require communication with the Registrar before approval may be obtained).
2. Members who are late without a deadline exception granted are automatically selected for audit the following license year.
3. Late submission of a professional portfolio does not contribute towards scoring and will not be considered in the determination of member compliance with the CCP.
4. Required CECs and self-assessment for compliance with the CCP includes:
 - a. Completion of the online, E-Volve E-learning module CEC, prior to the license renewal deadline.
 - b. Completion of E-Volve Self -Assessment Tool **(2021 implementation date)**.



Nova Scotia College of Respiratory Therapists

- i. Identification of a Quality or Qualities from the Proficient Respiratory Therapist Framework, as part of a registrant's self-assessment.
 - ii. Identification of two competencies (goals) chosen from the NCF Core and Clinical Competencies related to the chosen framework quality.
 - Goals chosen can be from same quality or from two different framework qualities.
 - One goal must be a Core Competency and the other can either be a Core or Clinical competency.
 - c. Completion of online Learning Plan
 - i. Identification of learning objectives, prior to the license renewal deadline.
 - Learning objectives identified (minimum of 2)
 - Resources identified (reading, hands on practice, simulation, course, conference, etc.)
 - Target date for completion identified.
 - ii. Completion of learning plan with audit submission
 - Learning objective the activity was related to identified.
 - Learning activity/CEC acquired identified
 - Resources used identified, ensuring they are directly attributable to the objective described.
 - Learning objective completion date identified.
 - iii. Self-Reflection
 - Self-reflection completed.
 - Related to competencies chosen, resources, and learning activities used.
 - Incorporation into member's day to day practice evident.
5. Submission deemed compliant.
6. Submission deemed non-compliant and referred for remediation.
7. Remediation plan for non-compliant submission:



Nova Scotia College of Respiratory Therapists

- a. Communication with member.
 - b. Remediation plan discussed and adopted.
 - c. Target date for completion.
 - d. Remediation successful.
8. Remediation unsuccessful:
- a. Communication with member.
 - b. Member's portfolio submission result and related data forwarded to credentials committee.

References:

Respiratory Therapists Act S.N.S. 2007. c. 13.

Available at: <https://nslegislature.ca/sites/default/files/legc/statutes/respther.htm>

Respiratory Therapists Regulations made under Section 10 of the Respiratory Therapists Act

Available at: <https://www.nscrt.com/pdf/resources/regulations.pdf>

Nova Scotia College of Respiratory Therapists General Bylaws June 2008; Amended November 2018. S. (B) (C).

Available at: https://www.nscrt.com/images/2016_NSCRT_bylaws.pdf



Nova Scotia College of Respiratory Therapists

Appendices:

Audit Scoring Sheet

Member Name	Member #
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PROFESSIONAL PORTFOLIO SUBMISSION DATE	ON TIME	EXCUSED LATE	LATE	FLAG FOR AUDIT NEXT YEAR

E-LEARNING MODULE COMPLETE	YES	NO

E-VOLVE SELF ASSESSMENT TOOL	YES	NO
Quality or qualities identified from framework		
Core competency identified for learning plan		
2nd competency identified for learning plan		

LEARNING PLAN	YES	NO
Learning Objectives Identified		
Potential Resources Identified		
Target Date for Completion Selected		
Learning Activities Identified and Linked to Objective		
Resources Used Identified		
Completion Date Identified		

SELF REFLECTION	YES	NO
Self-Reflection Complete		
Self-Reflection Related to Competencies chosen, Learning Activities used, and Learning Plan		
Self-reflection demonstrates incorporation into registrant's day to day practice		



Nova Scotia College of Respiratory Therapists

Notes on Self-Reflection Section:

PORTFOLIO SUBMISSION DEEMED COMPLIANT	YES	NO

PORTFOLIO REFERRED FOR REMEDIATION	Date

Assessor's signature _____

Date: _____

REMEDIATION PLAN FOR REGISTRANT

REMEDIATION PLAN	YES	NO
Communication with Member: Date -		
Remediation Plan discussed and agreed upon		
Target date for completion: Date -		
Remediation plan successful and submission deemed compliant		

REMEDIATION UNSUCCESSFUL	YES	NO
Communication with Registrant: Date		
Member's Portfolio and Audit submission file referred to BOD		

Assessor's signature _____

Date: _____



Nova Scotia College of Respiratory Therapists

Version History	
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